



BACKGROUND: Suicide is among the leading causes of death in the United States. A suicide attempt is a non-fatal, self-directed, potentially injurious behavior with intent to die as a result of the behavior and might not result in injury. Suicidal ideation refers to thinking about, considering, or planning suicide. In 2017, suicide was the tenth leading cause of death overall in the United States, claiming the lives of over 47,000 people. It was the second leading cause of death among individuals between the ages of 10 and 34, and the fourth leading cause of death among individuals between the ages of 35 and 54. There were more than twice as many suicides (47,173) in the United States as there were homicides (19,510).

(Source: <https://www.nimh.nih.gov/health/statistics/suicide.shtml>)

SUICIDE WARNING SIGNS: Suicide most often occurs when stressors and health issues meet to create an experience of hopelessness and despair. Depression is the most common condition associated with suicide, and it is often undiagnosed or untreated. Conditions like depression, anxiety and substance problems, especially when unaddressed, increase risk for suicide. Yet it's important to note that most people who actively manage their mental health conditions go on to engage in life. Something to look out for when concerned that a person may be suicidal is a change in behavior or the presence of entirely new behaviors. This is a high concern if the new or changed behavior is related to a painful event, loss, or change. Most people who take their lives exhibit one or more warning signs, either through what they say or what they do. Some signs could be talking about killing themselves, being a burden to others, or feeling trapped. Some behaviors are a sign such as increased use of alcohol or drugs, withdrawing from activities, or isolation from family and friends. Sometimes, moods can be a sign as well like anxiety, loss of interest, or agitation and anger.

(Source: <https://afsp.org/about-suicide/risk-factors-and-warning-signs/>)

ORAL THERAPY BREAKTHROUGH: NeuroRx announced that the Food and Drug Administration (FDA) has granted breakthrough therapy designation to NRX-101 for the treatment of severe bipolar depression with acute suicidal ideation and behavior after initial stabilization with ketamine or another effective therapy. NRX-101 combines D-cycloserine (DCS), an N-methyl-D-aspartate (NMDA) receptor antagonist, and lurasidone, a D2/5-HT2a receptor antagonist. Unlike current approved serotonin-based antidepressants, DCS works by increasing levels of glutamate and glutamine. Currently, the only FDA-approved treatment for suicidal bipolar depression is electroconvulsive therapy (ECT), which has been shown to increase levels of these neurotransmitters. Results showed NRX-101 was well tolerated with no serious adverse events or treatment discontinuations for side effects. A Phase 2b/3 clinical trial is expected to begin soon with the trial comparing daily NRX-101 with lurasidone in patients with severe bipolar depression and acute suicidal ideation following initial stabilization with ketamine.

(Source: <https://www.empr.com/home/news/drugs-in-the-pipeline/oral-therapy-for-suicidal-bipolar-depression-gets-breakthrough-designation/>)

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