

## PROFILE OF SUICIDE CASES IN THE SPANISH CoRIS COHORT BETWEEN 2004-2022

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**Background:** Suicide is a relevant cause of death in different cohorts of people living with HIV (PLHIV). The incidence rate of suicide in the general population in Spain ranged between 8 deaths per 100,000 people/year in 2004 and 8.85 in 2022<sup>1</sup>. The objective of this work is to review mortality due to suicide in PLHIV in Spain, members of the CoRIS cohort between 2004 and 2022.

**Methods:** Sociodemographic and viroimmunological characteristics, along with the presence of comorbidities were collected from PLHIV with a death diagnosis of suicide.

**Results:** In a total of 134,375 person-years between 2004 and 2022, **22 suicides** were recorded, with an **incidence rate of 16.37 cases/100,000 people-year**. Of these, 63.6% were Spanish, with an average age of 37.7 years and 90.9% were men, similar to the distribution of the entire cohort.

**Conclusion:** *The suicide incidence rate in PLHIV in the CoRIS cohort doubles that of the Spanish population. In this population, there is a higher percentage of injecting drug users and the main non-AIDS event was attempted suicide. Specific actions should be implemented aimed at PLHIV, especially intravenous drug users, PLHIV diagnosed with psychiatric pathology or with suicide attempts.*

### Results (cont):

Among suicides, **injection drug users** were 18.2% compared to 6.4% in the total cohort.

In terms of education level, 4.5% did not complete primary education, 45.5% completed basic education, 27.3% completed high school and 22.7% completed higher education. The median baseline CD4 lymphocyte count was 414 cells/microL (IQR: 207-613) and the median baseline viral load was 76,768 cop/mL (IQR: 41,182-423,000).

Three patients were not receiving ART, 6 received triple therapy based on integrase inhibitors, 3 on protease inhibitors (PI), 6 on non-nucleoside reverse transcriptase inhibitors, 2 monotherapy with PI, 1 dual therapy based on PI and 1 the treatment was not stated.

Before the suicide, 16 had viral load <50 copies/mL, 2 had unavailable data, and 4 had detectable viral load (>50 cop/mL).

Two patients presented AIDS events; 15 ≥1 non-AIDS events.

Of the 21 non-AIDS events, **10 were suicide attempts, 4 depression, 3 psychosis**, 1 diabetes mellitus, 1 bone fracture, 1 pulmonary hypertension, and 1 renal tubulopathy. **Of the 10 suicide attempts, 2 had depression.**

Five patients were taking medications other than antiretroviral treatment, two of them with a number of drugs ≥5. Of the total of 19 registered medications, 14 were related to Central Nervous System drugs.