



Opinion

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Suicide Prevention and Treatments



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Abstract

Suicide is a common clinical event that leads to a lot of human mortality and casualty worldwide. Besides, huge economic burdens, a great deal of human resources and hospital facilities must be allocated for suicide preventions and treatments. In order to update these efforts, modern diagnostic and therapeutic systems must be established. This article focuses on these characters and information we can understand and prepare with.

Keywords: Suicide ideation; Suicide diagnosis; Mental illness therapy; Modern diagnostics; Anti-depressants; Drug toxicity; Drug combinations

Introduction

There are ups and downs in the study of suicide/mental illness diagnostics and therapeutics. Generally speaking, suicide symptom predictions and preventions are very difficult. Nonetheless, a great progress has been made. Since a lot of factors can accelerate or slow down suicidal ideations, rates and mortalities, it needs to find ways of reducing suicidal ideations and rates by these different ranges of factor managements-including environmental, genetic/molecular abnormality and chemical structure of drugs [1]. In order to do this, quickly diagnosis of suicide ideations and mental illnesses plays key role in suicide predictions, preventions and disease managements by drugs. In addition, discovery of specific, highly effective and low toxicity therapeutic means and drugs is the paramount tasks for suicide preventions and treatments. Different types of suicide prediction and prevention studies nowadays None the less, modern suicide prediction and preventions must be built on the knowledge about suicide pathogenesis and mechanisms of action of every targeted drug [2-3]. The visual and morphologic observation and analysis of patient's brain volume or locations, as we can imagine, might earlier success than those from genetic/bioinformatics data owing to easier data handling systems and quantifications [4-8]. We suggest that expanding scientific and medical studies between diagnostics and therapeutics might be the very foundation of modern suicide diagnostics and

treatments. More recently, we here in strongly recommend that the modern suicide/mental illness medications must be based on cooperative work from multidisciplinary-excellent clinical teamwork [7,9]. Without these efforts, little pathologic/therapeutic advancements can be expected.

Current chemotherapy for suicide prediction, preventions and treatments is imperfect. A great deal of attentions must be focused on medical challenge. We shall take parts scientific investigations not only upon pathogenesis processes, but also upon pharmacologic/medicinal chemistry subjects [9]. From our own perspective, chemo- or biotherapy study on moderate-to-severe suicide/mental health problem patients is desperately needed. If no arsenal for moderate-to-severe patient's treatments and managements, suicide predictions and preventions cannot be fully realized.

Major hotspots in present and future suicide studies several interesting topics are enlisted as the priority

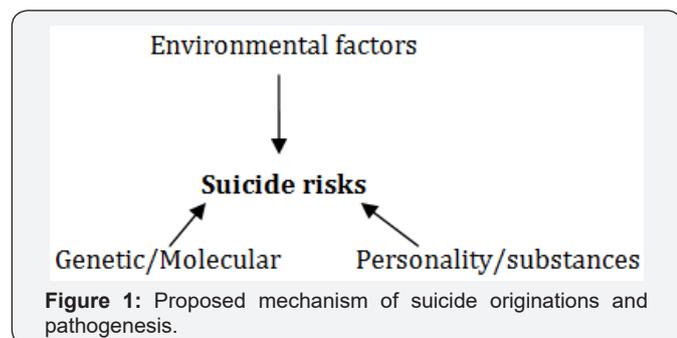
- a. Finding out the interplay between outside factors (social/culture/economic/bad experience and habit etc) and insiders (genetic/molecular/visual/chemical and so on). By doing this, overall pathogenesis status can be understood and used as therapeutic predictive ways [1,10].

b. Updating suicide/mental illness diagnostics with modern science and technology (genetic/molecular/visual information) and reducing costs.

c. Since the suicide/mental illness pathogenesis play important roles for suicide events and mortality, further scientific investigations are very necessary. Expanding funds and worldwide cooperation are noteworthy.

d. Clinical drug treatment is the easiest therapeutic option for any disease. Thus, we must emphasize genetic/molecular studies for drug developments.

Today, the suicide treatment is at the verge of formal scientific therapeutic study. We wish this introduction will raise the awareness from more scientists of any disciplinary if available - even including mathematicians and technique-devise supporters, which may help the people who desperately need updating medical cares. The most important task for suicide/mental illness studies is to find out its central dogma. Presently, we can only propose a triangle model for discussions (Figure 1).



Conclusion

Now we are very confident for the bright future in suicide predictions, preventions and therapeutics in modern ways (technical-based systems) [11]. Certainly, we shall not satisfy present advances in the fields of suicide study. Let's join hands

from all participants who are interested in this subject and want to make a difference in this road trip.

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