

# Medicine's Schizophrenic Approach to Suicide

June 14, 2018

Permission granted by and originally published on The Tennessee Center for Bioethics & Culture - <http://tennesseecbc.org/>

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On 10 May 2018, *Medscape Medical News* published an [article](#) about the recent suicides — five days apart — of an NYU psychiatry resident and a medical student. Marcia Frellick, reporting for *Medscape*, wrote *The university confirmed the deaths to [Medscape Medical News](#) in a statement: “We were saddened to learn of the recent deaths of one of our medical students and one of our psychiatry residents, both by suicide. Counseling and support services are being offered to students, faculty, and staff. On behalf of the institution, we extend our deepest condolences to their families, friends, classmates, and colleagues. Because of the sensitive nature of this issue, we will not be commenting further.”*

That report followed on the heels of another which detailed the fact that physicians have the highest rate of suicide of any profession: [one completed suicide per day](#) in the United States. A literature review cited by *Medscape* revealed a physician suicide rate of 28-40 per 100,000 versus a suicide rate of 12.3 per 100,000 for the general population.

*Commenting on the findings for [Medscape Medical News](#), Beth Brodsky, PhD, associate clinical professor of medical psychology in psychiatry at Columbia University and the Irving Medical Center, New York City, who is an expert in this field, said the very high rate of physician suicide is “alarming.”*

Last week, the deaths by suicide were reported for both Kate Spade and Anthony Bourdain. These celebrities had experienced a great deal of societal limelight in their lives, and the lenses were no less focused on them in their deaths. Calls to [suicide hot lines](#) increased, and the worry is of copycat suicides amongst the vulnerable. After the 11 August 2014 death of Robin Williams, there was an uptick in [suicides](#): From August thru December of that year, there was an almost 10% increase in suicide deaths in the US.

But it isn't just physicians, celebrities, or persons copying the pattern that are dying by suicide, as the [CDC](#) recently reported:



*"Suicide is a leading cause of death for Americans – and it's a tragedy for families and communities across the country," said CDC Principal Deputy Director Anne Schuchat, M.D. "From individuals and communities to employers and healthcare professionals, everyone can play a role in efforts to help save lives and reverse this troubling rise in suicide."*

While the CDC decries suicide, and the families, friends, and fans of Spade and Bourdain mourn their loss, the American Medical Association (AMA) has plunged deeper into the market of physician-assisted suicide, renaming it "medical aid in dying" to make it more palatable (or marketable?). On 11 June 2018, the AMA's House of Delegates rejected (56% – 44%) the recommendation of its own Council on Ethical and Judicial Affairs (CEJA) to maintain the AMA Code of Medical Ethics' position opposing "medical aid in dying," according to a [press release](#) from Compassion and Choices (previously, the Hemlock Society).

The AMA needs to undergo self-examination. It is far from healthy for an organization to promote the suicide of its patients while exhibiting signs of distress about suicide of its own members. Believing suicide to be good for some and evil for others could be called a conundrum, but seems more consistent with delusional or schizophrenic thinking. Whatever it may be, it is not good news. Abraham Lincoln taught us more than a century ago that "A house divided against itself cannot stand."