

MAINE LIFESPAN (AGES 10+) SUICIDE AND INTENTIONAL SELF-INFLICTED INJURY DATA BOOK

Prepared for

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MAINE SUICIDE PREVENTION PROGRAM

DIVISION OF POPULATION HEALTH

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PURPOSE

This data book includes data tables on suicide deaths and intentional self-inflicted injury related hospital discharges and emergency department visits among Maine people ages 10 and over. It is intended for public health and clinical health professionals working in the injury and suicide prevention field to provide useful and timely data on suicide in Maine.

DATA & DEFINITIONS

Data on suicide deaths was obtained from the Maine Center for Disease Control and Prevention (Maine CDC) Data, Research and Vital Statistics (DRVS) Program. Hospital discharge and emergency department visit data was obtained from the Maine Health Data Organization (MHDO).

Suicide and self-inflicted injury case definitions can vary across reports; definitions should be reviewed before comparing information from different sources. For example, it is important to note that the hospital discharge and emergency department data presented here are from acute care (general) hospitals and do not include encounters at psychiatric or rehabilitation hospitals. Also, beginning in 2010, visits to the emergency department that resulted in a hospital admission were excluded from the emergency department dataset.

Suicide Death Definition:

Maine Death Certificate Data: Suicide related deaths are defined as deaths of Maine residents for which the underlying cause of death was ICD-10 U03 X60-X84 or Y87.0 (*See Appendix A-1 for diagnosis code definitions*).

Intentional Self-Inflicted Injury Definition:

Hospital Discharge Data: Self-inflicted injury related hospital discharges are defined as discharges of Maine residents from Maine acute care hospitals for which any listed external cause of injury was coded as ICD-9-CM E950-E959 (*See Appendix A-2 for diagnosis code definitions*).

- *This case definition differs from the U.S CDC case definition as it captures hospitalizations due to self-directed violence (E950-E959 codes appear in any diagnosis field) while the U.S.CDC case definition only captures hospital discharges where the injury itself is the reason for the hospitalization (principal diagnosis and first-listed external cause are injury codes).*

Emergency Department (ED) Data: Self-inflicted injury related emergency department visits are defined as emergency department (outpatient) visits by Maine residents at any Maine hospital that did not end with the patient being admitted to that hospital as an inpatient on the day the emergency department visit ended, for which the external cause of injury code ICD-9-CM E950- E959 appears in any diagnosis or external cause of injury field.

- *This case definition differs from the U.S CDC case definition as it captures emergency department visits due to self-directed violence (E950-E959 codes appear in any diagnosis or E-code field) while the U.S. CDC case definition only captures hospital discharges where the injury itself is the reason for the hospitalization (principal diagnosis and first-listed external cause are injury codes).*

'Other' Methods Definitions:

Section 1 – Trend : 'Other' methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

Section 3 – Method: 'Other' methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means (and specifically excludes jumping and drowning as they are presented as their own categories in Method tables).

METHODS

Combining Years of Data

For many tables throughout this data book, multiple years of data were combined to examine suicide trends among Maine youth. The combined years' estimates provide higher numbers and yield more stable rates over time.

Statistical Significance

Statistical significance was determined by using non-overlapping 95% confidence intervals. However, the use of the 95% confidence intervals for determining statistical significance is a conservative estimate, therefore when confidence intervals are close but do not necessarily overlap, caution should be used in making statements regarding statistical significance.

Age-adjusted Rates

Age-adjusted rates are presented and used for comparisons as a way to make fair comparisons between groups with different age distributions. For example, a county that has a higher percentage of elderly people may have a higher rate of death or hospitalization than a county with a younger population, merely because the elderly are more likely to die or be hospitalized. Age-adjustment makes different groups more comparable. Therefore, age-adjusted rates should be used when making comparisons between rates by counties, public health districts or time periods. All rates are age-adjusted using the 2000 U.S. standard population.

Age-specific Rates

Age-specific rates are calculated based on the number of events (i.e. deaths, hospitalizations) and the population of a given age group. Whereas age can be strongly related to certain health outcomes, age-specific rates control for the impact of age on the rate of the outcome of interest within the specified age group.

SECTION ONE

TREND

LIFESPAN (AGES 10 AND UP): TREND

Suicide Deaths, Intentional Self-inflicted Injury Related Hospital Discharges and Emergency Department Visits, 2000-2012 (TABLE 1)

Note: Emergency department visit data are not yet available for 2012.

- The age-adjusted suicide death rates and intentional self-inflicted injury related hospitalization rates remained relatively stable between 2000 and 2012. However, the intentional self-inflicted injury related emergency department visit rate significantly increased between 2000 and 2012.

Deaths

- The age-adjusted suicide death rates from 2000 through 2006 were significantly lower than the age-adjusted suicide death rate in 2011 (19.8 per 100,000), the year with the highest number of suicide deaths. The age-adjusted suicide death rates between 2010 and 2012 were significantly higher than the rates between 2000 and 2006.

Hospitalizations

- The number of annual intentional self-inflicted injury related hospital discharges, and the corresponding age-adjusted rates, remained relatively stable between 2000 and 2012. The fewest hospital discharges occurred in 2000 and 2001 while the most occurred in 2004.
- The corresponding age-adjusted intentional self-inflicted injury related hospital discharge rates of the two years with the fewest hospitalizations, 2000 and 2001, as well as 2012, were significantly lower than the age-adjusted rate in 2004, the year with the highest number of discharges.

Emergency Department Visits

- The number of annual intentional self-inflicted injury related emergency department visits steadily increased between 2002 and 2011. The fewest emergency department visits occurred in 2002 (1,620 visits) while the most occurred in 2010 (2,722 visits).
- The lowest age-adjusted intentional self-inflicted injury related emergency department visit rate in 2002 (150.3 per 100,000) was significantly lower than the highest age-adjusted rate in 2011 (267.3 per 100,000).

TABLE 1: Suicide Deaths, Hospital Discharges and Emergency Department Visits, 2000-2012

Year	DEATHS			HOSPITAL DISCHARGES			OUTPATIENT EMERGENCY DEPARTMENT VISITS		
	#	Crude rate	Age adj rate (95% CI)	#	Crude rate	Age adj rate (95% CI)	#	Crude rate	Age adj rate (95% CI)
2000	28	11.2	(7.4-16.2)	294	117.7	(104.6-131.9)	773	297.8	(277.1-319.5)
2001	26	10.2	(6.7-14.9)	299	117.2	(104.3-131.3)	899	337.8	(316.1-360.7)
2002	18	6.9	(4.1-11.0)†	296	114	(101.4-127.8)	1,062	398.5	(374.8-423.2)
2003	15	5.6	(3.2-9.3)†	329	123.6	(110.6-137.7)	914	345.1	(323.1-368.3)
2004	28	10.5	(7.0-15.2)	403	151.2	(136.8-166.7)	992	390.6	(366.7-415.7)
2005	14	5.3	(2.9-8.9)†	349	131.8	(118.3-146.4)	1,111	447.9	(422.0-475.1)
2006	14	5.5	(3.0-9.3)†	291	114.6	(101.8-128.5)	1,146	469.8	(443.0-497.8)
2007	31	12.5	(8.5-17.7)	313	126.2	(112.6-141.0)	1,084	439.6	(413.8-466.6)
2008	17	7	(4.1-11.2)†	329	134.9	(120.7-150.3)	1,242	503.9	(476.3-532.7)
2009	17	6.9	(4.0-11.0)†	285	115.6	(102.5-129.8)	1,085	444.3	(418.2-471.5)
2010	26	10.5	(6.6-15.0)	264	107.1	(94.6-120.8)	DNR	DNR	DNR
2011	26	10.6	(7.0-15.6)	269	110.1	(97.4-124.1)	DNR	DNR	DNR
2012	23	9.5	(6.0-14.3)	278	115.1	(101.9-129.4)	DNR	DNR	DNR

Data sources: Maine death certificate, hospital inpatient, and hospital outpatient datasets; U.S. Census Bureau population estimates. Suicide deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03 X60-X84 or Y87.0. Suicide related hospital discharges are defined as discharges of Maine residents at any Maine hospital for which the external cause of injury code ICD-9-CM E950-E959 appears in any diagnosis field. Suicide related emergency department visits are defined as emergency department visits by Maine residents at any Maine hospital that did not end with the patient being admitted to that hospital as an inpatient for which the external cause of injury code ICD-9-CM E950-E959 appears in any diagnosis or external cause of injury field. Crude rates are per 100,000 population. Age-adjusted rates are per 100,000 population age adjusted to the U.S. 2000 standard population. #: Number. Age adj rate: Age-adjusted rate. 95% CI: 95% confidence interval. †Flagged for reliability as rate based on numerator less than 20. DNR: Data not reported. Emergency department data not yet available for 2012.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, OVERALL

Suicide Deaths by Sex and Age (TABLE 2)

- Three years of data were combined to examine trends by age and sex among youth. The combined years' estimates provide higher numbers and yield more stable rates over time.
- From 2001 to 2012, Maine people ages 10-24 years consistently had the lowest age-specific suicide death rates as compared to those ages 25-44 years, 45-64 years, and 65 years and over. Rates among Maine youth ages 10-24 years were significantly lower than any other age group in any 3-year time period between 2001 and 2012.
- The highest age-specific suicide death rate occurred among those ages 45-64 years in 2010-2012 (22.1 per 100,000), which was significantly higher than the age-specific suicide death rates for the same age group in both 2001-2003 (14.3 per 100,000) and 2004-2006 (17.7 per 100,000).

Females

- Compared to Maine males, Maine females consistently had significantly lower suicide death rates among all age groups and three-year time periods.
- Females ages 10-24 years and 65 years and older consistently had the lowest age-specific suicide death rates* compared to females ages 25-44 years and 45-64 years.

Males

- Maine males ages 10-24 years consistently had the lowest age-specific suicide death rates compared to older Maine males.
- Maine males ages 65 years and older consistently had the highest age-specific suicide death rate among both males and females.

*Age-adjusted suicide death rates among Maine females ages 10-24 years is based on a total less than 20 deaths and should be interpreted with caution.

TABLE 2: Suicide Deaths (Three-year non-overlapping time periods): Overall, by Sex and Age, 2000-2012

Year	Age	Female			Male			Total		
		Average number	Age-specific rate	95% C.I.	Average number	Age-specific rate	95% C.I.	Average number	Age-specific rate	95% C.I.
2001 - 2003	10 - 24 yrs	3	2.6†	1.3 - 4.8†	16	12.3	9.1 - 16.2	20	7.6	5.8 - 9.7
	25 - 44 yrs	12	6.5	4.5 - 9.0	43	24.1	20.1 - 28.7	55	15.1	12.9 - 17.6
	45 - 64 yrs	14	7.8	5.6 - 10.6	36	21.0	17.2 - 25.4	49	14.3	12.1 - 16.8
	65 yrs and older	3	2.5†	1.1 - 4.8†	28	35.8	28.5 - 44.3	31	16.4	13.2 - 20.2
	Total 10 yrs and older	32	5.3	4.3 - 6.5	123	22.0	19.8 - 24.4	155	13.4	12.2 - 14.7
2004 - 2006	10 - 24 yrs	4	2.9†	1.4 - 5.1†	15	11.2	8.1 - 14.9	19	7.1	5.4 - 9.3
	25 - 44 yrs	11	6.2	4.3 - 8.8	40	23.6	19.6 - 28.2	51	14.8	12.5 - 17.3
	45 - 64 yrs	15	7.6	5.5 - 10.2	52	28.1	23.9 - 32.9	67	17.7	15.3 - 20.3
	65 yrs and older	2	1.8†	0.7 - 4.0†	27	33.5	26.6 - 41.6	29	15.3	12.3 - 18.9
	Total 10 yrs and older	31	5.2	4.2 - 6.3	135	23.6	21.3 - 26.0	167	14.1	12.9 - 15.4
2007 - 2009	10 - 24 yrs	3	2.5†	1.1 - 4.7†	19	14.8	11.2 - 19.2	22	8.8	6.8 - 11.2
	25 - 44 yrs	13	7.5	5.3 - 10.3	45	27.9	23.4 - 33.0	58	17.5	15.0 - 20.3
	45 - 64 yrs	15	7.6	5.5 - 10.1	57	29.5	25.2 - 34.2	73	18.3	16.0 - 20.9
	65 yrs and older	7	5.9	3.6 - 9.0	30	34.9	28.0 - 42.9	37	18.3	15.1 - 22.1
	Total 10 yrs and older	38	6.2	5.1 - 7.5	151	26.6	24.2 - 29.1	189	16.1	14.8 - 17.5
2010 - 2012	10 - 24 yrs	3	2.5†	1.2 - 4.8†	22	17.6	13.6 - 22.4	25	10.2	8.1 - 12.8
	25 - 44 yrs	14	9.1	6.6 - 12.2	43	28.1	23.5 - 33.4	58	18.5	15.8 - 21.4
	45 - 64 yrs	21	9.8	7.5 - 12.6	71	35.0	30.5 - 40.1	91	22.1	19.6 - 24.9
	65 yrs and older	4	3.6†	1.9 - 6.1†	33	34.6	28.1 - 42.0	38	17.3	14.2 - 20.8
	Total 10 yrs and older	42	6.9	5.8 - 8.3	169	29.3	26.8 - 32.0	212	17.8	16.5 - 19.3

Data Source: Maine death certificate, Maine Research, Data and Vital Statistics. U.S. Census Bureau population estimates. Suicide deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03 X60-X84 or Y87.0. Crude rates are per 100,000 population. Age-specific rates are per 100,000 population. Age-adjusted rates are not calculated for age-specific groups. 95% CI: 95% confidence interval. †Flagged for reliability as rate based on numerator less than 20.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, OVERALL

Intentional Self-inflicted Injury Related Hospital Discharges (TABLE 3)

- Intentional self-inflicted injury related hospital discharge rates among Maine people ages 10 and over remained steady between 2001 and 2012.
- Between 2001 to 2012, Maine people ages 25-44 years consistently had higher age-specific intentional self-inflicted injury hospital discharge rates than those ages 10-24 years, and 45 years and older.
- Maine people ages 65 years and older consistently had the lowest age-specific intentional self-inflicted injury hospital discharge rates throughout all four 3-year time periods between 2001 and 2012.

Females

- Maine females ages 25-44 years consistently had higher age-specific intentional self-inflicted injury related hospital discharge rates than any other age group, among both women and men.

Males

- Maine males ages 25-44 years consistently had the highest age-specific intentional self-injury hospital discharge rates compared to males of other ages and in all 3-year time periods.

TABLE 3: Intentional Self-inflicted Injury Related Hospital Discharges by Overall, Sex and Age, 2000-2012

Year	Age	Female			Male			Total		
		Average number	Age-specific rate	95% CI	Average number	Age-specific rate	95% CI	Average number	Age-specific rate	95% CI
2001 - 2003	10 - 24 yrs	189	148.6	136.6 - 161.4	119	89.4	80.4 - 99.2	308	118.3	110.8 - 126.2
	25 - 44 yrs	326	175.7	164.8 - 187.0	187	104.8	96.3 - 113.8	513	140.9	134.0 - 148.2
	45 - 64 yrs	124	70.6	63.6 - 78.2	83	48.7	42.8 - 55.2	206	59.8	55.2 - 64.7
	65 yrs and older	21	19.1	14.6 - 24.5	13	16.2	11.5 - 22.2	33	17.9	14.5 - 21.7
	Total 10 yrs and older	659	110.6	105.8 - 115.6	401	71.7	67.7 - 75.9	1060	91.8	88.6 - 95.0
2004 - 2006	10 - 24 yrs	208	163.2	150.6 - 176.5	140	104	94.3 - 114.5	348	132.8	124.9 - 141.1
	25 - 44 yrs	298	169.1	158.2 - 180.6	203	118.6	109.4 - 128.4	501	144.3	137.1 - 151.7
	45 - 64 yrs	157	81.3	74.1 - 89.0	108	58	51.9 - 64.7	265	69.8	65.1 - 74.9
	65 yrs and older	21	19.4	14.9 - 24.8	13	16.3	11.7 - 22.2	35	18.1	14.8 - 21.9
	Total 10 yrs and older	684	112.8	108.0 - 117.8	464	80.9	76.7 - 85.3	1148	97.3	94.1 - 100.6
2007 - 2009	10 - 24 yrs	184	153.6	141.1 - 167.0	125	98.8	89.0 - 109.3	309	125.5	117.6 - 133.9
	25 - 44 yrs	291	173	161.7 - 184.9	178	109.4	100.3 - 119.1	469	141.7	134.4 - 149.4
	45 - 64 yrs	162	80.1	73.1 - 87.5	131	67.2	60.7 - 74.1	293	73.7	68.9 - 78.8
	65 yrs and older	27	23.4	18.6 - 29.1	21	24	18.4 - 30.8	47	23.7	19.9 - 27.9
	Total 10 yrs and older	664	109.9	105.1 - 114.8	454	79.7	75.5 - 84.1	1118	95.2	92.0 - 98.5
2010 - 2012	10 - 24 yrs	167	140.5	128.5 - 153.3	103	82.4	73.5 - 92.1	270	110.7	103.3 - 118.6
	25 - 44 yrs	267	168.7	157.3 - 180.8	178	115.6	106.0 - 125.8	445	142.5	135.0 - 150.4
	45 - 64 yrs	170	80.7	73.9 - 88.0	141	69.7	63.2 - 76.7	311	75.3	70.6 - 80.3
	65 yrs and older	30	24.4	19.6 - 30.0	24	24.5	19.2 - 31.0	53	24.5	20.8 - 28.6
	Total 10 yrs and older	634	104	99.4 - 108.8	446	77.2	73.1 - 81.4	1080	91	87.9 - 94.2

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.
 Self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.
 Age-specific rates are per 100,000 population. Age-adjusted rates are not calculated for age-specific groups.
 95% CI: 95% confidence interval of the rate.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, OVERALL

Intentional Self-inflicted Injury Related Emergency Department Visits (TABLE 4)

Note: Emergency department visit data are not yet available for 2012.

Total

- Intentional self-inflicted injury related emergency department visits among Maine people ages 10 and older increased significantly between 2001 and 2011.
- The highest age-specific intentional self-inflicted injury related emergency department visit rates were consistently among Maine people ages 10-24 years. Rates significantly increased between each 3-year period from 2001-2003 (313.3 per 100,000) to 2010-2012 (474.2 per 100,000).
- Maine females ages 10-24 years had the highest age-specific intentional self-inflicted injury related emergency department visit rates, which were significantly higher than the corresponding male age-specific rates during the comparable three-year periods. The age-specific rates among females ages 10-24 years significantly increased between each 3-year time period.
- The lowest age-specific rates among both men and women occurred among Maine people ages 65 years and older. However, the age-specific rates among those 65 years and older also steadily, and significantly, increased between 2001-2003 (8.4 per 100,000) and 2010-2012 (18.0 per 100,000). The same significant and increasing trend occurred among both women and men ages 65 years and older.

TABLE 4: Intentional Self-inflicted Injury Related Emergency Department by Overall, Sex and Age, 2000-2012

Year	Age	Female			Male			Total		
		Average number	Age-specific rate	95% CI	Average number	Age-specific rate	95% CI	Average number	Age-specific rate	95% CI
2001 - 2003	10 - 24 yrs	474	373	353.8 - 392.9	341	256.2	240.7 - 272.4	815	313.3	301.0 - 325.9
	25 - 44 yrs	435	234.6	222.0 - 247.7	248	139.2	129.4 - 149.5	683	187.9	179.8 - 196.2
	45 - 64 yrs	112	64.2	57.5 - 71.4	67	39.5	34.2 - 45.3	179	52	47.7 - 56.6
	65 yrs and older	6	5.5†	3.3 - 8.8†	10	12.4	8.3 - 17.7	16	8.4	6.2 - 11.2
	Total 10 yrs and older	1028	172.4	166.4 - 178.6	666	119	113.9 - 124.4	1694	146.6	142.6 - 150.7
2004 - 2006	10 - 24 yrs	559	438.2	417.5 - 459.7	431	320.7	303.5 - 338.7	989	377.9	364.5 - 391.8
	25 - 44 yrs	460	260.6	247.0 - 274.7	337	197.4	185.5 - 210.0	797	229.5	220.4 - 238.9
	45 - 64 yrs	157	81.6	74.4 - 89.3	116	62.1	55.8 - 69.0	273	72	67.2 - 77.1
	65 yrs and older	11	10	6.9 - 14.0	10	11.8	7.9 - 17.0	21	10.8	8.3 - 13.8
	Total 10 yrs and older	1187	195.6	189.2 - 202.1	893	155.9	150.1 - 161.9	2080	176.3	172.0 - 180.7
2007 - 2009	10 - 24 yrs	635	528.9	505.4 - 553.2	479	379.6	360.3 - 399.8	1114	452.4	437.2 - 468.0
	25 - 44 yrs	505	300.5	285.5 - 316.0	407	250	236.1 - 264.4	912	275.7	265.5 - 286.3
	45 - 64 yrs	189	93.6	86.0 - 101.6	139	71.6	64.9 - 78.8	329	82.8	77.7 - 88.2
	65 yrs and older	9	7.9	5.2 - 11.5	12	14.3	10.1 - 19.8	21	10.7	8.2 - 13.6
	Total 10 yrs and older	1338	221.4	214.6 - 228.4	1037	182.2	175.8 - 188.7	2376	202.4	197.7 - 207.2
2010 - 2011*	10 - 24 yrs	649	542.1	513.0 - 572.4	515	409.6	384.9 - 435.4	1164	474.2	455.2 - 493.9
	25 - 44 yrs	565	355.5	335.1 - 376.9	447	288.1	269.5 - 307.6	1012	322.2	308.3 - 336.6
	45 - 64 yrs	213	100.9	91.5 - 111.0	160	79.1	70.7 - 88.3	373	90.2	83.9 - 97.0
	65 yrs and older	23	18.8	13.7 - 25.2	16	17	11.6 - 24.0	39	18	14.2 - 22.5
	Total 10 yrs and older	1449	238	229.4 - 246.8	1137	197.1	189.1 - 205.4	2586	218.1	212.2 - 224.1

Emergency department visit data not yet available for 2012; rates for 2010-2011 year groups are calculated for 2 year intervals.

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Age-specific rates are per 100,000 population. Age-adjusted rates are not calculated for age-specific groups.

95% CI: 95% confidence interval of the rate.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, BY METHOD

Suicide Deaths by Method: Total and by Sex, 2001-2012 (TABLE 5)

- Overall, poisoning was the most common method of suicide death among Maine females ages 10 and older while firearms was the most common method among Maine males ages 10 and older between 2001 and 2012.

Females

- Overall, poisoning was the most common method of suicide death among Maine females ages 10 and older accounting for 38-48 percent of all female suicide deaths between 2001 and 2012.
- Among Maine females ages 25-65 years and older, poisoning was consistently the most common method of suicide death accounting for 33-63 percent of all suicide deaths between 2001 and 2012 (except among females ages 25-44 years and 65 years and older from 2004-2006 when firearms and other* were tied for the most common method).
- The most common method of suicide death among Maine females ages 10-24 years varied between poisoning (2001-2003), firearms (2004-2006) and hanging/strangulation/suffocation (2007-2012).*

Males

- Among Maine males ages 10 and older, firearms were the most common method of suicide death accounting for 56-64 percent of all male suicide deaths between 2001 and 2012.
- Firearms were also the most common method of suicide death among males within all four age groups accounting for between 40 percent (males ages 25-44 years in 2001-2003, lowest) to 92 percent (males ages 65 years and older in 2004-2006, highest) of all suicide deaths among Maine males ages 10 and older.
- Generally, hanging/suffocation was the second most common method of suicide death among Maine males ages 10 and older between 2001 and 2012.

*Note: Suicide death rates among Maine people ages 10-24 are based on small numbers making percentages very sensitive to small increases or decreases in counts between years. Therefore, it is difficult to make conclusive statements regarding the existence of trends among these data.

TABLE 5: Suicide Deaths by Method: Sex and Age, 2001-2012 (Females)

Year	Method	FEMALE														
		10-24 years			25-44 years			45-64 years			65 years and older			Total		
		Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
2001 - 2003	Firearms	3	1	30.0%†	10	3	27.8%†	14	5	34.1%†	1	0	12.5%†	28	9	29.5%
	Hanging/Suffocation	5	2	50.0%†	6	2	16.7%†	4	1	9.8%†	1	0	12.5%†	16	5	16.8%†
	Poisoning	2	1	20.0%†	17	6	47.2%†	19	6	46.3%†	5	2	62.5%†	43	14	45.3%
	Other/Specified/Unspecified	0	0	0.0%†	3	1	8.3%†	4	1	9.8%†	1	0	12.5%†	8	3	8.4%†
	Total 2001 - 2003	10	3	100.0%†	36	12	100.0%	41	14	100.0%	8	3	100.0%†	95	32	100.0%
2004 - 2006	Firearms	4	1	36.4%†	9	3	27.3%†	10	3	22.7%†	2	1	33.3%†	25	8	26.6%
	Hanging/Suffocation	4	1	36.4%†	7	2	21.2%†	7	2	15.9%†	1	0	16.7%†	19	6	20.2%†
	Poisoning	2	1	18.2%†	12	4	36.4%†	21	7	47.7%†	1	0	16.7%†	36	12	38.3%
	Other/Specified/Unspecified	1	0	9.1%†	5	2	15.2%†	6	2	13.6%†	2	1	33.3%†	14	5	14.9%†
	Total 2004 - 2006	11	4	100.0%†	33	11	100.0%	44	15	100.0%	6	2	100.0%†	94	31	100.0%
2007 - 2009	Firearms	1	0	11.1%†	15	5	39.5%†	11	4	23.9%†	8	3	40.0%†	35	12	31.0%
	Hanging/Suffocation	6	2	66.7%†	6	2	15.8%†	4	1	8.7%†	1	0	5.0%†	17	6	15.0%†
	Poisoning	0	0	0.0%†	15	5	39.5%†	28	9	60.9%†	8	3	40.0%†	51	17	45.1%
	Other/Specified/Unspecified	2	1	22.2%†	2	1	5.3%†	3	1	6.5%†	3	1	15.0%†	10	3	8.8%†
	Total 2007 - 2009	9	3	100.0%†	38	13	100.0%	46	15	100.0%	20	7	100.0%	113	38	100.0%
2010 - 2012	Firearms	2	1	22.2%†	8	3	18.6%†	21	7	33.9%†	3	1	23.1%†	34	11	26.8%
	Hanging/Suffocation	3	1	33.3%†	8	3	18.6%†	7	2	11.3%†	1	0	7.7%†	19	6	15.0%†
	Poisoning	3	1	33.3%†	23	8	53.5%†	28	9	45.2%†	6	2	46.2%†	60	20	47.2%
	Other/Specified/Unspecified	1	0	11.1%†	4	1	9.3%†	6	2	9.7%†	3	1	23.1%†	14	5	11.0%†
	Total 2010 - 2012	9	3	100.0%†	43	14	100.0%	62	21	100.0%	13	4	100%†	127	42	100.0%

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population estimates. Suicide related deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03 X60-X84 or Y87.0.

*Other includes intentional self-harm caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; jumping or lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

Subgroup counts might not sum to Maine total due to missing data or rounding.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

TABLE 5 (cont): Suicide Deaths by Method: Sex and Age, 2001-2012 (Males)

Year	Method	MALE														
		10-24 years			25-44 years			45-64 years			65 years and older			Total		
		Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
2001 - 2003	Firearms	29	10	59.2%	52	17	40.3%	65	22	60.7%	62	21	73.8%	208	69	56.4%
	Hanging/Suffocation	17	6	34.7%†	36	12	27.9%	13	4	12.1%†	8	3	9.5%†	74	25	20.1%
	Poisoning	0	0	0.0%†	26	9	20.2%	18	6	16.8%†	7	2	8.3%†	51	17	13.8%
	Other/Specified/Unspecified	3	1	6.1%†	15	5	11.6%†	11	4	10.3%†	7	2	8.3%†	36	12	9.8%
	Total 2001 - 2003	49	16	100.0%	129	43	100.0%	107	36	100.0%	84	28	100.0%	369	123	100.0%
2004 - 2006	Firearms	28	9	62.2%	65	22	53.7%	90	30	57.3%	75	25	91.5%	258	86	63.7%
	Hanging/Suffocation	14	5	31.1%†	36	12	29.8%	27	9	17.2%	2	1	2.4%†	79	26	19.5%
	Poisoning	0	0	0.0%†	15	5	12.4%†	27	9	17.2%	5	2	6.1%†	47	16	11.6%
	Other/Specified/Unspecified	3	1	6.7%†	5	2	4.1%†	13	4	8.3%†	0	0	0.0%†	21	7	5.2%
	Total 2004 - 2006	45	15	100.0%	121	40	100.0%	157	52	100.0%	82	27	100.0%	405	135	100.0%
2007 - 2009	Firearms	25	8	44.6%	63	21	46.3%	101	34	58.7%	73	24	81.1%	262	87	57.7%
	Hanging/Suffocation	24	8	42.9%	39	13	28.7%	32	11	18.6%	5	2	5.6%†	100	33	22.0%
	Poisoning	5	2	8.9%†	22	7	16.2%	32	11	18.6%	8	3	8.9%†	67	22	14.8%
	Other/Specified/Unspecified	2	1	3.6%†	12	4	8.8%†	7	2	4.1%†	4	1	4.4%†	25	8	5.5%
	Total 2007 - 2009	56	19	100.0%	136	45	100.0%	172	57	100.0%	90	30	100.0%	454	151	100.0%
2010 - 2012	Firearms	33	11	50.0%	63	21	48.5%	114	38	53.8%	76	25	76.0%	286	95	56.3%
	Hanging/Suffocation	23	8	34.8%	41	14	31.5%	52	17	24.5%	9	3	9.0%†	125	42	24.6%
	Poisoning	5	2	7.6%†	16	5	12.3%†	34	11	16.0%	7	2	7.0%†	62	21	12.2%
	Other/Specified/Unspecified	5	2	7.6%†	10	3	7.7%†	12	4	5.7%†	8	3	8.0%†	35	12	6.9%
	Total 2010 - 2012	66	22	100.0%	130	43	100.0%	212	71	100.0%	100	33	100.0%	508	169	100.0%

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population estimates. Suicide related deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03 X60-X84 or Y87.0.

*Other includes intentional self-harm caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; jumping or lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

Subgroup counts might not sum to Maine total due to missing data or rounding.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, BY METHOD

Intentional Self-inflicted Injury Related Hospital Discharges by Method: Sex and Age, 2001-2012 (TABLE 6)

- Overall, poisoning was the most common cause of intentional self-inflicted injuries resulting in a hospitalization among both Maine females and males ages 10 and older between 2001 and 2012.

Females

- Poisoning was the most common cause of intentional self-inflicted injuries resulting in a hospitalization accounting for 74-84 percent of hospitalizations due to intentional self-inflicted injuries among Maine females ages 10 and older between 2001 and 2012.
- Poisoning was also the most common cause of intentional self-inflicted injuries resulting in a hospitalization among females of all four age groups and in all time periods from 2001-2012.
- The second most common cause of intentional self-inflicted injuries resulting in a hospitalization among females of all four ages and within all time periods varied between other* methods, ranging from 5 – 25 percent, and cutting, ranging from 3 – 30 percent of hospitalizations due to intention self-inflicted injuries among Maine females.

Males

- Poisoning was the most common cause of intentional self-inflicted injuries resulting in a hospitalization accounting for 67 – 76 percent of hospitalizations due to intentional self-inflicted injuries among Maine males ages 10 and older between 2001 and 2012.
- Among all four male age groups in all time periods from 2001-2012, poisoning was the most common cause of intentional self-inflicted injuries resulting in a hospitalization, accounting for 48 – 80 percent of all hospitalizations due to intentional self-inflicted injuries among Maine males ages 10 and over.
- The second and third most common methods of intentional self-injury related hospital discharges alternated between cutting and other* methods among Maine males in all age groups between 2001 and 2012.

***Other** methods include intentional self-harm caused by: explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; jumping or lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 6: Intentional Self-inflicted Injury Related Hospital Discharges by Method: By Age and Sex, 2001-2012 (Females)

Year	Method	FEMALE														
		10-24 years		25-44 years		45-64 years		65 years and older		Total						
		Total	Average Percent	Total	Average Percent	Total	Average Percent	Total	Average Percent	Total	Percent					
2001 - 2003	Cutting	47	16	8.20%	112	37	11.4%	23	8	6.1%	3	1	4.8%†	185	62	9.4%
	Hanging/Suffocation	5	2	0.8%†	3	1	0.3%†	3	1	0.8%†	1	0	1.6%†	12	4	0.6%†
	Poisoning	483	161	85.1%	801	267	81.9%	326	109	87.8%	53	18	85.4%	1663	554	84.1%
	Other/Specified/Unspecified	32	11	5.6%	62	21	6.3%	19	6	5.1%	5	2	8%†	118	39	6%†
Total 2001 - 2003		567	189	100.0%	978	326	100.0%	371	124	100.0%	62	21	100.0%	1978	659	100.0%
2004 - 2006	Cutting	68	23	10.8%	96	32	10.7%	34	11	7.2%	2	1	3.1%†	200	67	9.7%
	Hanging/Suffocation	2	1	0.3%†	2	1	0.2%†	1	0	0.2%†	0	0	0%†	5	2	0.2%†
	Poisoning	398	133	63.7%	669	223	74.7%	405	135	86.1%	53	18	82.8%	1525	508	74.3%
	Other/Specified/Unspecified	156	52	25.0%	128	43	14.3%	30	10	6.3%	9	3	14%†	323	108	15.7%
Total 2004 - 2006		624	208	100.0%	895	298	100.0%	470	157	100.0%	64	21	100.0%	2053	684	100.0%
2007 - 2009	Cutting	74	25	13.3%	97	32	11.1%	45	15	9.2%	24	8	30.0%	240	80	12.0%
	Hanging/Suffocation	4	1	0.7%†	3	1	0.3%†	1	0	0.2%†	0	0	0%†	8	3	0.4%†
	Poisoning	370	123	66.9%	693	231	79.3%	393	131	80.8%	52	17	65.0%	1508	503	75.7%
	Other/Specified/Unspecified	105	35	18.9%	80	27	9.1%	47	16	9.6%	4	1	5%†	236	79	11.8%
Total 2007 - 2009		553	184	100.0%	873	291	100.0%	486	162	100.0%	80	27	100.0%	1992	664	100.0%
2010 - 2012	Cutting	48	16	9.5%	70	23	8.7%	28	9	5.4%	6	2	6.7%†	152	51	8.0%
	Hanging/Suffocation	4	1	0.7%†	3	1	0.3%†	4	1	0.7%†	1	0	1.1%†	12	4	0.6%†
	Poisoning	354	118	70.5%	654	218	81.6%	453	151	88.8%	71	24	79.7%	1532	511	80.5%
	Other/Specified/Unspecified	96	32	19.1%	74	25	9.2%	25	8	4.9%	11	4	12.3%†	206	69	10.8%
Total 2010 - 2012		502	167	100.0%	801	267	100.0%	510	170	100.0%	89	30	100.0%	1902	634	100.0%

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959 .

‘Other’ methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

Subgroup counts might not sum to Maine total due to missing data or rounding.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

TABLE 6 (cont): Intentional Self-Inflicted Injury Related Hospital Discharges by Method: By Age and Sex, 2001-2012 (Males)

Year	Method	MALES														
		10-24 years			25-44 years			45-64 years			65 years and older			Total		
		Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
2001 - 2003	Cutting	45	15	12.6%	63	21	11.2%	22	7	8.8%	11	4	28.9%†	141	47	11.7%
	Hanging/Suffocation	8	3	2.2%†	11	4	1.9%†	4	1	1.6%†	1	0	2.6%†	24	8	2.0%
	Poisoning	254	85	71.1%	441	147	78.7%	198	66	79.8%	20	7	52.6%	913	304	75.9%
	Other/Specified/Unspecified	50	17	14.0%	45	15	8.0%	24	8	9.6%	6	2	15.7%	125	42	10.4%
	Total 2001 - 2003	357	119	100.0%	560	187	100.0%	248	83	100.0%	38	13	100.0%	1203	401	100.0%
2004 - 2006	Cutting	52	17	12.4%	76	25	12.5%	37	12	11.4%	3	1	7.5%†	168	56	12.1%
	Hanging/Suffocation	14	5	3.3%†	6	2	0.9%†	8	3	2.4%†	0	0	0%†	28	9	2.0%
	Poisoning	201	67	47.9%	447	149	73.5%	255	85	78.7%	23	8	57.5%	926	309	66.6%
	Other/Specified/Unspecified	152	51	36.2%	79	26	12.9%	24	8	7.4%	14	5	35%†	269	90	19.3%
	Total 2004 - 2006	419	140	100.0%	608	203	100.0%	324	108	100.0%	40	13	100.0%	1391	464	100.0%
2007 - 2009	Cutting	40	13	10.6%	64	21	11.9%	38	13	9.6%	12	4	19.3%†	154	51	11.3%
	Hanging/Suffocation	15	5	4%†	15	5	2.8%†	7	2	1.7%†	1	0	1.6%†	38	13	2.8%
	Poisoning	221	74	59.0%	382	127	71.5%	298	99	76.0%	34	11	54.8%	935	312	68.6%
	Other/Specified/Unspecified	98	33	26.2%	73	24	13.6%	49	16	12.5%	15	5	24.1%†	235	78	17.3%
	Total 2007 - 2009	374	125	100.0%	534	178	100.0%	392	131	100.0%	62	21	100.0%	1362	454	100.0%
2010 - 2012	Cutting	49	16	15.8%	75	25	14.0%	34	11	8.0%	6	2	8.4%†	164	55	12.3%
	Hanging/Suffocation	10	3	3.2%†	18	6	3.3%†	5	2	1.1%†	2	1	2.8%†	35	12	2.6%
	Poisoning	188	63	60.8%	385	128	71.9%	329	110	77.9%	42	14	59.1%	944	315	70.6%
	Other/Specified/Unspecified	62	21	20.0%	57	19	10.6%	54	18	12.7%	21	7	29.5%	194	65	14.5%
	Total 2010 - 2012	309	103	100.0%	535	178	100.0%	422	141	100.0%	71	24	100.0%	1337	446	100.0%

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959 .

'Other' methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

Subgroup counts might not sum to Maine total due to missing data or rounding.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

LIFESPAN (AGES 10 AND UP): TREND

THREE-YEAR NON-OVERLAPPING PERIODS, BY METHOD

Intentional Self-inflicted Injury Related Emergency Department Visits (TABLE 7)

Note: Emergency department visit data are not yet available for 2012.

- Overall, poisoning was the most common cause of intentional self-inflicted injuries resulting in an emergency department visit among both Maine females and males ages 10 and older between 2001 and 2011.

Females

- Poisoning was the most common cause of intentional self-inflicted injuries resulting in an emergency department visit among females of all ages and in most time periods, accounting for 44 – 83 percent of emergency department visits due to intentional self-inflicted injuries among females ages 10 and over between 2001-2011.
- Cutting was the second most common cause of intentional self-inflicted injury resulting in an emergency department visit among females ages 10-64 years, while other* methods were the second most common cause among females ages 65 and over.
- Other* methods were the third most common cause of emergency department visits due to intentional self-inflicted injuries among all females ages 10-64 years, while cutting was the third most common cause among females ages 65 years and over.

Males

- Poisoning was the most common cause of intentional self-inflicted injuries resulting in an emergency department visit among Maine males ages 25-64 years between 2001 and 2011 accounting for 40 – 60 percent of all intentional self-inflicted injury related emergency department visits among Maine males in that age group.
- Among Maine males ages 10-24 years, the most common cause of intentional self-inflicted injuries resulting in an emergency department visit varied between poisoning (26 – 36 percent), other* methods (25 – 40 percent), and cutting (31 – 35 percent) between 2001 and 2011.
- Among Maine males ages 65 years and over, poisoning was the most common cause of intentional self-inflicted injuries resulting in an emergency department visit from 2001-2006 while other* methods were the most common cause from 2007-2011.
- Cutting was the second most common cause of intentional self-inflicted injury among males ages 25-64 years between 2001 and 2011, accounting for 23-35 percent of all intentional self-inflicted injury related emergency department visits among Maine males. Poisoning was the second most common method among males ages 65 years and over.

***Other** includes Intentional self-harm caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; jumping or lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 7: Intentional Self-inflicted Injury Related Emergency Department Visits by Method: By Age and Sex, 2001-2011* (Females)

Year	Method	FEMALE														
		10-24 years			25-44 years			45-64 years			65 years and older			Total		
		Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
2001 - 2003	Cutting	493	164	34.6%	491	164	37.5%	97	32	28.7%	1	0	5.5%†	1082	361	35.1%
	Hanging/Suffocation	11	4	0.7%†	6	2	0.4%†	1	0	0.2%†	0	0	0.0%†	18	6	0.6%†
	Poisoning	770	257	54.1%	668	223	51.1%	218	73	64.6%	15	5	83.3%†	1671	557	54.2%
	Other/Specified/Unspecified	149	50	10.4%	141	47	10.7%	21	7	6.2%	2	1	1.1%†	313	104	10.1%
Total 2001 - 2003		1423	474	100.0%	1306	435	100.0%	337	112	100.0%	18	6	100.0%	3084	1028	100.0%
2004 - 2006	Cutting	709	236	42.3%	534	178	38.7%	126	42	26.6%	5	2	15.1%†	1374	458	38.6%
	Hanging/Suffocation	15	5	0.8%†	11	4	0.7%	1	0	0.2%†	1	0	3.0%†	28	9	0.8%
	Poisoning	775	258	46.2%	700	233	50.7%	312	104	66.1%	21	7	63.6%	1808	603	50.8%
	Other/Specified/Unspecified	177	59	10.5%	134	45	9.7%	33	11	6.9%	6	2	18.1%†	350	117	9.8%
Total 2004 - 2006		1676	559	100.0%	1379	460	100.0%	472	157	100.0%	33	11	100.0%	3560	1187	100.0%
2007 - 2009	Cutting	814	271	42.7%	564	188	37.2%	174	58	30.6%	7	2	25.9%†	1559	520	38.8%
	Hanging/Suffocation	25	8	1.3%	17	6	1.1%	3	1	0.5%†	1	0	3.7%†	46	15	1.1%
	Poisoning	797	266	41.8%	756	252	49.8%	345	115	60.7%	12	4	44.4%	1910	637	47.6%
	Other/Specified/Unspecified	268	89	14.0%	179	60	11.8%	46	15	8.0%	7	2	25.9%†	500	167	12.5%
Total 2007 - 2009		1904	635	100.0%	1516	505	100.0%	568	189	100.0%	27	9	100.0%	4015	1338	100.0%
2010 - 2011	Cutting	543	272	41.8%	404	202	35.7%	105	53	24.7%	11	6	24.4%†	1063	354	36.7%
	Hanging/Suffocation	26	13	2.0%	7	4	0.6%†	4	2	0.9%†	0	0	0.0%†	37	12	1.3%
	Poisoning	516	258	39.7%	574	287	50.7%	279	140	65.6%	22	11	48.8%	1391	464	48.0%
	Other/Specified/Unspecified	213	107	16.4%	145	73	12.8%	37	19	8.7%	12	6	26.6%†	407	136	14.0%
Total 2010 - 2011		1298	649	100.0%	1130	565	100.0%	425	213	100.0%	45	23	100.0%	2898	966	100.0%

*Emergency department data not available for 2012: percentages and counts for the 2010-2011 year groups are calculated for 2 year intervals.

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Intentional self-inflicted injury related emergency department visits are defined as emergency department visits by Maine residents at any Maine hospitals that did not end with the patient being admitted to that hospital as an inpatient for which the external cause of injury code ICD-9-CM E950-E959 appears in any diagnosis or external cause of injury field.

Subgroup counts might not sum to Maine total due to missing data or rounding.

‘Other’ methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

TABLE 7: Intentional Self-inflicted Injury Related Emergency Department Visits by Method: By Age and Sex, 2001-2011 (Males)

Year	Method	MALE														
		10-24 years			25-44 years			45-64 years			65 years and older			Total		
		Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
2001 - 2003	Cutting	362	121	35.3%	233	78	31.3%	54	18	26.8%	5	2	17.2%†	654	218	32.7%
	Hanging/Suffocation	37	12	3.6%	19	6	2.5%†	4	1	1.9%†	2	1	6.8%†	62	21	3.1%
	Poisoning	369	123	36.0%	349	116	46.9%	117	39	56.2%	10	3	34.4%†	845	282	42.3%
	Other/Specified/Unspecified	255	85	24.9%	143	48	19.2%	26	9	12.9%	12	4	41.3%†	436	145	21.8%
Total 2001 - 2003	1023	341	100.0%	744	248	100.0%	201	67	100.0%	29	10	100.0%	1997	666	100.0%	
2004 - 2006	Cutting	426	142	32.9%	315	105	31.1%	94	31	27.0%	6	2	20.6%†	841	280	31.4%
	Hanging/Suffocation	25	8	1.9%	28	9	2.7%	6	2	1.7%†	2	1	6.8%†	61	20	2.3%
	Poisoning	408	136	31.5%	440	147	43.4%	202	67	56.2%	7	2	24.1%†	1057	352	39.4%
	Other/Specified/Unspecified	433	144	33.5%	229	76	22.6%	45	15	12.9%	14	5	48.2%†	721	240	26.9%
Total 2004 - 2006	1292	431	100.0%	1012	337	100.0%	347	116	100.0%	29	10	100.0%	2680	893	100.0%	
2007 - 2009	Cutting	449	150	31.2%	433	144	35.4%	97	32	23.2%	8	3	21.6%†	987	329	31.7%
	Hanging/Suffocation	38	13	2.6%	46	15	3.7%	11	4	2.6%†	2	1	5.4%†	97	32	3.1%
	Poisoning	376	125	26.1%	449	150	36.8%	249	83	59.5%	19	6	51.3%†	1083	364	35.1%
	Other/Specified/Unspecified	574	191	39.9%	292	97	23.9%	61	20	14.5%	8	3	21.6%†	935	312	30.0%
Total 2007 - 2009	1437	479	100.0%	1220	407	100.0%	418	139	100.0%	37	12	100%	3112	1037	100.0%	
2010 - 2011	Cutting	319	160	31.0%	264	132	29.5%	78	39	24.3%	7	4	21.8%†	668	223	29.4%
	Hanging/Suffocation	40	20	3.8%	24	12	2.6%	11	6	3.4%†	3	2	9.3%†	78	26	3.4%
	Poisoning	293	147	28.4%	368	184	41.2%	175	88	54.6%	9	5	28.1%†	845	282	37.2%
	Other/Specified/Unspecified	377	189	36.6%	237	119	26.5%	56	28	17.5%	13	7	40.6%†	683	228	30.0%
Total 2010 - 2011	1029	515	100.0%	893	447	100.0%	320	160	100.0%	32	16	100%	2274	758	100.0%	

*Emergency department data not available for 2012: percentages and counts for the 2010-2011 year groups are calculated for 2 year intervals.

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Intentional self-inflicted injury related emergency department visits are defined as emergency department visits by Maine residents at any Maine hospitals that did not end with the patient being admitted to that hospital as an inpatient for which the external cause of injury code ICD-9-CM E950-E959 appears in any diagnosis or external cause of injury field.

Subgroup counts might not sum to Maine total due to missing data or rounding.

‘Other’ methods include intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; jumping from a high place; drowning; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

†Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

SECTION TWO

DEMOGRAPHICS

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

DEATHS

Suicide Deaths by Total, Sex and Age, Maine, 2010-2012 (TABLE 8)

- Each year an average of 212 Maine people ages 10 and older die by suicide, a rate of 17.2 deaths per 100,000.
- Between 2010-2012, there were more suicide deaths among males (169 annual average) than among females (42 annual average).
- The highest suicide death rate occurred among Maine people ages 45-64 years (22.1 per 100,000), accounting for 43% of all suicide deaths among Maine people ages 10 and over.
- Maine youth ages 10-24 years had the lowest rate of suicide death (10.2 per 100,000) among all Maine people ages 10 and older.

TABLE 8: Suicide Deaths by Total, Sex and Age, Maine, 2010-2012

	Average Annual Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	212	17.8	16.5 - 19.3	17.2	15.9 - 18.6
Sex					
Female	42	6.9	5.8 - 8.3	6.8	5.7 - 8.1
Male	169	29.3	26.8 - 32.0	28.3	25.8 - 30.9
Age					
10-24 years	25	10.2	8.1 - 12.8	NApp	NApp
25-44 years	58	18.5	15.8 - 21.4	NApp	NApp
45-64 years	91	22.1	19.6 - 24.9	NApp	NApp
65 years and older	38	17.3	14.2 - 20.8	NApp	NApp

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population.

Suicide deaths are defined as deaths in which the underlying cause of death was coded as ICD-10 U03, X60-X84 or Y87.0.

Crude rates are deaths per 100,000 population. Age-adjusted rates are deaths per 100,000 population age-adjusted to the U.S. 2000 standard population.

95% CI: 95% confidence interval of the rate.

Subgroup counts might not sum to Maine total due to missing data or rounding.

NApp = Not applicable; age-adjusted rates are not calculated for age-specific groups.

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

DEATHS

Suicide Related Deaths by Geography, Maine, 2010-2012 (TABLE 9)

County

- During 2010-2012, Cumberland County had the highest average annual count of suicide death among Maine people ages 10 and over (42 deaths) while the lowest average annual suicide death counts occurred in Franklin and Piscataquis counties (4 each).
- Washington, Lincoln and Piscataquis counties had the highest age-adjusted suicide death rates while the lowest rates occurred in Franklin, Hancock and Oxford counties*.

Public Health District

- In 2010-2012, the Cumberland public health district had the highest average annual count of suicide deaths among Maine people ages 10 and older while the Aroostook district had the lowest.
- However, the highest age-adjusted suicide death rates occurred in the Midcoast and Penquis public health districts while the lowest age-adjusted suicide death rates occurred in the Aroostook and Western districts.

*Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

TABLE 9: Suicide Deaths by Geography, Maine, 2010 – 2012, Ages 10 and over

	Average Annual Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	212	17.8	16.5 - 19.3	17.2	15.9 - 18.6
County					
Androscoggin	16	16.6	12.2 - 22.1	16.5	12.1 - 21.8
Aroostook	9	14.0	9.2 - 20.4	13.8	8.9 - 20.1
Cumberland	42	16.8	14.0 - 20.0	15.9	13.2 - 18.9
Franklin	4	13.3 [†]	6.6 - 23.7 [†]	13.1[†]	6.3 - 23.0[†]
Hancock	6	12.8 [†]	7.7 - 20.1 [†]	13.0[†]	7.5 - 20.2[†]
Kennebec	17	15.6	11.6 - 20.5	15.8	11.7 - 20.8
Knox	6	17.7 [†]	10.7 - 27.7 [†]	20.4[†]	12.0 - 31.5[†]
Lincoln	7	23.6	14.8 - 35.7	21.1	12.6 - 32.3
Oxford	6	11.0 [†]	6.4 - 17.6 [†]	10.9[†]	6.1 - 17.3[†]
Penobscot	26	18.9	14.9 - 23.6	18.1	14.3 - 22.6
Piscataquis	4	23.2 [†]	11.6 - 41.5 [†]	24.6[†]	11.4 - 43.7[†]
Sagadahoc	5	17.0 [†]	9.7 - 27.6 [†]	17.5[†]	9.7 - 28.0[†]
Somerset	11	22.9	15.7 - 32.4	19.6	13.2 - 27.5
Waldo	8	22.2	14.0 - 33.2	20.8	12.9 - 31.0
Washington	8	26.2	16.6 - 39.3	22.5	13.9 - 33.8
York	32	17.9	14.5 - 21.9	17.4	13.9 - 21.3
District					
Aroostook	9	14.0	9.2 - 20.4	13.8	8.9 - 20.1
Central	28	17.8	14.2 - 22.1	17.0	13.4 - 21.1
Cumberland	42	16.8	14.0 - 20.0	15.9	13.2 - 18.9
Downeast	14	17.8	12.8 - 24.1	16.5	11.6 - 22.4
Midcoast	27	20.1	15.9 - 25.0	20.1	15.7 - 25.1
Penquis	30	19.3	15.5 - 23.8	18.7	14.9 - 23.0
Western	25	14.4	11.3 - 18.1	14.3	11.2 - 17.9
York	32	17.9	14.5 - 21.9	17.4	13.9 - 21.3

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population. Suicide deaths are defined as deaths in which the underlying cause of death was coded as ICD-10 U03, X60-X84 or Y87.0. Crude rates are deaths per 100,000 population. Age-adjusted rates are deaths per 100,000 population age-adjusted to the U.S. 2000 standard population. 95% CI: 95% confidence interval of the rate. Subgroup counts might not sum to Maine total due to missing data or rounding. †Rates are flagged as unreliable when the rate is calculated with a numerator of 20 or less.

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

HOSPITAL DISCHARGES

Intentional Self-inflicted Injury Related Hospital Discharges by Total, Sex and Age, 2010-2012

(TABLE 10)

- Each year an average of 1,080 Maine people ages 10 and older are discharged from the hospital due to intentional self-inflicted injuries.
- Significantly more Maine females than males are discharged from the hospital due to intentional self-inflicted injuries each year. In 2010-2012, more hospital discharges due to intentional self-inflicted injuries occurred among females (634 annual average) than males (446 annual average) resulting in a significantly higher age-adjusted rate among females (117.1 discharges per 100,000) compared to males (82.1 per 100,000).
- The most hospital discharges due to intentional self-inflicted injuries occurred among Maine people ages 25-44 years accounting for 41 percent of all hospital discharges due to intentional self-inflicted injury related hospital discharges among Maine people ages 10 and over.

TABLE 10: Intentional Self-inflicted Injury Related Hospital Discharges by Total, Sex and Age, 2010-2012

	Average Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	1,080	91.0	87.9 - 94.2	99.9	96.4 - 103.5
Sex					
Female	634	104.0	99.4 - 108.8	117.7	112.4 - 123.3
Male	446	77.2	73.1 - 81.4	82.1	77.7 - 86.7
Age					
10-24 years	270	110.7	103.3 - 118.6	NApp	NApp
25-44 years	445	142.5	135.0 - 150.4	NApp	NApp
45-64 years	311	75.3	70.6 - 80.3	NApp	NApp
65 years and older	53	24.5	20.8 - 28.6	NApp	NApp

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Intentional self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959 .

Crude rates are hospital discharges per 100,000 population. Age-adjusted rates are hospital discharges per 100,000 population age-adjusted to the U.S. 2000 standard population.

95% CI: 95% confidence interval of the rate.

Subgroup counts might not sum to Maine total due to missing data or rounding.

NApp = Not applicable; age-adjusted rates are not calculated for age-specific groups.

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

HOSPITAL DISCHARGES

Intentional Self-inflicted Injury Related Hospital Discharges by Geography, 2010-2012 (TABLE 11)

County

- Each year an average of 1,080 Maine people ages 10 and older are discharged from the hospital due to intentional self-inflicted injuries.
- The highest age-adjusted hospitalization rates due to intentional self-inflicted injuries occurred in Knox, Androscoggin and Sagadahoc counties, which were all significantly higher than the state's rate.
- The lowest age-adjusted hospitalization rates due to intentional self-inflicted injuries occurred in Washington and Piscataquis counties, which were significantly lower than the counties with the highest rates (Knox, Androscoggin and Sagadahoc). Washington County's rate was also significantly lower than the state's rate.

Public Health District

- The highest age-adjusted hospitalization rate due to intentional self-inflicted injuries occurred in the Midcoast district (138.7 per 100,000), which was significantly higher than the state's rate.
- The lowest age-adjusted hospitalization rate due to intentional self-inflicted injuries occurred in the Downeast district (71.7 per 100,000), which was significantly lower than the state's rate.

TABLE 11: Intentional Self-inflicted Injury Related Hospital Discharges by Geography, 2010-2012

	Average Annual Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	1,080	91.0	87.9 - 94.2	99.9	96.4 - 103.5
County					
Androscoggin	137	145.9	132.2 - 160.7	154.7	139.9 - 170.3
Aroostook	52	81.0	68.8 - 94.7	96.1	81.1 - 112.6
Cumberland	207	82.2	75.8 - 88.9	88.0	81.1 - 95.2
Franklin	17	62.7	46.8 - 82.2	74.2	54.7 - 97.0
Hancock	35	70.3	57.4 - 85.2	76.5	61.8 - 93.0
Kennebec	131	120.5	108.9 - 133.0	132.3	119.2 - 146.1
Knox	56	157.7	134.8 - 183.3	178.8	151.7 - 208.5
Lincoln	25	81.6	64.3 - 102.1	101.6	79.1 - 127.4
Oxford	37	71.7	59.0 - 86.4	81.3	66.4 - 97.9
Penobscot	104	75.5	67.4 - 84.4	80.0	71.2 - 89.5
Piscataquis	10	61.2	41.0 - 87.9	68.2	44.4 - 98.1
Sagadahoc	42	132.9	110.6 - 158.3	153.5	127.0 - 182.8
Somerset	43	92.5	77.2 - 109.9	101.8	84.5 - 121.0
Waldo	36	103.1	84.5 - 124.5	116.0	94.5 - 140.2
Washington	17	57.0	42.3 - 75.1	63.7	46.5 - 84.1
York	128	72.6	65.5 - 80.2	79.6	71.6 - 88.0
District					
Aroostook	52	81.0	68.8 - 94.7	96.1	81.1 - 112.6
Central	174	112.1	102.7 - 122.2	123.2	112.5 - 134.3
Cumberland	207	82.2	75.8 - 88.9	88.0	81.1 - 95.2
Downeast	51	65.4	55.4 - 76.5	71.7	60.3 - 84.3
Midcoast	159	119.8	109.3 - 131.0	138.7	126.1 - 152.1
Penquis	114	74.1	66.4 - 82.3	78.9	70.5 - 87.8
Western	192	110.5	101.7 - 120.0	121.1	111.2 - 131.5
York	128	72.6	65.5 - 80.2	79.6	71.6 - 88.0

Data Source: Maine Hospital Inpatient Database: Maine Health Data Organization.

Intentional self-inflicted injury related hospital discharges are defined as hospital discharges in which any listed external cause of injury was coded as ICD-9CM E950-E959. Crude rates are hospital discharges per 100,000 population. Age-adjusted rates are hospital discharges per 100,000 population age-adjusted to the U.S. 2000 standard population. 95% CI: 95% confidence interval of the rate. Subgroup counts might not sum to Maine total due to missing data or rounding.

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

EMERGENCY DEPARTMENT VISITS

Intentional Self-inflicted Injury Related Emergency Department Visits by Total, Sex and Age, 2009-2011 (TABLE 12)

Note: Emergency department visit data are not yet available for 2012.

- From 2009-2011, there was an average of 2,520 emergency department visits among Maine people ages 10 and older due to intentional self-inflicted injuries – a rate of 247.7 emergency department visits per 100,000 population.
- The highest intentional self-inflicted injury related hospital discharge rate occurred among Maine people ages 10-24 years (462.7 per 100,000) accounting for 45% of all intentional self-inflicted injury related emergency department visits among Maine people ages 10 and over.
- There were more intentional self-inflicted injury related emergency department visits among females (1,414 annual average) than males (1,106 annual average) resulting in a significantly higher age-adjusted rate among females (279.1 emergency department visits per 100,000) than males (216.9 visits per 100,000).

TABLE 12: Intentional Self-inflicted Injury Related Emergency Department Visits by Total, Sex and Age, 2009-2011

	Average Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	2,520	213.1	208.4 - 218.0	247.7	242.1 - 253.4
Sex					
Female	1,414	232.7	225.7 - 239.8	279.1	270.6 - 287.7
Male	1,106	192.5	186.0 - 199.2	216.9	209.5 - 224.5
Age					
10-24 years	1,137	462.7	447.3 - 478.4	NApp	NApp
25-44 years	988	311.9	300.8 - 323.4	NApp	NApp
45-64 years	359	87.7	82.6 - 93.2	NApp	NApp
65 years and older	36	17.2	14.1 - 20.8	NApp	NApp

*Emergency department data not available for 2012: rates and averages for the 2010-2011 year groups are calculated for 2 year intervals.

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Intentional self-inflicted injury related emergency department visits are defined as emergency department visits by Maine residents at any Maine hospitals that did not end with the patient being admitted to that hospital as an inpatient for which the external cause of injury code ICD-9-CM E950-E959 appears in any diagnosis or external cause of injury field.

Crude rates are ED visits per 100,000 population.

Age-adjusted rates are ED visits per 100,000 population age-adjusted to the U.S. 2000 standard population.

95% CI: 95% confidence interval of the rate.

Subgroup counts might not sum to Maine total due to missing data or rounding.

NApp = Not applicable; age-adjusted rates are not calculated for age-specific groups.

LIFESPAN (AGES 10 AND UP): DEMOGRAPHICS

EMERGENCY DEPARTMENT VISITS

Intentional Self-inflicted Injury Related Emergency Department Visits by Geography, 2009-2011 (TABLE 13)

Note: Emergency department visit data are not yet available for 2012.

County

- In 2009-2011, the highest age-adjusted emergency department visits due to intentional self-inflicted injuries occurred in Cumberland (338.4 per 100,000) and Piscataquis (336.4 per 100,000) counties, which were both significantly higher than the state's rate.
- The lowest age-adjusted emergency department visit rates due to intentional self-inflicted injuries occurred in Hancock County (152.6 per 100,000), which was significantly lower than the state's rate.

Public Health District

- The Cumberland public health district had the highest age-adjusted emergency department visit rate (338.4 per 100,000) due to intentional self-inflicted injuries, which was significantly higher than the state's rate.
- The Downeast public health district had the lowest age-adjusted emergency department rate due to intentional self-inflicted injuries (164.2 per 100,000), which was significantly lower than the state's rate.

TABLE 13: Intentional Self-inflicted Injury Related Emergency Department Visits by Geography, 2009-2011

	Average Annual Number	Crude Rate		Age-Adjusted Rate	
		Rate	95% CI	Rate	95% CI
Maine total	2,520	213.1	208.4 - 218.0	247.7	242.1 - 253.4
County					
Androscoggin	182	194.3	178.4 - 211.3	215.8	198.0 - 234.5
Aroostook	120	186.5	167.8 - 206.8	236.8	212.6 - 262.6
Cumberland	760	303.9	291.6 - 316.7	338.4	324.5 - 352.6
Franklin	54	198.3	169.1 - 231.2	227.2	193.1 - 264.6
Hancock	62	126.8	109.2 - 146.4	152.6	130.8 - 176.3
Kennebec	224	205.8	190.5 - 222.0	242.3	224.1 - 261.3
Knox	68	187.6	162.7 - 215.3	247.3	214.0 - 283.3
Lincoln	44	142.3	119.2 - 168.7	191.3	159.4 - 226.5
Oxford	77	149.8	131.0 - 170.4	185.1	161.6 - 210.4
Penobscot	283	207.8	194.0 - 222.2	224.1	209.1 - 239.8
Piscataquis	40	254.4	210.7 - 304.4	336.4	277.1 - 402.2
Sagadahoc	51	162.0	137.5 - 189.7	197.4	167.0 - 230.7
Somerset	91	196.6	173.9 - 221.4	231.1	204.0 - 260.1
Waldo	64	185.9	160.5 - 214.1	223.6	192.7 - 257.2
Washington	45	154.7	129.7 - 183.1	183.7	153.1 - 217.5
York	355	200.1	188.3 - 212.5	233.4	219.4 - 247.9
District					
Aroostook	120	186.5	167.8 - 206.8	236.8	212.6 - 262.6
Central	314	203.0	190.3 - 216.4	238.9	223.7 - 254.6
Cumberland	760	303.9	291.6 - 316.7	338.4	324.5 - 352.6
Downeast	107	137.2	122.6 - 153.0	164.2	146.2 - 183.4
Midcoast	227	170.5	158.0 - 183.8	216.5	200.3 - 233.4
Penquis	323	212.6	199.4 - 226.4	233.2	218.5 - 248.4
Western	313	181.7	170.3 - 193.7	209.0	195.7 - 222.8
York	355	200.1	188.3 - 212.5	233.4	219.4 - 247.9

*Emergency department data not available for 2012: rates and averages for the 2010-2011 year groups are calculated for 2 year intervals. Data Source: Maine Hospital Outpatient Database: Maine Health Data Organization. Intentional Self-injury Related ED visit are defined as ED visit in which any listed external cause of injury was coded as ICD-9CM E950-E959. Crude rates are ED visit per 100,000 population. Age-adjusted rates are ED visit per 100,000 population age-adjusted to the U.S. 2000 standard population. 95% CI: 95% confidence interval of the rate. Subgroup counts might not sum to Maine total due to missing data or rounding.

SECTION THREE

METHOD

LIFESPAN (AGES 10 AND UP): METHOD

DEATHS

Suicide Deaths by Method, Total, 2010-2012 (TABLE 14)

- During 2010-2012 there were 635 suicide deaths among Maine people ages 10 and up (212 annual average).
- Firearms were the most common method of suicide death among Maine people ages 10 and up accounting for 50 percent of all suicide deaths, followed by hanging/strangulation/suffocation (23 percent) and poisoning (19 percent).
- Drowning, jumping and other* were the least common methods of suicide death accounting for eight percent of all suicide deaths among Maine people ages 10 and up from 2010-2012.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 14: Suicide Deaths by Method, Total, 2010-2012

METHOD OF SUICIDE DEATH	TOTAL	AVERAGE	PERCENT
Firearms	320	107	50.4%
Hanging, strangulation, suffocation	144	48	22.7%
Poisoning	122	41	19.2%
Drowning	14	5	2.2%†
Jumping	9	3	1.4%†
Other*	26	9	4.1%
TOTAL 2010 - 2012	635	212	100.0%

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population.

Suicide deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03, X60-X84 or Y87.0.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

DEATHS

Suicide Deaths by Sex and Method, 2010-2012 (TABLE 15)

- Among Maine people ages 10 and up, there were more suicide deaths among males than females in 2010-2012. There were 508 suicide deaths among Maine males ages 10 and up (169 annual average) compared to 127 among Maine females ages 10 and up (42 annual average).

Females

- Among Maine females, poisoning was the most common method of suicide death accounting for 47 percent of all suicide deaths among Maine females ages 10 and up in 2010-2012.
- Firearms were the second most common method of suicide death among Maine females ages 10 and up (34 deaths) accounting for 27 percent of all female lifespan suicide deaths.
- The least common methods of suicide death among Maine females ages 10 and up were drowning, jumping, and other* accounting for 11 percent of suicide deaths among female lifespan suicide deaths.

Males

- Firearms were the most common method of suicide death among Maine males ages 10 and up (286 deaths) accounting for 56 percent of all suicide deaths among males in 2010-2012.
- The second most common method of suicide death among males ages 10 and up was hanging/strangulation/suffocation (125 deaths) accounting for 25 percent of all male lifespan suicide deaths.
- The least common methods of suicide death among males ages 10 and up were drowning, jumping, and other* accounting for 6 percent of suicide deaths among males ages 10 and up.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 15: Suicide Deaths by Sex and Method, 2010-2012

METHOD OF SUICIDE DEATH	FEMALE			MALE		
	Total	Average	Percent	Total	Average	Percent
Firearms	34	11	26.8%	286	95	56.3%
Hanging, strangulation, suffocation	19	6	15.0%†	125	42	24.6%
Poisoning	60	20	47.2%	62	21	12.2%
Drowning	6	2	4.7%†	8	3	1.6%†
Jumping	3	1	2.4%†	6	2	1.2%†
Other*	5	2	3.9%†	21	7	4.1%
TOTAL 2010-2012	127	42	100.0%	508	169	100.0%

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population.

Suicide deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03, X60-X84 or Y87.0.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

DEATHS

Suicide Deaths by Age and Method, 2010-2012 (TABLE 16)

- During 2010-2012, the most suicide deaths occurred among Maine people ages 45-64 years (91 annual average) and 25-44 years (58 annual average).
- The fewest suicide deaths occurred among Maine youth ages 10-24 years (25 annual average).
- Firearms were the most common method of suicide death among Maine people in all age groups accounting for 41–70 percent of all suicide deaths in each of the four age groups.
- Hanging/suffocation/strangulation was the second most common method of suicide death among those ages 10-24 years and 25-44 years (35% and 28%, respectively) while poisoning was the second most common method among those ages 45-64 years and 65 years and over (23% and 12%, respectively).
- The least common methods of suicide death among all four age groups were drowning, jumping and other* accounting for 7-10% of all suicide deaths from 2010-2012.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 16: Suicide Deaths by Age and Method, 2010-2012

METHOD OF SUICIDE	AGE											
	10-24 years			25-44 years			45-64 years			65 years and older		
	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
Firearms	35	12	46.7%	71	24	41.0%	135	45	49.3%	79	26	69.9%
Hanging/suffocation/strangulation	26	9	34.7%	49	16	28.3%	59	20	21.5%	10	3	8.8%
Poisoning	8	3	10.7%†	39	13	22.5%	62	21	22.6%	13	4	11.5%
Drowning	4	1	5.3%†	2	1	1.2%†	4	1	1.5%†	4	1	3.5%†
Jumping	1	0	1.3%†	5	2	2.9%†	2	1	0.7%†	1	0	0.9%†
Other*	1	0	1.3%†	7	2	4.0%†	12	4	4.4%†	6	2	8.8%†
TOTAL 2010-2012	75	25	100.0%	173	58	100.0%	274	91	100.0%	113	38	5.3%

Data Source: Maine death certificate, Maine CDC Data, Research and Vital Statistics. U.S. Census Bureau population.

Suicide deaths are defined as deaths of Maine residents for which the underlying cause of death was coded as ICD-10 U03, X60-X84 or Y87.0.

Poisoning includes drugs/alcohol/gas/other.

Subgroup counts might not sum to Maine total due to missing data or rounding.

†Flagged for reliability due to numerators less than 20.

***Other** includes suicide deaths caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

HOSPITAL DISCHARGES

Intentional Self-inflicted Injury Related Hospital Discharges by Method, Total, 2010-2012 (TABLE 17)

- During 2010-2012, there was an annual average of 1,080 hospital discharges due to intentional self-inflicted injuries among Maine people ages 10 and up.
- Poisoning was the most common cause of intentional self-inflicted injuries resulting in hospitalization accounting for 76 percent of all discharges due to self-inflicted injuries among Maine people ages 10 and up, followed by other* methods (11 percent) and cutting (10 percent).
- Drowning, firearms, hanging/suffocation/strangulation, and jumping were the least common causes accounting for 3 percent of all hospital discharges due to intentional self-inflicted injuries in 2010-2012.

***Other** includes intentional self-inflicted injury caused by: explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 17: Intentional Self-inflicted Injury Related Hospital Discharges by Method, Total, 2010-2012

METHOD OF SELF-INFLICTED INJURY	TOTAL	AVERAGE	PERCENT
Cutting	316	105	9.8%
Drowning	3	1	0.1%†
Firearms	27	9	0.8%
Hanging/suffocation/strangulation	47	16	1.5%
Jumping	27	9	0.8%
Poisoning	2476	825	76.4%
Other*	343	114	10.6%
TOTAL 2010-2012	3239	1080	100.00%

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

HOSPITAL DISCHARGES

Intentional Self-inflicted Injury Related Hospital Discharges by Sex and Method, 2010-2012

(TABLE 18)

- During 2010-2012 there were more hospital discharges due to intentional self-inflicted injuries among Maine females ages 10 and up (634 annual average) than among Maine males ages 10 and up (446 annual average).
- Poisoning was the most common cause of intentional self-inflicted injuries resulting in hospitalization among both females and males, accounting for 81 percent and 71 percent, respectively, of all hospital discharges due to intentional self-inflicted injuries among Maine people ages 10 and up.
- Among females ages 10 and up, other* was the second most common cause of hospital discharges due to intentional self-inflicted injuries (10 percent) while cutting was third (8 percent).
- Among males ages 10 and over, cutting was the second most common cause of hospital discharges due to intentional self-inflicted injuries (12 percent) and other* was third (12 percent).

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 18: Intentional Self-inflicted Injury Related Hospital Discharges by Sex and Method, 2010-2012

METHOD OF SELF- INFLECTED INJURY	FEMALE			MALE		
	TOTAL	AVERAGE	PERCENT	TOTAL	AVERAGE	PERCENT
Cutting	152	51	7.9%	164	55	12.2%
Drowning	0	0	0.0%†	3	1	0.2%†
Firearms	6	2	0.3%†	21	7	1.5%
Hanging/suffocation/ strangulation	12	4	0.6%†	35	12	2.6%
Jumping	12	4	0.6%†	15	5	1.1%†
Poisoning	1532	511	80.5%	944	315	70.6%
Other*	188	63	9.8%	155	52	11.5%
TOTAL 2010-2012	1902	634	100.0%	1337	446	100.0%

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

HOSPITAL DISCHARGES

Intentional Self-inflicted Injury Related Hospital Discharges by Age and Method, 2010-2012

(TABLE 19)

- During 2010-2012, the fewest hospital discharges due to intentional self-inflicted injuries occurred among Maine adults ages 65 years and older (53 annual average) while the most occurred among Maine adults ages 25-44 years (445 annual average).
- Among all age groups, poisoning was the most common cause of hospitalization due to intentional self-inflicted injuries.
- Other* was the second most common cause of hospitalization due to intentional self-inflicted injuries among both the youngest, 10-24 years, and oldest, 65 years and older, age groups (18 percent and 16 percent, respectively) while cutting was the second most common cause among the 25-44 years and 45-64 years age groups (11 percent and 7 percent, respectively).
- Cutting was the third most common cause of hospitalizations due to intentional self-inflicted injuries among both the 10-24 years and 65 years and older age groups (12 percent and 8 percent, respectively) while other* was the third most common cause among the 25-44 years and 45-64 years age groups (11 percent and 7 percent, respectively).
- Drowning, firearms, hanging/suffocation/strangulation and jumping were the least common causes of hospitalization due to intentional self-inflicted injuries accounting for 2-5 percent of all intentional self-inflicted injury related hospital discharges among the four age groups during 2010-2012.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 19: Intentional Self-inflicted Injury Related Hospital Discharges by Age and Method, 2010-2012

METHOD OF SELF-INFLECTED INJURY	AGE											
	10-24 years			25-44 years			45-64 years			65 years and older		
	Total Number	Average	Percent	Total Number	Average	Percent	Total Number	Average	Percent	Total Number	Average	Percent
Cutting	97	32	11.9%	145	48	10.8%	62	21	6.6%	12	4	7.5%
Drowning	0	0	0.0%	1	0	0.0%	1	0	0.1%	1	0	0.6%
Firearms	2	1	0.2%	7	2	0.5%	13	4	1.3%	5	2	3.1%
Hanging/suffocation/strangulation	14	5	1.7%	21	7	1.5%	9	3	0.9%	3	1	1.8%
Jumping	9	3	1.1%	13	4	0.9%	5	2	0.5%	0	0	0.0%
Other*	147	49	18.1%	110	37	8.2%	60	20	6.4%	26	9	16.2%
Poisoning	542	181	66.8%	1039	346	77.7%	782	261	83.9%	113	38	70.6%
TOTAL 2010-2012	811	270	100.0%	1336	445	100.0%	932	311	100.0%	160	53	100.0%

Data Source: Maine Hospital Inpatient Database, Maine Health Data Organization.

Self-inflicted injury related hospital discharges are defined as hospital discharges of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

*Other includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

EMERGENCY DEPARTMENT VISITS

Intentional Self-inflicted Injury Related Emergency Department Visits by Method, Total, 2009-2011 (TABLE 20)

Note: Emergency department visit data are not yet available for 2012.

- During 2009-2011, there was an annual average of 2,520 emergency department visits due to intentional self-inflicted injuries among Maine people ages 10 and up.
- Poisoning was the most common cause of emergency department visits due to intentional self-inflicted injuries accounting for 43 percent of all visits, followed by cutting (34 percent) and other * methods (20 percent).
- Drowning, firearms, hanging/strangulation/suffocation and jumping were the least common causes accounting for 3 percent of all emergency department visits due to intentional self-inflicted injuries in 2009-2011.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 20: Intentional Self-inflicted Injury Related Emergency Department Visits by Method, Total, 2009-2011

METHOD OF SELF-INFLICTED INJURY	TOTAL	AVERAGE	PERCENT
Cutting	2560	854	33.7%
Drowning	13	4	0.2%†
Firearms	37	13	0.5%
Hanging/suffocation/strangulation	164	54	2.2%
Jumping	38	13	0.5%
Poisoning	3267	1089	43.2%
Other*	1481	494	19.6%
TOTAL 2009-2011	7560	2520	100.0%

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Self-inflicted injury related emergency department visits are defined as emergency department visits of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

EMERGENCY DEPARTMENT VISITS

Intentional Self-inflicted Injury Related Emergency Department Visits by Sex and Method, 2009-2011 (TABLE 21)

Note: Emergency department visit data are not yet available for 2012.

- In 2009-2011 there were more emergency department visits due to intentional self-inflicted injuries among Maine females ages 10 and over (1,414 annual average) than among Maine males ages 10 and over (1,106 annual average).
- Among both Maine females and males, poisoning was the most common cause of intentional self-inflicted injuries resulting in an emergency department visit (48 percent among females, 37 percent among males), followed by cutting (37 percent among females, 30 percent among males) and then other * methods (13 percent among females, 28 percent among males).
- Drowning, firearms, hanging/strangulation/suffocation and jumping were the least common causes of emergency department visits due to intentional self-inflicted injuries accounting for 2 percent and 5 percent among females and males, respectively.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 21: Intentional Self-inflicted Injury Related Emergency Department Visits by Sex and Method, 2009-2011

METHOD OF SELF- INFLICTED INJURY	FEMALE			MALE		
	TOTAL	AVERAGE	PERCENT	AVERAGE	TOTAL	PERCENT
Cutting	1553	518	36.6%	1007	336	30.3%
Drowning	6	2	0.1%†	7	2	0.2%†
Firearms	5	2	0.1%†	32	11	0.9%
Hanging/Suffocation/ Strangulation	55	18	1.2%	109	36	3.2%
Jumping	18	6	0.4%†	20	7	0.6%
Poisoning	2044	681	48.1%	1223	408	36.8%
Other*	560	187	13.2%	921	307	27.7%
TOTAL 2009-2011	4241	1414	100.0%	3319	1106	100.0%

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Self-inflicted injury related emergency department visits are defined as emergency department visits of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

LIFESPAN (AGES 10 AND UP): METHOD

EMERGENCY DEPARTMENT VISITS

Intentional Self-inflicted Injury Related Emergency Department Visits by Age and Method, 2009-2011 (TABLE 22)

Note: Emergency department visit data are not yet available for 2012.

- During 2009-2011, the most emergency department visits due to intentional self-inflicted injuries occurred among Maine people ages 10-24 year (1,137 annual average) and adults ages 25-44 years (988 annual average).
- The fewest emergency department visits due to intentional self-inflicted injuries occurred among older Maine adults ages 65 years and over (36 annual average).
- Poisoning was the most common cause of emergency department visits due to intentional self-inflicted injuries among all age groups 25 years and older (25-44 years: 46 percent, 45-64 years: 62 percent, 65 and over: 44 percent) while poisoning was the most common cause among youth ages 10-24 years (37 percent).
- Cutting was the second most common cause of emergency room visits due to intentional self-inflicted injuries among all age groups 25 years and older (25-44 years: 34 percent, 45-64 years: 24 percent, 65 and over: 25 percent) while poisoning was the most common cause among those ages 10-24 years (35 percent).
- Other* was the third most common cause of emergency department visits due to intentional self-inflicted injuries among all age groups.
- Drowning, firearms, hanging/suffocation, and jumping were the least common causes of emergency department visits due to intentional self-inflicted injuries accounting for 3-11 percent of all visits among all ages during 2009-2011.

***Other** includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

TABLE 22: Intentional Self-inflicted Injury Related Emergency Department Visits by Age and Method, 2009-2011

METHOD OF SELF-INFLICTED INJURY	AGE											
	10-24 years			25-44 years			45-64 years			65 years and older		
	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent	Total	Average	Percent
Cutting	1273	424	37.3%	1000	333	33.7%	260	87	24.1%	27	9	24.7%
Drowning	4	1	0.1%	5	2	0.1%	2	1	0.1%	2	1	1.8%
Firearms	5	2	0.1%	11	4	0.3%	16	5	1.4%	5	2	4.5%
Hanging/suffocation	88	29	2.5%	52	17	1.7%	20	7	1.8%	4	1	3.6%
Jumping	13	4	0.3%	18	6	0.6%	6	2	0.5%	1	0	0.9%
Poisoning	1182	394	34.6%	1368	456	46.1%	669	223	62.1%	48	16	44.0%
Other*	846	282	24.8%	510	170	17.2%	103	34	9.5%	22	7	20.1%
TOTAL 2009-2011	3411	1137	100.0%	2964	988	100.0%	1076	359	100.0%	109	36	100.0%

Data Source: Maine Hospital Outpatient Database, Maine Health Data Organization.

Self-inflicted injury related emergency department visits are defined as emergency department visits of Maine residents for which the any listed external cause of injury was coded as E950-E959.

Subgroup counts might not sum to Maine total due to missing data or rounding.

Poisoning includes drugs/alcohol/gas/other.

†Flagged for reliability due to numerators less than 20.

*Other includes intentional self-inflicted injury caused by explosive material; smoke, fire and flames; steam, hot vapors and hot objects; sharp object; blunt object; lying before moving object; crashing of motor vehicle and intentional self-harm by other specified/unspecified means.

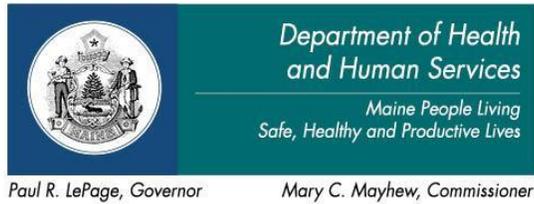
**APPENDIX A:
ICD-9-CM and ICD-10 Definitions**

Appendix A-1. ICD-10 Cause of Death Code Definitions

ICD-10 Cause of Death Codes	Description
X60-X64	Intentional self-poisoning (suicide) by and exposure to drugs and other biological substances
X65-X66, X68-X69	Intentional self-poisoning (suicide) by and exposure to other and unspecified solid or liquid substances and their vapors
X67	Intentional self-poisoning (suicide) by and exposure to other gases and vapors
X70	Intentional self-harm (suicide) by hanging, strangulation and suffocation
X72-X74	Intentional self-harm (suicide) by discharge of firearms
X80	Intentional self-harm (suicide) by jumping from a high place
U03, X71, X75-79, X81-X84, Y87.0	Intentional self-harm (suicide) by all other and unspecified means and their sequelae

Appendix A-2. ICD-9-CM Diagnosis Code Definitions

ICD-9-CM Code	Description
E950	Suicide and self-inflicted poisoning by solid or liquid substances
E951	Suicide and self-inflicted poisoning by gases in domestic use
E952	Suicide and self-inflicted poisoning by other gases and vapors
E953	Suicide and self-inflicted injury by hanging, strangulation, and suffocation
E954	Suicide and self-inflicted injury by submersion (drowning)
E955	Suicide and self-inflicted injury by firearms, air guns and explosives
E956	Suicide and self-inflicted injury by cutting and piercing instrument
E957	Suicide and self-inflicted injury by jumping from high places
E958	Suicide and self-inflicted injury by other and unspecified means
E959	Late effects of self-inflicted injury



MAINE CENTER FOR DISEASE CONTROL AND PREVENTION
DIVISION OF POPULATION HEALTH
MAINE SUICIDE PREVENTION PROGRAM

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