

Unit 3 Part 1: Suicide and Depression Worksheet
Online Assignment (1H)
Due 6/20/2022 by 0800

Directions: Use Chapters 11 and 16 in the textbook to answer the questions below. Place your completed assignment in the “Unit 3 Part 1: Suicide and Depression Worksheet” Dropbox by **0800 on 6/12/2023.**

In order to receive full credit (1-hour class time) for this assignment, it must be completed in its entirety by the due date/time assigned. Any assignment not completed in its entirety will result in missed class time.

1. How do age, race, and gender affect suicide risk?

Age has been proven to affect suicide risk; the highest rate of suicide occurred in individuals of 45 years of age to 64. The 2nd highest rate was 85 and older individuals. Younger children under 10 years of age show a low number of suicides, some think this is because they do not have the capacity to follow through with an attempt. Suicide risk is affected by gender as well; men are 3.56 times more often to commit suicide than women. More women than men attempt suicide, but men succeed more often, 70% of men who attempt succeed, whereas women 30% succeed. The means by which individuals commit suicide is also driven by gender. Such as women tend to overdose on drugs or use less lethal means, whereas men tend to use more lethal means such as guns. Women are also more likely to seek and accept help from healthcare professionals than men. Lastly, race also is a factor that influences suicide risk, the highest suicide risk was among the non-Hispanic American Indian/ Alaska Native and non-Hispanic white populations.

2. Your neighbor tells you he is going to visit his sister-in-law in the hospital. The sister-in-law has been hospitalized after attempting suicide. Your neighbor asks, “What should I say when I go to visit Jane?” What suggestions might you give him?

I would remind him to familiarize himself with suicide intervention resources, such as hotlines. I would also make sure he understands the importance of communicating in a caring and supportive manner. It is very important to acknowledge and accept their feelings and to be an active listener during conversations with his sister. I would remind him to give his sister-in-law hope and remind them that this feeling is only temporary. I would remind him that it is also important to show love and encouragement; this can be done by hugging them and allowing them to express their emotions to you.

3. John’s father committed suicide when John was a teenager. John’s wife, Mary, tells the mental health nurse that she is afraid John “inherited” that predisposition from his father. How should the nurse respond to Mary?

Family history can play a role in suicide risk by increasing it. However, many other factors are looked at that can play a role. Many demographic factors can influence an individual such as age, gender, ethnicity, marital status, and socioeconomic influences. Biological theories such as neurochemical factors can play a part, along with cognitive, emotional, and behavioral factors.

4. The nurse notes that the mood of a patient being treated for depression and suicidal ideation suddenly brightens and the patient states, "I feel fine now. I don't feel depressed anymore." Why would this statement alert the nurse of a potential problem?"

This could alert the nurse because the patient may feel as though they are all better and abruptly stop medication or treatment, which could cause many problems. If patient stops medication they could experience more intense feelings during withdrawal that could increase their suicide risk.

5. Alterations in which of the neurotransmitters are most closely associated with depression? What are the functions of each? (Refer to chapter 2 page 19-24)

An increased level of Acetylcholine is closely associated with depression. The function of this Cholinergic is to help in sleep, arousal, pain perception, movement, and memory. Alterations in norepinephrine are associated with depression. Norepinephrine is the neurotransmitter that produces activity in the sympathetic postsynaptic nerve terminals in the ANS, giving us our fight-or-flight responses. It also functions in regulating mood, cognition, perception, attention, vigilance, memory, cardiovascular functioning, and sleep-wake cycles. Decreased levels of Dopamine are shown to be associated with depression. Dopamine functions in movement and coordination, emotions, voluntary judgment, and the release of prolactin. Decreased levels of Serotonin are proven to affect depression. The function of this Monoamine is sleep and arousal, libido, appetite, mood aggression, pain perception, coordination, and judgment. Histamine, glutamate/ aspartate, and substance P have also been proven to be associated with depression.

6. Behaviors of depression often change with the diurnal (of or during the day) variation in the level of neurotransmitters. Describe the difference in this phenomenon between moderate and severe depression.

With moderate depression, individuals feel best early in the morning and then begin to get continuously worse as the day goes on. With severe depression individuals feel worse early in the morning and a little better as the day goes on. Both moderate and severe depression affects individuals mood along with their activity level on a day to day basis.

7. All antidepressants carry a black box warning. What is it?

It is an increased risk of suicidality in children and adolescents.