

Suicide and Its Prevention Among Older Adults

Objective: To review the research on the epidemiology, risk and resiliency, assessment, treatment, and prevention of late-life suicide. **Method:** I reviewed mortality statistics. I searched MEDLINE and PsycINFO databases for research on suicide risk and resiliency and for randomized controlled trials with suicidal outcomes. I also reviewed mental health outreach and suicide prevention initiatives. **Results:** Approximately 12/100,000 individuals aged 65 years or over die by suicide in Canada annually. Suicide is most prevalent among older white men; risk is associated with suicidal ideation or behaviour, mental illness, personality vulnerability, medical illness, losses and poor social supports, functional impairment, and low resiliency. Novel measures to assess late-life suicide features are under development. Few randomized treatment trials exist with at-risk older adults. **Conclusions:** Research is needed on risk and resiliency and clinical assessment and interventions for at-risk older adults. Collaborative outreach strategies might aid suicide prevention.

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