

Overview:

Physicians are at higher risk for suicidal behaviour. On average, the United States loses the equivalent of at least one entire medical school class each year to suicide (<http://www.physiciansuicide.com/>). If you are having such thoughts this is not because there is something wrong with you as a person. It is not because you don't have what it takes to complete residency and be a good physician. Please read the information below and let someone know the distress and the thoughts you are having.

There are multiple pathways to thinking about suicide and one of the most frequent is correlated to depression. Unremitting depression is a major risk factor for developing suicidal thoughts and eventually acting on them. Many theories describe the emergence of suicidal thinking. According to one explanation, cognitive narrowing, a person becomes increasingly focused on the distressing situations, emotions and thoughts they are experiencing. The person begins to view "for now" situations, emotions and thoughts as "forever." The person becomes unable to notice the positives in their life and the caring relationships in their support system. As a result, suicide creeps into the person's thinking, appearing to be a logical choice for dealing with the person's faulty assessment of their situation. Physicians as a group are at higher risk for suicide and we speculate that this may be related to the confidence physicians develop in their own thinking and problem-solving through their training so that when they conclude, through distortions of cognitive narrowing, that suicide is a logical option they become more at risk for acting on it rather than asking for help.

IF YOU ARE HAVING THOUGHTS OF SUICIDE**1. Tell someone now.**

Tell a friend, program director, program coordinator. Call your clergy person, crisis line. Keep trying until to reach someone. Let others help you get to the help you need to get through this safely.

2. Be with others.

Do not isolate at home. Seek others out and ask to spend time with them, spend the night at a friend's home and explain why.

3. Remove methods.

Have a friend take your medications, firearms, sharp instruments (knives, razors, etc) and keep them for you temporarily.

4. Remove alcohol and medications.

Alcohol use greatly increases the risk for suicidal thinking and behaviour. Remove it from your home for now. Ease of medication access greatly increases risk for suicidal behaviour. Give your supplies to a trusted person to hold for you

Additional Information and Links

- [Depression in Residents and its Effects on Patient Care](#)
- [MedlinePlus Depression Information](#)
- [National Institute of Mental Health- Depression information](#)
- [Physician Suicide website resource for issues specific to suicide and depression among physicians including issues with training, licensure](#)

Helplines Across Canada:

Alberta:

Alberta Medical Association Physician and Family Support Program Helpline:
1-877-767-4637

British Columbia:

The Physician Health Program of British Columbia Helpline:
1-800-663-6729

Employee & Family Assistance Program (EFAP) Helpline:
1-800-505-4929

Manitoba:

Winnipeg Regional Health Authority
1-800-590-5553

Maritimes:

PIETA Helpline:
902.468.8215.

Newfoundland:

NLMA Professionals' Assistance Program:
The clinical coordinator's confidential 24-hour answering machine can be reached by calling **709-753-3007** or **1-800-563-9133**.

Ontario:

PAIRO 24hr Helpline:
1-866-HELP-DOC (1-866-435-7362), accessible anywhere in Ontario

Ontario Medical Association
1-800-851-6606 (Ontario only)

If you are feeling suicidal or if you are calling after hours in crisis, please contact your local crisis centre or local emergency services.

Saskatchewan:

Saskatchewan Physician Support Program

244-2196

Saskatoon Crises Intervention Service

Tel: (306) 933-6200

University of Saskatchewan Employee Assistance Program

(306) 966-4300

References

- [Suicide rates among physicians](#)
- [Suicide in training](#)