

Response to Aubin et al

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We appreciate the comments on our paper by Aubin and colleagues, and agree that tobacco use disorder is a potentially important risk factor for suicide. Nonetheless, given preliminary evidence suggesting potential male-female differences with respect to other substance use disorders (SUDs) and the risk of suicide, the primary objectives of our most recent paper [1] were to estimate and compare other SUD-suicide associations between men and women in the US Veterans Health Administration (VHA). Within the paper, we acknowledged that incomplete adjustment for confounding factors, measured or unmeasured, was a potential study limitation. We further elaborated that, due to power constraints, we were unable to account for co-occurring SUD diagnoses, which includes tobacco use disorder. Nonetheless, in order to address the specific concerns about tobacco, we ran model 3 including tobacco use disorder, and findings were only modestly attenuated and broadly consistent with the prior model 3 findings; the hazard ratios (HRs) estimating suicide risk associated with any current SUD were 1.5 (95% CI= 1.4-1.6) for men and 1.9 (95% CI= 1.2-2.8) for women. Overall, it is important to acknowledge that this study was undertaken to identify markers of risk for suicide (e.g., to inform providers and health systems), not to necessarily make causal inferences about mechanisms of risk.

References

1. BOHNERT K. M., ILGEN M. A., LOUZON S., MCCARTHY J. F., KATZ I. R. Substance use disorders and the risk of suicide mortality among men and women in the US Veterans Health Administration, *Addiction* 2017; 112: 1193-1201

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