

SUICIDAL AND HOMICIDAL IDEATION; SYMPTOM

Does Not Include Incomplete Suicide Attempts or Completed Suicides; For Completed Suicides, See “Suicide” Case Definition

Background

This case definition was developed by the Armed Forces Health Surveillance Branch (AFHSB) for the purpose of epidemiological surveillance of the symptom of suicidal ideation and homicidal ideation in military-associated populations. The case definition does *not* include incomplete suicide attempts.

Clinical Description

Suicidal ideation, also known as suicidal thoughts, refers to thinking about, considering, or planning suicide. Suicidal behavior can be characterized as a spectrum that ranges from fleeting suicidal thoughts to completed suicide. It is often associated with depression and other mood disorders. Suicidal ideation is more common than suicide attempt or completed suicide. During 2008-2009, 3.7% of the adult U.S. population reported having suicidal thoughts within the past year.¹ Among the Armed Forces, the AFHSB Medical Surveillance Monthly Report (MSMR) reported the number of hospitalizations for suicidal ideation steadily increased from 5 in 2006 to 355 in 2010.² Most individual with suicidal ideation do not go on to attempt suicide but the symptom is considered a risk factor.

Homicidal ideation, also known as homicidal thoughts, refers to thinking about, considering, or planning a homicide. Homicidal ideation is common, accounting for 10-17% of patient presentations to psychiatric facilities in the United States.³

Case Definition and Incidence Rules

For surveillance purposes, a case of suicidal or homicidal ideation is defined as:

- *One hospitalization* with any of the defining diagnoses of suicidal or homicidal ideation (see ICD9 and ICD10 code lists below) in the *first or second* diagnostic position; or
- *Two outpatient medical encounters, within 180 days* of each other, with any of the defining diagnoses of suicidal or homicidal ideation (see ICD9 and ICD10 code lists below) in the *first or second* diagnostic position; or
- *One outpatient medical encounter in a psychiatric or mental health care specialty setting*, defined by Medical Expense and Performance Reporting System (MEPRS) code BF, with any of the defining diagnoses of a suicidal or homicidal ideation (see ICD9 and ICD10 code lists below) in the *first or second* diagnostic position.

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¹ Surveillance Summaries. Suicidal Thoughts and Behaviors Among Adults Aged > 18 years -United States, 2008-2009. Centers for Disease Control and Prevention. Oct 21, 2011; 60(SS13); 1-22.

² Armed Forces Health Surveillance Center. Surveillance Snapshot: Hospitalizations for Suicidal Ideation. Medical Surveillance Monthly Report (MSMR). 2011; Vol 18(4):23.

³ Stern, Theodore F; Schwartz, Jonathon H; Cremens, M Cornelia; Mulley, Albert G (August 2005). The evaluation of homicidal patients by psychiatric residents in the emergency room: A pilot study62 (*Psychiatric Quarterly* 4): 333–344.



Case Definition and Incidence Rules *(continued)*

Incidence rules:

For individuals who meet the case definition:

- The incidence date is considered the date of the first hospitalization or outpatient medical encounter that includes a diagnosis of a suicidal or homicidal ideation.
- An individual is considered an incident case *once per surveillance period*.

Exclusions:

- None

Codes

The following ICD9 and ICD10 codes are included in the case definition:

Problem	ICD-10-CM Codes	ICD-9-CM Codes
Homicidal and suicidal ideation	<i>R45.85 (homicidal and suicidal ideations)</i>	--
	R45.850 (homicidal ideations)	V62.85 (homicidal ideation)
	R45.851 (suicidal ideations)	V62.84 (suicidal ideation)

Development and Revisions

- In February of 2016 the case definition was updated to include ICD10 codes.
- In February of 2016 a stand-alone case definition for suicidal ideation and homicidal ideation was created. The codes for suicidal ideation and homicidal ideation were previously included in the mental health problems case definition because they were coded with V codes in the ICD-9-CM classification system. In ICD10, suicidal and homicidal ideations were reclassified as symptoms in the ICD10 category R45 (symptoms and signs involving emotional state). They are no longer coded with V/Z codes.
- This case definition was developed in November of 2010 by AFHSC MSMR staff for a MSMR article on mental disorders and mental health problems among active duty Service members.¹ The case definition was developed based on reviews of the ICD9 codes, the scientific literature, and previous AFHSC analyses.



Reports

AFHSB reports on mental health problems in the following reports:

- Periodic MSMR articles on mental disorders and associated hospitalizations, outpatient medical encounters, and post-deployment illnesses.
- Annually: MSMR article on the “Absolute and relative morbidity burdens attributable to various illnesses and injuries U.S. Armed Forces” (see *Comments* section below).

Review

Feb 2016	Case definition reviewed and updated by the AFHSB Surveillance Methods and Standards (SMS) working group.
Nov 2012	Case definition reviewed and adopted by AFHSC Surveillance Methods and Standards working group.
Nov 2010	Case definition developed and reviewed by AFHSC MSMR staff.

Comments

None

