Medical Xpress

Major study shows x5 greater suicide rate in patients with urological cancers

16 March 2018

A major UK survey has shown that patients with urological cancer such as prostate, bladder or kidney cancer are five times more likely to commit suicide than people without cancer. The analysis also shows that cancer patients generally are around three times more likely to commit suicide than the general population, and that the proportion of attempted suicides which result in a completed or successful suicide was higher in cancer patients, with a higher proportion still in patients with urological cancers.

Severe psychological stress is one of the main side-effects of both a diagnosis of cancer and cancer treatment, with depression affecting between 5 and 25% of cancer patients: many are also affected by Post-Traumatic Stress Disorder (PTSD). Previous research has shown that the vast majority of cancer patients who have symptoms of depression often go untreated. This study shows a substantial increase in suicide attempts and successful suicides in cancer patients. The work is presented at the European Association of Urology conference in Copenhagen.

This is the largest UK study looking at suicide in cancer patients (see below). The research team led by Mr Prashant Patel at the University of Birmingham retrospectively examined the records from the England and Wales Hospital Episode Statistics database, from the period 2001 to 2011. They linked this with cause of death statistics from the Office of National Statistics.

This is also the first time that a major study has examined suicidal intent in cancer patients - which they defined as the ratio of successful suicides to the rate of attempted suicides. They found that this rate was far higher (1 to 7) in patients with prostate cancer than in the general population (1 to 25), which may show a greater determination to commit suicide in cancer patients. "This is important" said first author Dr Mehran Afshar (St George's Hospital, London), "as we know that people who attempt suicide are at higher risk of subsequently being successful in completing a suicide, and we have shown this 'intent' to commit to be far higher in our cancer population, thus confirming a real need to address psychological issues early on in the management of these patients".

Dr Afshar continued:"Our data confirms research from other countries that suicide rates are higher in cancer patients, and we show this to be higher particularly in patients with urological cancers. There are particular issues which are specific to this cancer group - for example, men with prostate cancer undergo treatment which can affect their bladder function, their bowel function, erectile function and libido, can result in symptoms similar to the female menopause, and entirely alter the personality, leading to relationship problems, anxiety, depression and post-traumatic stress disorder.

We know from a 2014 study2 by Cancer Research UK that the vast majority of cancer patients who have symptoms of depression go untreated. We can see from the results of our study that although all cancers have a higher suicide rate, inferring a higher level of psychological distress, there are disparities between cancers. This needs to be addressed within our healthcare systems, and more focus is needed on integrating the robust and specialist assessment and treatment of mental health needs in cancer care".

The study also showed significant differences between the time to a successful suicide, which means that some cancer patients are more vulnerable in certain periods.

The numbers

- The researchers identified a total of 980,761 (493,234 males and 487,094 female) cancer patients which meant that 13.4 million-person years were included in the

final data analysis. The team identified 162 suicides and 1222 suicide attempts.

- In the general population, the suicide rate is 10 per 100,000 people. The team found that the all-cancer suicide rate was 30 per 100,000 people. In the urological cancers the figures are 36 per 100,000 people in kidney cancer, 48 suicides per 100,000 in bladder cancer, and 52 per 100,000 people in prostate cancer.
- In the general population, there is an average of 25 suicide attempts for each successful suicide. In kidney cancer this ratio is 1 suicide for every 10 attempts. In bladder and prostate cancer, this ratio drops to one suicide for every 7 attempts.
- The time taken to commit suicide also varies substantially: median time to suicide is 175 days from diagnosis for kidney cancer, 846 days for prostate cancer, and 1037 days for bladder cancer.

Commenting, EAU Adjunct Secretary General, Prof Hein van Poppel (Leuven) said:"This important work shows just how distressing cancer can be, but it also shows that there may be special factors associated with urological cancers which make them even more stressful than other cancers. It looks like urological cancers can affect patients' sense of self in a way that many cancers don't.

The work implies that some urological cancers, such as kidney cancer, can lead to fairly immediate distress, whereas the distress associated with prostate and bladder cancer may take a while to hit home - perhaps when patients begin to take up some of the problems associated with returning to normal life.

We also need to put things in context: many patients recover well, and don't reach the stage of despair or distress which brings them to think of suicide. Nevertheless, this is a real problem. We need to recognise that the figures presented here are for suicides, which means that they are at the 'sharp end of emotional distress'. For every suicide or attempted suicide, there will be many more patients who find difficulty in coping.

This distress does not stop when the cancer is removed or contained, and we owe it to patients to ensure that ongoing emotional support and mental health care is fully integrated in cancer care".

(Professor van Poppel was not involved in this work. He is a specialist in urological cancers).

The team noted a limitation of the study: they looked at the general suicide rate, not at the rate of suicides according to age (age-standardised suicide rate), however a comparison to baseline population suicide rates could only be made using crude suicide rates per 100,000 as this is population level data available.

Provided by European Association of Urology

APA citation: Major study shows x5 greater suicide rate in patients with urological cancers (2018, March 16) retrieved 2 December 2022 from https://medicalxpress.com/news/2018-03-major-x5-greater-suicide-patients.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.