



Self-harm data, 2018

CHO Area 6

For the period from 1 January to 31 December 2018, the Registry recorded 12,588 self-harm presentations to hospital that were made by 9,785 individuals nationally. Table 1 presents an overview of the number of persons with self-harm presentations in CHO 6 and LHOs within CHO 6 during 2018, and the corresponding European age-standardised rate per 100,000 population.

Table 1: Number of persons with self-harm presentations in CHO 6 and person-based European age-standardised rates (EASR) per 100,000

		Persons	Age-standardised rate per 100,000
Dublin South East	Male	66	104
	Female	99	159
Dun Laoghaire	Male	85	137
	Female	133	202
Wicklow	Male	102	187
	Female	139	239
CHO Area 6	Male	253	139
	Female	371	196

In 2018, 253 male and 371 female persons presented to EDs in CHO Area 6 following an act of self-harm. This resulted in a total of 624 individuals presenting to the EDs in this area during 2018. These 624 individuals were treated for a total of 781 self-harm presentations.

Taking into account the population, the rate of persons presenting to hospital following an act of self-harm was 139 and 196 per 100,000 for males and females respectively. Nationally, the rate of self-harm for males and females was 193 and 229 per 100,000 respectively.



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Table 2 presents a breakdown of the total number of presentations in CHO 6 by age and gender.

Table 2: Number of presentations in CHO 6 by age and gender

	0-19yrs	20-24yrs	25-34yrs	35-44yrs	45-54yrs	55+yrs	Total
Male	61	53	76	54	55	23	322
Female	139	46	75	76	62	61	459

In 2018, there were a total of 781 self-harm presentations to EDs in CHO Area 6. There were 322 male and 459 female presentations. Presentations were highest for males aged 25-34 years (24%) and females aged under 20 years (30%). More than one in five (26%; 200) self-harm presentations involved individuals younger than 20 years of age.

Table 3 presents an overview of the methods of self-harm reported.

Table 3: Method of self-harm

Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self-cutting
545 (70%)	245 (31%)	21 (3%)	57 (7%)	10 (1%)	215 (28%)

*This includes presentations where alcohol was involved (not just where alcohol was the main method of self-harm)

Drug overdose was the most common method of self-harm, involved in 70% of presentations. Alcohol was involved in 31% of presentations. Self-cutting was the only other common method, involved in 28% of presentations. There were 57 presentations involving attempted hanging while 21 involved poisoning and 10 presentations involved attempted drowning.

Table 4 presents a breakdown of the number of persons in CHO 6 who had repeat presentations.

Table 4: Repeat presentations by persons in CHO 6

	Male	Female	Total
Total number of persons	253	371	624
Number who repeated	42	53	95
% repeating	17%	14%	15%

There were 624 individuals treated for 781 self-harm presentations in 2018. This implies that one in five (157, 20%) of the presentations in 2018 were due to repeat presentations.



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Based on persons, repetition was higher for males than females (17% and 14% respectively).

Table 5 presents a breakdown of the methods of self-harm reported and the number of repeat presentations for each method.

Table 5: Repeat presentations by method

	Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self-cutting
Number of presentations	545	245	21	57	10	215
Number repeat presentations	107	43	<10	<10	<10	43
Percentage of presentations due to repetition	20%	18%	-	-	-	20%

*This includes presentations where alcohol was involved (not just where alcohol was the main method of self-harm)

Repetition varied according to the method involved in the self-harm act (Table 5). Of the most commonly reported methods of self-harm which are drug overdose, alcohol and self-cutting, the percentage of presentations due to repetition were 20%, 18% and 20% respectively. As there were fewer than ten cases of repeat presentations for less frequently reported methods of self-harm (attempted hanging, poisoning and attempted drowning), the percentage of presentations due to repetition for these methods cannot be reported here.

Table 6 presents an overview of the number of presentations to the four hospitals in CHO 6 by residents and non-residents.

Table 6: Number of presentations by residents and non-residents to hospitals in CHO 6

	Residents	Non-residents	Total
Not specified hospital	620	168	788
St. James's Hospital	22	713	735
St. Michael's Hospital Dun Laoghaire	35	<10	<45
National Children's Hospital at Tallaght Hospital	26	77	103

The four main hospitals which individuals presented to in this area were St. James' Hospital, St. Michael's Hospital Dun Laoghaire, the National Children's Hospital at Tallaght Hospital, and another



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not specified hospital whose ethics committee have requested the hospital is not named. For all self-harm presentations to St. James's Hospital and the National Children's Hospital at Tallaght Hospital, the majority of presentations were made by non-residents of CHO 6. Of the presentations at St. Michael's Hospital Dun Laoghaire and the 'Not specified' hospital, the majority were made by residents of CHO 6.

Table 7 presents a breakdown of the recommended next care for each presentation to CHO 6.

Table 7: Recommended next care for presentations of hospital-treated self-harm in CHO 6

	Number	Percentage
General admission	214	27%
Psychiatric admission	14	2%
Left without being seen/ against medical advice	48	6%
Not admitted	505	65%
Total	781	100%

Most commonly, 65% of presentations were discharged following treatment in the emergency department. Of all self-harm presentations, 27% resulted in admission to a ward of the treating hospital and 2% were admitted for psychiatric inpatient treatment from the emergency department. Finally, 6% of presentations left the emergency department before a next care recommendation could be made.



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Figure 1 presents a breakdown of the number of presentations by males and females by time of attendance.

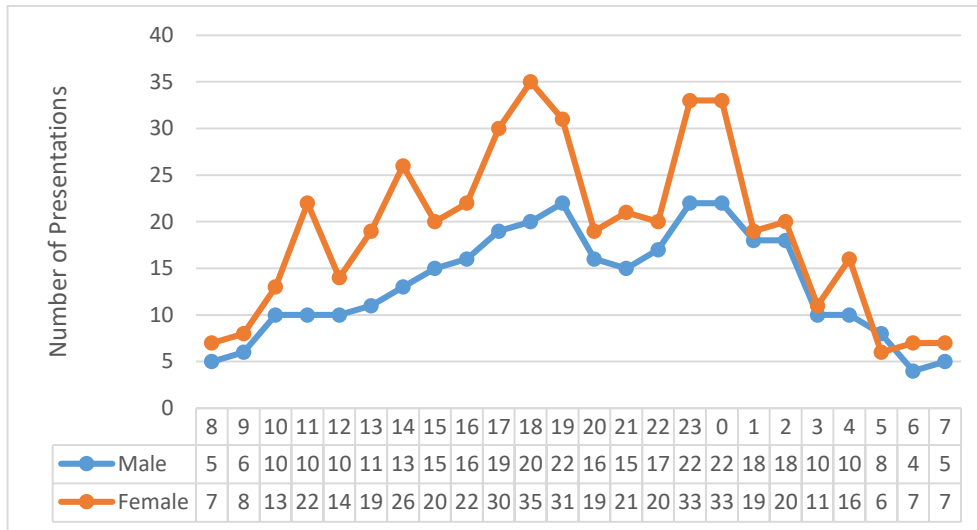


Figure 1: Self-harm presentations for males and females by time of attendance

The number of presentations by both males and females fluctuated throughout the day. However, a pattern in the number of self-harm presentations was observed over the course of the day with an increase in presentations from 8 a.m. onwards for both males and females. The peak time for females was 6 p.m. while presentations peaked at 7 p.m., 11 p.m. and midnight for males.

Table 8 presents a breakdown of the number of presentations per calendar month in 2018.

Table 8: Self-harm presentations by month of attendance

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Number	56	61	58	63	78	58	79	59	71	72	68	58	781

The monthly average number of self-harm presentations to hospitals in 2018 was 65. In 2018, July and May saw more self-harm presentations than any other month (79 and 78 presentations respectively) while January saw the fewest presentations for the year (n=56).

*To reference this data, please use the following citation: Griffin, E, McTernan, N, Wrigley, C, Nicholson, S, Arensman, E, Williamson, E, Corcoran, P, (2019). National Self-Harm Registry Ireland Annual Report 2018. Cork: National Suicide Research Foundation. For further information, please contact Mary Joyce: m.joyce@ucc.ie +353 21 420 5542 | www.nsrif.ie