Cancer-Related Suicide Declined in the U.S. During the Past Two Decades

The largest declines in cancer-related suicide rates were among high-risk populations.

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Despite increases in overall suicide rates in the United States during the past two decades, cancer-related suicides declined by 2.8% per year, according to a new study by the American Cancer Society. The study, appearing in JNCI: The Journal of the National Cancer Institute, found that the largest declines in cancer-related suicide rates were among high-risk populations, suggesting an evolving role of psycho-oncology and palliative and hospice care for cancer patients and survivors during this period.

To examine the trends in cancer-related suicides compared to overall suicides in the U.S., investigators led by Xuesong Han, PhD, calculated average annual percentage change of suicide rates stratified by risk factors including age, sex, urban/rural status and cancer type. They found that of cancer-related suicides, lung cancer (18.2%), prostate cancer (15.4%), and colorectal cancer (9.1%) were the most common contributing causes. They also found that cancer-related suicide rates had large declines among those who were older, male, living in urban areas, and with prostate or lung cancer.

Although the gun and opioid epidemics emerged as major public health concerns during this period and overall suicide rates with firearm and drugs increased, the authors found that cancer-related suicide with firearms did not increase, and cancer-related suicides with drugs remained low. These results suggest different risk profiles of suicide for cancer patients compared to the general population.

“Advances in supportive care and policies ensuring equitable access to increased psychosocial care, and palliative and hospice care services are essential in delivering high quality cancer care to maximize patients and families’ quality of life,” the authors conclude.

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