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Title: Haematological disorders revealing a raticide suicide attempt: A case report

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Introduction: Suicide attempts are common in individuals with schizophrenia. These actions are marked by a greater lethality, due to the use of more violent means in particular the intentional ingestion of rodenticides.
Objectives: To describe the gravity of the heamatological disorders revealing suicide attempts by a rodenticides in patient with schizophrénia.
Methods: We repport the case of a patient who present a haematological disorders after an rodenticide intoxication.
Results: A 41-year-old man with schizophrénia since 2011 was brought to the department of psychiatry in july 2020 for behavioral disorders. On arrival, the patient was oriented but reticent and refuse to tell his full story. On examination, his vital signs were normals, and he did not show any externalized bleeding. Bilogical tests revealed the prothrombin time (PT) was <10% with an isolated and unexplained fall in vitamin K-factors. The etiological investigation was negative. Later,the patient admitted attempted suicide by taken 4 rodenticide packages orally three days prior admission to hospital. The initial treatment with intravenous vitamin K almost daily is effective. An improvement in PT (35%) and vitamin K-dependent factors was observed after one week of treatment. A Normalization of hemostasis disorders was obtained after two weeks of treatment.
Conclusions: It is imperative to suspect rodenticide intoxication in patient with scizophrenia with an isolated and an explained deficiency of vitamin K dependent factors. The particularity of this intoxication lies in the dangerous and prolonged side effects making the curative treatment difficult and long.

Disclosure: No significant relationships.
Keywords: Suicide; schizophrénia; rodenticides; coagulopathy

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Alendronate overdose/intoxication: Suicidal attempt in a case report

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Introduction: Alendronate is a nitrogen-containing biphosphonate that inhibits osteoclastic bone resorption. Lethal dose (LD50) was aproximately 626mg/kg in male rats, and 552mg/kg in female. Signs and Symptoms of overdose clammy skin, CNS depression, dysphagia, hiccups, miosis, respiratory depression, seizures and wheezing. Supportive therapy and monitor of urine flow, calcium and phsophorous level is essential for the management of voluntary overdose.
Objectives: To present the case of a 76-year-old woman who made a suicide attempt by ingestion of 8 tablets of 70 mg of alendronate. To describe the treatment of alendronate poisoning and the follow-up parameters for the control of complications.
Methods: Clinical case presentation through retrospective review of clinical notes and non-systematic literature review.
Results: A 76-year-old woman was taken to the emergency department after voluntarily ingesting 8 alendronate tablets (70 mg per tablet) 1 hour ago reporting "suicidal thoughts". After clinical evaluation, gastric lavage, administration of activated charcoal, and IV ranitidine were used. After 24-hour observation and after psychiatric evaluation, the patient was discharged.
Conclusions: Hypocalcaemia, hypophosphataemia and upper gastrointestinal adverse reactions, such as upset stomach, heartburn, oesophagitis, gastritis, or ulcer, may result from oral overdose. In case of overdose with alendronate, milk or antacids should be given to bind alendronate. Giving milk or antacids, to bind the bisphosphonate and minimize absorption, has been suggested for oral overdose. Due to the risk of esophageal irritation, vomiting should not be induced and the patient should remain fully upright. For decontamination is recomended activated charcoal and gastric lavage.

Disclosure: No significant relationships.
Keywords: alendronate; Suicide; Intoxication; Treatment

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Introduction: During the last 15 years, an ideation-to-action framework has been proposed that has prompted the development of several models that account for the transition from ideator to attempter. Previous research on one such model, the Integrated Motivational Volitional Model of Suicide (IMV), suggests it accurately distinguishes between suicide ideators and attempters. However, no study has examined the utility of the model with a psychiatric sample of depressed suicide ideators and attempters.
Objectives: To address this gap in previous research, this study examines the ability of the IMV to distinguish between depressed adult suicide ideators with and without a history of suicide attempt presenting to the emergency department.
Methods: After providing informed consent and with the approval of the appropriate institutional review board, 68 adults presenting to the Emergency Department were recruited to participate in the study. Ideators and attempers were compared on sociodemographics, severity of depression/hopelessness/current suicide ideation, and volitional factors including, access, planning, exposure to family suicide, impulsivity, pain tolerance, fearlessness about death, and mental imagery of death. Group differences were evaluated

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