



# Educating Internal Medicine Interns about Depression and Suicide Risk Assessment

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## INTRODUCTION

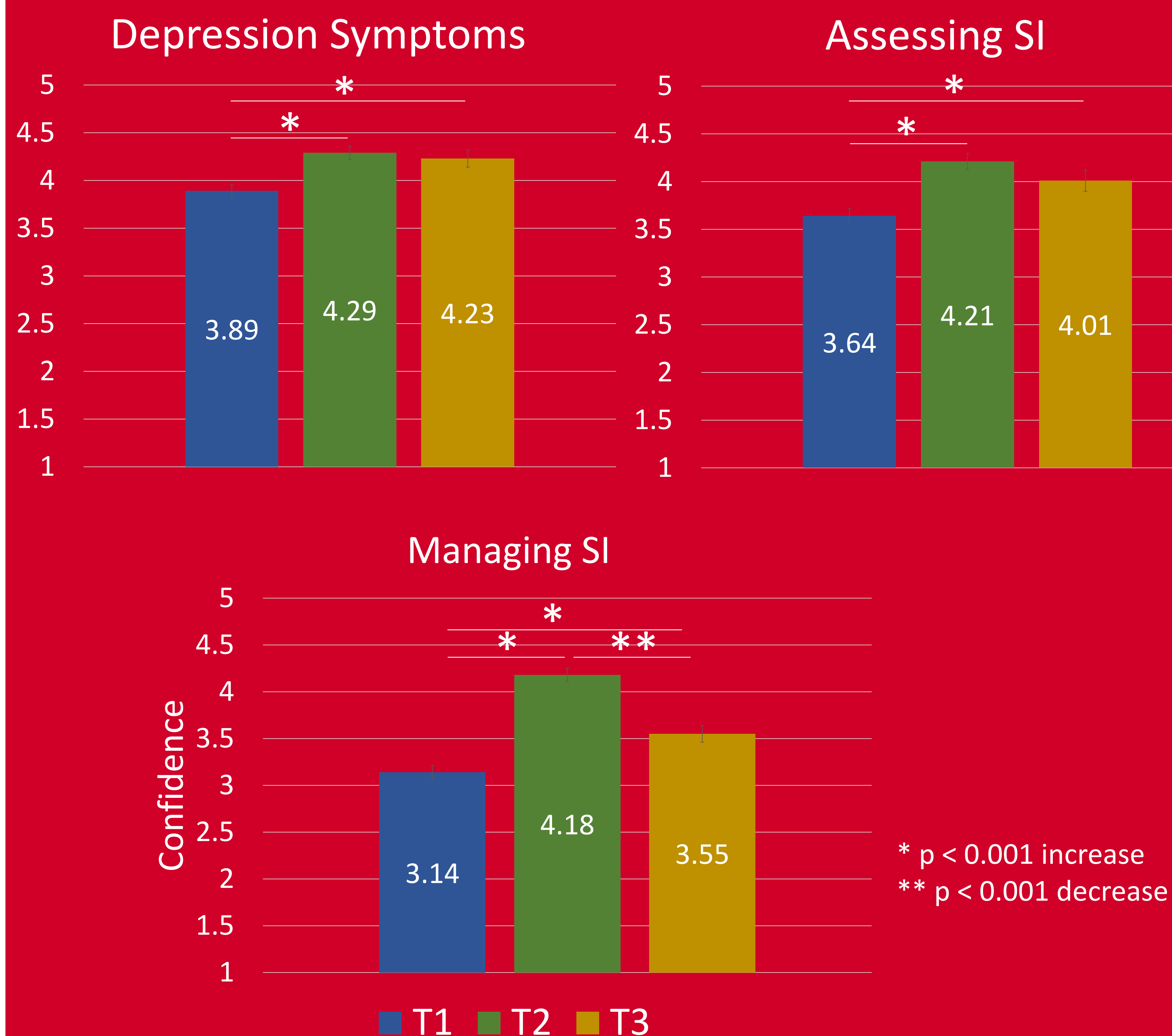
- Primary care providers (PCPs) provide mental health care and can benefit from additional psychiatric training.
- Up to 45% of people who die by suicide had seen a PCP within one month of their death.<sup>1</sup>
- Formal education on identification and management of depressed and suicidal patients in internal medicine residency is limited.

## METHODS

- **Sample:** Internal medicine (IM) interns (n=72) at the University of Chicago Medicine during the 2019-2020 (AY19) and 2020-2021 (AY20) academic years
- **Curriculum:** A one-hour, case-based lecture focused on identification of depression and suicide risk assessment
- **Confidence Assessment:** A 9-item survey which assessed confidence was given at T1 (pre-lecture), T2 (post-lecture), and T3 (6-month follow up). These 9 items were grouped into three groups: confidence in assessing depression symptoms, assessing for suicidal ideation (SI), and managing SI.
- **Knowledge assessment:** A 19-item checklist given in AY20 (n=34) asked participants to identify symptoms of depression at all three time points to assess depression knowledge.

## A single hour of training increased confidence in identifying depression and suicidal ideation in internal medicine interns.

### RESULTS



## DISCUSSION

- Increases in confidence scores suggest **immediate and lasting effects** of adding a suicide risk assessment lecture.
- Although there were **significant increases** in scores for managing SI at both T2 and T3, there was also a significant decrease in scores between T2 and T3, which may indicate the need for a booster session.
- Increased confidence was **unrelated** to knowledge.

## LIMITATIONS

- The curriculum was limited to a single, one hour lecture given once per year without a clinical component to assess skills.
- Knowledge of depression symptoms was only assessed in AY20.
- The surveys did not assess knowledge related to suicide risk assessment or suicide risk factors.

## Reference:

1. Luoma, J. B., Martin, C. E., & Pearson, J. L. Contact with mental health and primary care providers before suicide: A review of the evidence. *Am J Psychiatry*. 2002;159(6), 909–916.