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Suicidal ideation and behavior as adverse events of prescribed medications: An update for pharmacists

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Suicide is the tenth leading cause of death in the US. The Food and Drug Administration has labeled more than 125 prescription drugs for potential adverse effects of suicidal ideation and behavior, including all antidepressants and anti-epileptics, an antibiotic and smoking cessation agents, among others. Questions persist about causality (pharmacological provocation of suicide) in the context of psychiatric treatment response (treatment emergence) and the multi-factorial pathogenesis of suicidal behavior, which is distinct from suicidal ideation. Pharmacists may play a key role in the identification and management of these complex adverse events. Pharmacists should file MedWatch Reports even when information is incomplete or uncertain. Resources to support pharmacists managing patients at risk include hotlines, chat-lines, texting and free federally-funded on-line training. In the future, innovative data systems and approaches in the US Department of Veterans Affairs may provide additional insight into the complex causes of these adverse events.

Biography

Jill Lavigne, PhD, MPH is a health services researcher by training and is participating in post-market safety research related to suicide adverse events at the US Department of Veterans Affairs' Center of Excellence in Public Health Approaches to Suicide Prevention. She is Professor, Pharmacy Practice and Administration at the Wegmans School of Pharmacy, St. John Fisher College.

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