

### 436

**SUICIDE AND SUICIDE ATTEMPTS IN MALI**

1. H Hami, 2 T Diallo, 3 A Maiga, 1 A Mokhtar, 2 R Soulouymami-Bancheikh, 1 A Soulouymami, 1 Laboratory of Genetics and Biometry, Faculty of Sciences, IBN Tofail University, Kenitra, Morocco; 2 Faculty of Medicine, Pharmacy and Odonto-Stomatology, Faculty of Sciences, Al Ain University, Al Ain, United Arab Emirates; 3 Moroccan Poison Control Center, Rabat, Morocco

**Background and Aims** Suicide is a major hidden public health problem, causing almost all one million fatalities every year, as well as economic costs in the billions of dollars, says the World Health Organization (WHO). The aim of this study is to describe the main characteristics of suicidal poisoning in Mali.

**Methods** A descriptive retrospective analysis of voluntary poisoning cases, recorded between 2000 and 2010 in Malian hospitals, was performed.

**Results** During the period of study, a total of 547 suicidal poisoning cases including 65 cases of successful suicide have been identified, constituting 62.6% of voluntary poisoning notified during this period. Most victims are teenagers and young adults aged 15–24 years (62.2%). For this age bracket, the number of suicide attempts is 7.7 times higher than that for successful suicide. According to data recorded, women make 2.4 times more suicide attempts than men. The medication intake is the primary means employed by victims (71.3%), followed by industrial products (15.3%). The poisoning symptoms are varied, depending on involved toxins, the ingested quantity and the delay before treatment.

**Conclusions** During their hospitalization, suicide attempters should receive careful medical and psychiatric supervision to avoid the risk of recurrence.

### 437

**ADOLESCENTS WITH LIFE-LIMITING ILLNESSES - ARE WE TAKING A SEXUAL HISTORY?**

1. Finlay, 2 NN Onugha. 1 Community Child Health, 2 Child Health Department, Royal United Hospital, Bath, UK

**Introduction** Talking to adolescents about sex can be difficult for health professionals - they may not know how to begin the conversation, may feel embarrassed or ill-prepared, may feel they do not have enough time or it is not relevant to their consultation. Many adolescents are having sex and adolescents with life-limiting illnesses are no exception. Giving them the opportunity to talk about sex during consultations is therefore important.

**Aim** A literature review revealed no previous studies on this topic. Our aim was to review medical consultations of adolescents with life-limiting illnesses and establish whether sex was discussed.

**Method** A retrospective review of clinical notes of adolescent patients with life-limiting illnesses was carried out with a view to establishing whether a sexual history was taken on any occasion.

**Results** None of the healthcare professionals took a sexual history from any of the adolescents on any occasion despite multiple clinic attendances.

**Discussion** Doctors tend to focus on the ‘clinical’ aspects of sexual health such as prescribing contraception and testing for sexually transmitted diseases, omitting sexual concerns and sexuality. Clinicians may struggle to accept that adolescents with life-limiting illnesses may want to talk about sex and this study has highlighted that it is a topic which is generally ignored. It is the responsibility of clinical departments to train their staff in sexual history taking, an important aspect of healthcare.

**Conclusion** Health professionals should include sexual health in routine palliative assessments so that every adolescent is given an opportunity to be heard.