Author, Year Country	Diagnosis	Interventions	Duration	N	Mean age, % female, race (variance)	Outcome definition	Results
Berman 2007 ²⁹ US	Adults with major depressive disorder with incomplete response to standard	(A) Adjunctive aripiprazole 11.8 mg/day (mean) (B) Adjunctive placebo Both added to ongoing standard antidepressants	6 weeks	362	Age (SD): A=46.5 (10.6), B=44.2 (10.9) Female: A=61.5%, B=64.2% Caucasian: A=87.4%, B=92.6% Black: A=8.2%, B=5.7%	Suicide Assessment methods NR	Suicides: None
Brent 2009 ²⁶ (TORDIA) US	SSRI-resistant depression in adolescents	Switch to another SSRI or venlafaxine: (A) With CBT (B) Without CBT	12 weeks	334	Mean age, years (SD): SSRI=16.0 (1.6), Venlafaxine=15.8 (1.5), No CBT=15.8 (1.6), CBT=16.0 (1.5) 70% Female 82% White	Suicide-related symptoms assessed by the Beck Depression Inventory, Suicide Ideation Questionnaire-Jr., and Side Effects Form for Children and Adolescents	Suicidal self-injury adverse events: No statistically significant treatment effects (rates NR)
Calabrese 2005 ²⁸ US	Adults with bipolar I or II depression	(A) Quetiapine 600 mg (B) Quetiapine 300 mg (C) Placebo	8 weeks	542	Age (SD): A=37.3 (11.4), B=36.6 (11.2), C=38.3 (11.1) Female: A=58.2%, B=54.1%, C=62.1% Caucasian: A=84.7%, B=82.0%, C=76.3% Black: A=10.6%, B=13.4%, C=15.4%	Suicide attempts, suicides: Assessment methods NR	Suicide attempts: 0.5% (1/180) vs 0.5% (1/181) vs 0, <i>P</i> -value NR Suicides: None
DeRubeis 2005 ²³ US	Adults with moderate to severe depression	(A) Paroxetine 10 mg to 50 mg (B) Placebo (C) Cognitive Therapy	8 weeks	240	Mean age (SD): 40 years (12) 59% Female 82% White	Suicide Assessment methods NR	Suicide deaths: A=0.8% (1/120) vs B=0 vs C=0
Emslie 2006 (TADS) ¹⁹ US	Adolescents with MDD	(A) Fluoxetine alone (B) CBT alone (C) Combination of fluoxetine and CBT (D) Placebo	36 weeks	439	Mean age (SD): 14.6 years (1.5) 54.4% Female 73.8% White 12.5% African American 8.9% Hispanic	Suicide behavior assessed using Columbia-Classification Algorithm for Suicidal Assessment (C-CASA)	12 weeks Suicide deaths: None Suicide attempts: A=1.8% (2/109), B=0.9% (1/111), C=1.9% (2/107), D=0% (0/112), "rates are not significantly different" (<i>P</i> not reported) 36 weeks
							Suicide deaths: None Suicide attempts: A=6.4% (7/109), B=3.6% (4/111), C=3.7% (4/107), D=5.4% (6/112), <i>P</i> not reported
Emslie 2006 ¹⁸ US, Canada	Children and adolescents with MDD	(A) Paroxetine 10 mg (B) Placebo	8 weeks	206	Mean age (SD): 12.0 (2.97) 46.8% Female 79.3% White 20.7% Other race	Suicide Assessment methods NR	Suicide behavior: A=2% (2/104) vs B=0
Emslie 2009 ²⁰ US	Adolescent depression	(A) Escitalopram 10 to 20 mg (B) Placebo	8 weeks	316	Mean age (SD): A=14.7 (1.6) vs B=14.5 (1.5) % Female: A=59.4% vs B=58.6% White: A=72.9% vs B=78.3%	Suicide Assessment methods NR	Adverse events suggestive of self-harm, with a suicidal tendency: (A) 0 (B) 0.6% (1/157)

Author, Year							
Country	Diagnosis	Interventions	Duration	N	Mean age, % female, race (variance)	Outcome definition	Results
Goodyer 2008 (ADAPT) ²⁷ UK	Adolescents with MDD	(A) SSRI alone (fluoxetine treatment of choice) (B) SSRI plus CBT	28 weeks	208	Mean age (SD): 14.0 years (1.5) 74% Female 97% were of white European origin	All acts of self-harm were asked about and recorded. Suicidality was rated based on suicidality items from the K-SADS-PL or the Suicidality/ Self-Harm section of the K-SADS-L	Suicide acts: Week 6: SSRI-only=9.2% (9/98) vs SSRI+CBT=5.1% (5/98) Week 12: SSRI-only=8.0% (8/100) vs SSRI+CBT=6.9% (7/101) Week 28: SSRI-only= 6.4% (6/94) vs SSRI+CBT= 7.1% (7/98) Time—treatment interaction: OR 1.002 (95% CI, 0.93 to 1.08) Pooled treatment effect: OR 0.995 (95% CI, 0.45 to 2.21)
Grunebaum	Adults with MDD	(A) Bupropion	Acute=8 weeks	78	Mean age, years (SD): A=37.9 (11.9) vs	Suicidal events were assessed	Suicide deaths: None
2011 ²⁴ US	with a suicide attempt history or current suicidal ideation	(B) Paroxetine	Continuation=16 weeks		B=35.2 (12.8) % Female: A=55.3% vs B=58.3% White: A=68.4% vs B=72.2%	with the Columbia Suicide History Form (Oquendo 2003)	
Hallahan 2007 ³⁵ Ireland	Adults who presented acutely with self-harm	(A) Eicosapentaenoic acid 1.2 mg plus docosahexaenoic acid 0.9 mg (B) Placebo	12 weeks	49	Age, mean: A=30.5 vs B=30.7 65% Female Race NR	Suicidality was measured using the Overt Aggression Scale	No completed acts of suicide during the study period
Khan 2011 ³³ US	Severely ill depressed adults	(A) Citalopram 20 mg plus lithium 300 mg (B) Citalopram 20 mg plus placebo	4 weeks	80	Age, mean: A=45.0 vs B=38.5 % Female: A=47.5% vs B=62.5% % Caucasian: A=72.5% vs B=62.5%	Suicidal behaviors assessed using clinician-administered Sheehan-Suicidality Tracking Scale (S-STS)	Suicide deaths: None Suicide attempts: None
Lauterbach 2008 ³⁴ Germany ^a	Adults with a suicide attempt within 3 months in the context of a depressive spectrum disorder (76% major depressive disorder, 19% adjustment disorder, 5% other (e.g., dysthymia)	(A) Lithium (effective blood level considered 0.6-0.8 mmol/l (B) Placebo	1 year	167	A vs B: Mean age (SD): 39.6 (3.9) vs 39.3 (13.0) 61.9% vs 53.0% female Race NR	Attempted suicides and deaths by suicide (composite): Suicidal acts assessed by participant report.	Suicide deaths: A=0/84 (0%) B=3/83 (3.6%) Suicide attempts: A=7/84 (8.3%) B=7/83 (8.4%) Suicide attempt or death by suicide (primary endpoint): A=7 (8.3%) B=10 (12.0%) Incidence rate per patient-year: A=12.7% B=21.7% Adjusted HR: 0.52 (0.19 to 1.44); P=0.206 Death by suicide (post hoc secondary endpoint): A=0 (0%) B=3 (3.6%) Incidence rate per patient-year: A=0 B=6.5% P=0.049

Author, Year Country	Diagnosis	Interventions	Duration	N	Mean age, % female, race (variance)	Outcome definition	Results
Marcus 2008 ³⁰ US	Adults with major depressive disorder with incomplete response to standard	(A) Adjunctive aripiprazole 11.0 mg/day (mean) (B) Adjunctive placebo Both added to ongoing standard antidepressants	6 weeks	381	Age (SD): A=44.6 (11.0), B=44.4 (10.7) Female: A=66.0%, B=67.4% Caucasian: A=89.0%, B=88.9% Black: A=7.3%, B=7.4%	Suicide: Assessment methods NR	Suicides: None
Oquendo 2011 ³² US	Adults with bipolar disorder, in a depressive or mixed episode, with ≥ 1 past suicide attempt	(A) Lithium 0.6–1.0 mEq/dl (B) Valproate 45–125 μg/ml Open-label adjunctive treatment provided as needed, based on algorithm	2.5 years	98	Age, mean (SD): A=33 (11) vs B=34 (10) % Female: A=76% vs B=69% % White: A=67% vs B=64%	Suicide completion: self-inflicted death for which there was evidence of at least some intent to end one's life Suicide attempt: potentially self-injurious behavior carried out with at least some intent to end one's life	Suicide deaths: None Suicide attempts: A=12% (6/49) vs B=16% (8/49); <i>P</i> -value not reported Time to suicide attempt: Log-rank test showed no differences
Wagner 2006 ²² US	Children with MDD	(A) Escitalopram 10-20 mg (B) Placebo	8 weeks	268	Mean age (SD): A=12.2 (3.9) vs B=12.4 (3.0) % female: A=51.9% vs B=51.9% White: A=71.0% vs B=71.4% Black: A=14.5% vs B=12.8% Asian: A=0.8% vs B=1.5% Other: A=13.7% vs B=14.3%	Suicide Assessment methods NR	No suicides
Zisook 2011 ²⁵ US	Adults with either recurrent or chronic MDD	(A) Escitalopram plus placebo (B) Escitalopram plus bupropion SR (C) Venlafaxine XR plus mirtazapine	7 months	665	Mean age (SD): 42.7 years (13.0) 68% Female 67% White 27.1% Black 15.2% Hispanic 5.9% Other	Not reported	Suicide deaths: None Suicide attempts: A=0 vs B=0 vs C=2.3% (4/173), P=0.0162

^aThis study was excluded due to the country in which it was conducted; it is included in this table as a background article for comparison and discussion purposes only.