PW01-257 - DIRECT COSTS OF SUICIDE ATTEMPTS IN BASEL, SWITZERLAND

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Background: Suicide is one of the major health problems today. The few available health economic studies have focussed on suicides. However suicide attempts, which are much more frequent, have been disregarded.

Methods: We made use of available data of the WHO-Euro-Multicentre study. During the year 2003, N=201 persons committing a suicide attempt in Basel could be accessed for health economic investigations. Due to the care structure in our region we started with the direct costs of inpatient treatment at the university (psychiatric) hospitals, which provide a wide majority of care for the people of the area, especially in emergency cases like suicide. Outpatient treatment was only calculated, if it was performed by these hospitals. This analysis included the overhead of the hospitals (staff etc.) was well as the costs provides for special services, consultation and liaison services, transports and emergency actions.

Results: We assume that the direct costs make up only part of the total costs. For example the loss of working ability, health costs for family members, caregivers and friends affected are not included in our analyses. Against our assumption, we could not find major differences regarding the underling diagnoses. However, elderly suicide attempts were more costly. There were also gender differences. Further details will be discussed.

Conclusion: The data show, that suicide attempts are expensive. Health care planers should take these data into account when discussing and deciding investments in suicide preventions.