

## Self-harm data, 2020 CHO Area 2

For the period from 1 January to 31 December 2020, the Registry recorded 12,553 self-harm presentations to hospital that were made by 9,550 individuals nationally. Table 1 presents an overview of the number of persons residing in CHO 2, and LHOs within CHO 2, who presented to hospital as a result of self-harm in 2020. The corresponding age-standardized rate per 100,000 population is also included.

In 2020, 698 residents of CHO 2, 300 male and 398 female, presented to hospital with a total of 843 self-harm presentations. Taking into account the population, the rate of persons presenting to hospital following an act of self-harm was 144 and 188 per 100,000 for males and females respectively. Nationally, the rate of self-harm for males and females was 176 and 224 per 100,000 respectively.

		Persons	Age-standardized rate per 100,000
CHO Area 2	Male	300	144
ChO Area 2	Female	398	188
Caluary	Male	186	151
Galway	Female	262	211
N.4	Male	71	126
Мауо	Female	105	181
Dessession	Male	43	145
Roscommon	Female	31	112

Table 1: Number of persons residing in CHO 2 and LHOs within CHO 2 who presented to hospital with self-harm and person-based age-standardized rates (EASR) per 100,000



This information is provided via the National Self-Harm Registry Ireland. For further information, please contact: Mary Joyce, Registry Manager, m.joyce@ucc.ie or Shelly Chakraborty, Data Analyst, shelly.chakraborty@ucc.ie



In 2020, there were a total of 843 self-harm presentations by residents of CHO 2. Table 2 presents a breakdown of the total number of presentations by age and gender.

	0-19yrs	20-24yrs	25-34yrs	35-44yrs	45-54yrs	55+yrs	Total
Male	55	61	81	73	39	45	354
Female	155	73	67	68	64	62	489

Table 2: Number of presentations by CHO 2 residents by age and gender

There were 354 male and 489 female presentations. Presentations were highest for males aged 25-34 years (23%) and females aged under 20 years (32%). One in four (25%; 210) self-harm presentations involved individuals younger than 20 years of age.

An overview of the reported methods of self-harm is presented in table 3.

Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self-cutting	
523 (62%)	292 (35%)	16 (2%)	51 (6%)	43 (5%)	244 (29%)	

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

## Table 3: Method of self-harm

Drug overdose was the most common method of self-harm, involved in 62% of presentations. Selfcutting was the only other common method, involved in 29% of presentations. Alcohol was involved in 35% of presentations. There were 51 presentations involving attempted hanging while 43 involved attempted drowning and 16 presentations involved poisoning.

A breakdown of the number of CHO 2 residents who made a repeat self-harm presentation in 2020 is provided by males and females in table 4.

	Male	Female	Total
Number of individuals who presented	300	398	698
Number who repeated	37	58	95
% who repeated	12%	15%	14%

Table 4: Number and percentage of CHO 2 residents who had a repeat self-harm presentation in 2020

Of the 698 residents who presented 95 (14%) did so more than once. Based on persons, repetition was higher among females than males (15% and 12% respectively).





Table 5 presents a breakdown of the number of persons who had repeat presentations by method of self-harm.

	Drug overdose	Alcohol*	Poisoning	Attempted Hanging	Attempted drowning	Self- cutting
Number of individuals who presented	441	255	13	44	40	200
Number who repeated	56	33	<10	<10	<10	35
% who repeated	13%	13%	<10%	<10%	<15%	18%

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

Note: The number of persons and number who repeated is greater than that presented in Table 4 as more than one method may have been used by each person in an act of self-harm.

Table 5: Number and percentage of individuals who made a repeat self-harm presentation in 2020 by method of self-harm

The rate of repetition varied according to the method involved in the self-harm act (Table 5). Of those engaging in the most commonly reported methods including drug overdose, alcohol and self-cutting, 13%, 13% and 18% repeated self-harm respectively.

A breakdown of the number of presentations to various hospitals by residents of CHO 2 is outlined in table 6.

	Number	Percentage
Galway University Hospital	483	57%
Mayo University Hospital	213	25%
Portiuncula University Hospital	105	13%
Hospitals outside of CHO 2	42	5%
Total	843	100%

Table 6: Number and percentage of self-harm presentations by residents of CHO 2, by hospital.

Residents of CHO 2 primarily presented to the three acute hospitals within their own region (95%). A smaller percentage (5%) presented to hospitals outside of this region, primarily to Sligo General Hospital.



This information is provided via the National Self-Harm Registry Ireland. For further information, please contact: Mary Joyce, Registry Manager, m.joyce@ucc.ie or Shelly Chakraborty, Data Analyst, shelly.chakraborty@ucc.ie



	Number	Percentage
General admission	186	22%
Psychiatric admission	60	7%
ICU admission	49	6%
Left without being seen/ against medical advice	17	2%
Not admitted	518	61%
Total	843	100%

Table 7 presents the recommended next care for CHO 2 residents following a self-harm presentation.

\*For 2% of presentations the admission pathway was not documented.

Table 7: Recommended next care for presentations by residents of CHO 2.

Most commonly, 61% of presentations were discharged following treatment in the emergency department. Of all self-harm presentations, 22% resulted in admission to a ward of the treating hospital, 7% were admitted for psychiatric inpatient treatment from the emergency department, and 6% of presentations resulted in admission to ICU. Finally, 2% of presentations left the emergency department before a next care recommendation could be made.

The number of presentations by males and females by time of attendance is presented in figure 1.



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 5 a.m. onwards for males and 8 a.m. onwards for females. The peak times for males was 4 p.m. while it was 9 p.m. for females.

A breakdown of the number of presentations per calendar month in 2020 is presented in table 8.

Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Number	77	75	56	60	72	76	66	78	71	69	75	68	843

Table 8: Self-harm presentations by month of attendance.

The monthly average number of self-harm presentations to hospitals in 2020 was 70. In 2020, August saw more self-harm presentations than any other month (n=78) while March saw the fewest presentations for the year (n=56) which is consistent with the first lockdown of COVID-19.

\*To reference information presented in this report, please use the following citation:

Joyce, M, Chakraborty, S, O'Sullivan, G, Hursztyn, P, Daly, C, McTernan, N, Nicholson, S, Arensman, E, Williamson, E, Corcoran, P (2022). National Self-Harm Registry Ireland Annual Report 2020. Cork: National Suicide Research Foundation.



This information is provided via the National Self-Harm Registry Ireland. For further information, please contact: Mary Joyce, Registry Manager, **m.joyce@ucc.ie** or Shelly Chakraborty, Data Analyst, **shelly.chakraborty@ucc.ie**