

Why are vets at high risk of suicide?

THE ratio of the number of deaths by suicide of a subgroup of the general population in relation to the number of deaths by suicide in the general population is known as the proportional mortality ratio (PMR). For veterinary surgeons, the PMR is approximately four times that of the general population and twice that of other healthcare professionals.

However, until recently, there has been little empirical research into the reasons why vets are at a high risk of suicide. A number of projects are now under way. Some results from one of these projects were discussed at the recent BSAVA Congress.

David Bartram, from the University of Southampton, has been investigating the contribution of mental ill health and wellbeing to the high PMR in the veterinary profession. His research has assessed anxiety and depressive symptoms, alcohol consumption, suicidal ideation, positive mental wellbeing, perceptions of psychosocial working conditions and work/home interactions in the veterinary profession.

'The study was conceived because there was a need to try and determine the nature and the extent of the mental health problems within the profession in order that one could try and develop interventions that are targeted and have the potential to improve the situation,' he said.

He speculated that the high suicide rate among vets might be 'something to do with self-selection'. People who went to vet school were generally from a particular sociodemographic background and were all high achievers. 'It's known that among high achievers there are higher levels of certain personality dimensions such as neuroticism and perfectionism,' he said, suggesting that these elements could be risk factors for suicide.

'It could be due to attitudes to suicide,' he continued. 'We're a fairly unique profession in that we can put our patients to sleep.'

Previous studies had shown that more favourable attitudes



David Bartram: psychological factors, as well as a ready access to means, increase the suicide rate among vets

to suicide were risk factors for subsequent suicidal behaviour. It was possible that more favourable attitudes to euthanasia could also increase the likelihood of suicide.

'If we see putting an animal to sleep as a positive outcome, then perhaps subliminally, we perceive suicide as a positive outcome to our own problems,' he said.

However, he stressed that 'probably the biggest influence on the suicide rate is the ready access to, and knowledge of, means.'

National suicide statistics showed that, among male vets, a higher proportion than among the general population poisoned themselves. A greater proportion of women than men in the general population took overdoses to kill themselves, but among female vets, the ratio increased even further.

Psychological factors

The aim of Mr Bartram's research was to find out whether, in addition to a ready access to means, there were psychological factors that might be involved in the high suicide rate of vets.

A questionnaire was mailed to approximately 20 per cent of practising UK vets. It was returned by 1796 participants, a response rate of 56.1 per cent, and the demographic and occupational profile of respondents was representative of the UK veterinary profession.

To measure the more

veterinary-specific stressors in the workplace, focus groups were run to develop a list of potential stressors that formed the basis of a subset of questions.

The results of the questionnaire showed that 'over a quarter of respondents had probable clinical signs of anxiety' and 'about 6 per cent were probable cases of clinical depression'. Both proportions were statistically higher than in the general population.

Vets were also more likely to drink alcohol. 'Just over 5 per cent of vets are non-drinkers compared with about 12 per cent of the general population,' he said. 'You can categorise non-drinkers, low-risk drinkers and at-risk drinkers. The number of at-risk drinkers among the veterinary surgeons was significantly higher than among the general population.'

Compared with the general population, vets were less likely to be non-drinkers, drank more frequently but consumed less on a typical drinking day, and had a similar prevalence of daily and weekly binge drinking.

Over 21 per cent of respondents gave a positive answer to the question 'Have you thought of taking your life, even if you would not really do it, in the past 12 months?' This was in contrast to approximately 4 per cent of the general population.

There were also differences in the effect of age on the risk of suicide. 'Among the general population, the 12-month prevalence of suicidal thoughts declines with increasing age groups,' Mr Bartram said. 'The differences between the age groups in the veterinary profession were not statistically significant.'

He also investigated the impact of various psychosocial work characteristics on the health and wellbeing of vets. 'There are various characteristics of the work environment which have been well established to be prospective risk factors for subsequent mental and physical health problems,' he said, listing psychological demands, control,

managerial support and peer support as the four areas with the greatest impact.

The level of support in the workplace was far lower for vets than for the general population.

'Between 90 and 95 per cent of the general population score the level of support they have in the workplace as being higher than the vets do,' he said.

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Questions generated from the focus groups had identified a number of factors that increased personal and work-related stress. The number of hours worked contributed most to the stress vets felt at work, and 'making professional mistakes' and 'client expectations' were the next two highest-scoring factors.

In a second series of questions to only those who were performing clinical work, 'the possibility of complaints or litigations' was the highest-scoring factor, followed by 'unexpected clinical outcomes' and 'after hours on-call duties'.

When participants were asked to list three sources of satisfaction in their work, the first five were good clinical outcomes, relationships with colleagues, intellectual challenge, client satisfaction and relationships with clients.

'It's quite an interesting observation that those are above things like the health and welfare of animals,' said Mr Bartram.

He concluded that 'access to, and knowledge of, lethal means isn't operating in isolation to increase the suicide risk in the profession. There are psychological mechanisms going on as well.'