

Suicide among older adults in Porto Alegre, Brazil, during the COVID-19 pandemic: a cross-sectional study

Suicídio entre idosos em Porto Alegre no período da pandemia de COVID-19: um estudo transversal
Suicidio entre ancianos en Porto Alegre durante la pandemia COVID-19: un estudio transversal

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Abstract

Introduction: Due to the new coronavirus (COVID-19) pandemic, most Brazilians remained restricted to their homes for long periods, causing worsening of psychological issues and, consequently, impacting suicide rates, especially among older adults, who constitute a risk group for the disease. Therefore, it is worth observing not only illnesses directly caused by the virus, but also deaths resulting from worse mental health. In this context, it is essential to analyze the possible implications of the pandemic for the act of suicide. **Objective:** Our main objective is to verify suicide rates among older adults in the city of Porto Alegre, Brazil, during the COVID-19 pandemic and, as a secondary objective, to clarify some aspects about this extreme act. **Methods:** This is an ecological, cross-sectional study carried out by reviewing data available on the Department of Informatics of the Brazilian Unified Health System and on the “Mortalidade em Porto Alegre” website. The study scope corresponds to all older people who self-harmed and died in the city of Porto Alegre, from March 2020 to May 2023, a period that corresponds to the coronavirus pandemic. **Results:** We found that, in the study period, there were 407 deaths by suicide, of which 21.3% correspond to the older adult population, 51.5% of them aged between 60 and 69 years, 34.4% between 70 and 79 years, 13.7% aged 80 years or over, and 1.1% of unknown age. As for ethnicities, 87.4% were Caucasian, with 4.6% Black, 1.1% mixed-race, 1.1% Asian, and 5.7% of unknown ethnicity. In terms of suicide by region of the capital, the Centro region predominated, with 27,6% of deaths recorded. Furthermore, 79.3% older adult men died by suicide. To establish a chronological comparison, we collected data from 2017 to 2019 and verified that the age distribution regarding suicides among older adults was predominantly concentrated in the age group between 60-69 years, and, in total, there were 78 suicides in Porto Alegre during the period in question. **Conclusions:** We observed that the older adult population accounts for an important portion of suicides in Porto Alegre and that general rates increased in the capital during the COVID-19 pandemic period. Due to the countless losses and isolation to which this population was subjected, we can assume that there have been psychological impacts. Therefore, Primary Health Care professionals must be trained to always address mental health issues, especially with regard to the older adult population, preventing this type of death so that we can reverse this sad scenario.

Keywords: Suicide; Elderly; Pandemic.

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Resumo

Introdução: Devido à pandemia de COVID-19, grande parte dos brasileiros permaneceu restrita aos seus domicílios por longos períodos, propiciando piora de questões psíquicas e, conseqüentemente, podendo impactar nas taxas de suicídio, especialmente em idosos, os quais constituem grupo de risco para a doença. Por conseguinte, é importante observar não somente as doenças ocasionadas diretamente pelo vírus, mas também as mortes decorrentes de piora de saúde mental. Nesse contexto, é essencial analisar as possíveis implicações da pandemia no ato de suicídio.

Objetivo: O estudo tem como objetivo principal verificar as taxas de suicídio entre idosos na cidade de Porto Alegre (RS) no período da pandemia de COVID-19 e, como objetivo secundário, esclarecer alguns aspectos sobre esse ato extremo. **Métodos:** Estudo transversal ecológico realizado por meio de revisão de dados disponíveis no Departamento de Informação e Informática do Sistema Único de Saúde (DataSUS) e no site Mortalidade em Porto Alegre. O recorte do estudo corresponde a todos os idosos que praticaram lesão autoinfligida resultando em óbito no município de Porto Alegre, de março de 2020 a maio de 2023, período que corresponde à pandemia do coronavírus. **Resultados:** Encontrou-se que, no período citado, aconteceram 407 óbitos por suicídio, dos quais 21,3% correspondem à população idosa, sendo 51,5% na faixa entre 60 e 69 anos, 34,4% entre 70 e 79 anos, 13,7% com 80 anos ou mais e 1,1% com idade ignorada. Em relação a etnias, 87,4% são caucasianos, sendo 4,6% de etnia preta; 1,1%, parda; 1,1%, amarela e 5,7% com etnia ignorada. Em termos de suicídio por região da capital, o Centro predominou, com 27,6% das mortes registradas. Ademais, 79,3% dos suicídios de idosos foram consumados por homens. Para que se estabeleça um comparativo cronológico, foram coletados os dados de 2017 a 2019, e obteve-se que a distribuição etária entre suicídios de idosos foi, predominantemente, na faixa entre 60-69 anos, e que, ao todo, foram 78 suicídios de idosos em Porto Alegre no período em questão. **Conclusões:** Pôde-se observar que a população idosa corresponde a uma parcela importante dos suicídios em Porto Alegre, e que os índices gerais aumentaram na capital no período da pandemia. Devido às inúmeras perdas e ao isolamento aos quais esta população foi submetida, pode-se supor os impactos psíquicos. Isto posto, os profissionais de saúde da Atenção Primária devem estar capacitados para sempre abordar questões de saúde mental, especialmente no que tange à população idosa, prevenindo esse tipo de óbito para que possamos reverter este triste cenário.

Palavras-chave: Suicídio; Idosos; Pandemia.

Resumen

Introducción: Debido a la pandemia de COVID-19, gran parte de los brasileños permanecieron restringidos en sus hogares durante largos períodos, lo que propició un empeoramiento de cuestiones psíquicas y conseqüentemente, podría impactar en las tasas de suicidio, especialmente en los ancianos, quienes constituyen un grupo de riesgo para la enfermedad. Por lo tanto, es importante observar no solo las enfermedades causadas directamente por el virus, sino también las muertes resultantes del empeoramiento de la salud mental. En este contexto, es esencial analizar las posibles implicaciones de la pandemia en el acto de suicidio. **Objetivo:** El principal objetivo es verificar las tasas de suicidio entre los ancianos de la ciudad de Porto Alegre durante la Pandemia COVID y como objetivo secundario, esclarecer algunos aspectos sobre este acto extremo. **Métodos:** Estudio ecológico transversal realizado mediante la revisión de datos disponibles en DATASUS y en el sitio web Mortalidade em Porto Alegre. El alcance del estudio corresponde a todos los ancianos que cometieron lesiones autoinfligidas resultando en muerte en el municipio de Porto Alegre, desde marzo de 2020 hasta mayo de 2023, período que corresponde a la pandemia de Coronavirus. **Resultados:** Se encontró que, durante el período mencionado, hubo 407 muertes por suicidio, de las cuales el 21,3% corresponde a la población anciana, siendo el 51,5% de ellos en el rango de 60 a 69 años, el 34,4% entre 70 y 79 años, el 13,7% con 80 años o más y el 1,1% con edad desconocida. En cuanto a las etnias, el 87,4% es caucásico, el 4,6% es de etnia negra, el 1,1% parda, el 1,1% amarilla y el 5,7% tiene etnia desconocida. En términos de suicidio por región de la capital, el Centro predominó, con el 27,6% de las muertes registradas. Además, el 79,3% de los suicidios de ancianos fue consumado por hombres. Para establecer una comparación cronológica, se recopilaron datos de 2017 a 2019, y se obtuvo que la distribución por edad entre los suicidios de ancianos fue predominantemente en el rango de 60 a 69 años, y en total, hubo 78 suicidios de ancianos en Porto Alegre durante el período en cuestión. **Conclusiones:** Se observó que la población anciana representa una parte importante de los suicidios en Porto Alegre y que los índices generales aumentaron en la capital durante el período de la pandemia de COVID. Debido a las numerosas pérdidas y al aislamiento al que esta población fue sometida, se pueden suponer impactos psíquicos. Por lo tanto, los profesionales de la salud de la Atención Primaria deben estar capacitados para abordar siempre cuestiones de salud mental, especialmente en lo que respecta a la población anciana, previniendo este tipo de muerte para que podamos revertir este triste escenario.

Palabras clave: Suicidio; Anciano; Pandemia.

INTRODUCTION

Suicide is a complex, universal human phenomenon and represents a major public health issue worldwide. According to the World Health Organization (WHO),¹ deaths by suicide account for about one million people in the world per year. For the WHO, self-inflicted violence is manifested in two ways: suicidal behavior (through suicidal thoughts, suicide attempts, and death by suicide) and violent acts performed against the very person, such as self-mutilation.¹

According to the literature, suicide statistics are unequally distributed across the world, within countries, between sexes, and age groups. For instance, in terms of geographic dispersion between countries, Japan and some European societies gain relevance.^{2,3} But this situation may change, as suicide rates have increased in the Americas and decreased in European countries, the Eastern Mediterranean, and the Western Pacific. Thus, Brazil is currently ranked at the 8th place among the countries with the highest suicide rates, according to the WHO. When it comes to age and sex, the group with the highest risk is the male older adult, but suicide rates have increased among young people.³

Suicide among older people is a serious problem for societies in the most diverse parts of the world. In addition to data evidencing high numbers, the ratio between suicide attempts and deaths by suicide is very close: almost 2:1. Likewise, researchers conclude that when an older person attempts suicide, this gesture must be very seriously considered, because it is likely that any attempt will result in the act of terminating their own life.^{4,5}

The population aged over 60 years is the fastest growing in Brazil and most parts of the world, which justifies an attentive look at the social and health issues affecting them. Authors of a study conducted by the Nursing School of Universidade de São Paulo (USP) pointed out that, from 2012 to 2016, in this age group, the average of suicide cases was 7.8/100 thousand people, 47% more than the 5.3/100 thousand among the general population. They also showed that older adults use more lethal means and that suicide cases occur, predominantly, indoors.⁶

Among older adults, suicide rates were higher between men in the analyzed period of the study. The suicide rate among them was 14.8/100 thousand, an increase of 2.8% between 2012 and 2016. In turn, between older adult women, the rate in the period was 2.6/100 thousand, with a decrease of 10.3% in the period.⁶

On March 11, 2020, the new coronavirus (COVID-19) was characterized as a pandemic by the WHO and, due to this situation, most Brazilians remained restricted to their homes for long periods, leading to worsening of psychic issues — such as anxiety and depression —, which may have consequently impacted suicide rates, especially among older adults, who constitute a risk group for the disease.^{7,8}

On May 5, 2023, after severe psychological and physical side effects caused in three years and three months since the adoption of the global emergency, the Director-General of the WHO, Tedros Adhanom, declared the end of COVID-19 as a public health emergency. According to the WHO Coronavirus Disease Dashboard, which gathered the main statistics since the beginning of the pandemic, the cases accumulated worldwide currently accounts for 765,222,932, with almost seven million deaths: the exact number was 6,921,614 up to the aforementioned date. The moment indicates a transition from the emergency mode to carrying on coping with the disease through prevention and control. Infections will continue to occur; however, the disease has occurred with less severity. There was a progressive reduction in the number of hospitalizations and deaths, reflecting the results of prevention campaigns, especially vaccination.^{9,10}

Despite losing the status of global emergency, the COVID-19 pandemic has left significant psychic consequences in the population, especially in more vulnerable groups such as the older adults. Therefore, it is worth observing not only illnesses directly caused by the virus, but also deaths resulting from worse mental health. In this context, it is essential to analyze the possible implications of the pandemic for the act of suicide.¹¹

Our main objective is to verify suicide rates among older adults in the city of Porto Alegre (state of Rio Grande do Sul, Brazil) in the period of the COVID-19 pandemic through an ecological, cross-sectional study and, as a secondary objective, from the obtained data, to clarify some aspects about this extreme act in mental health. Therefore, it will be possible to generate data to alert health professionals to a closer

look at this population, which increases at a dizzying rate in our country and worldwide. In addition, it is necessary that, based on the research findings, health professionals, especially in Primary Health Care, be alert to avoid this type of death, which is preventable when appropriate interventions are adopted.

METHODS

Study Design: cross-sectional, ecological study, carried out through a review of data available in the Department of Informatics of the Brazilian Unified Health System (*Departamento de Informação e Informática do Sistema Único de Saúde – DATASUS*) and on the website “Mortalidade em Porto Alegre” [Mortality in Porto Alegre], of the Porto Alegre City Hall (*Prefeitura Municipal de Porto Alegre – PMPA*).

Population: all older people who self-harmed and whose act resulted in their death in the city of Porto Alegre.

Period: March 2020 to May 2023, a period that corresponds to the COVID-19 pandemic as a public health emergency according to the WHO.

Inclusion criteria: people aged 60 years or over who self-harmed and died.

Exclusion criteria: people under 60 years of age.

The main source of mortality data in Porto Alegre was the website of the Porto Alegre City Hall, namely “Mortalidade em Porto Alegre.”¹²

The broader snippets on suicides of older adults, such as data prior to 2019, were collected from the Mortality Information System of the Brazilian Ministry of Health (*Sistema de Informações de Mortalidade do Ministério da Saúde – SIM/MS*), available at DATASUS.^{13,14}

DATASUS is responsible for managing and disseminating health information, epidemiological indicators, and morbidity and demographic information. This is public-domain information, which can be accessed via the Tabnet online interface, a statistical program designed to quickly tabulate health information provided by the Brazilian Ministry of Health.

Data were collected from June 2023 to January 2024, and considered the period from March 2020 to May 2023, dates corresponding, respectively, to the COVID-19 status of global pandemic and the end of the infection as a health emergency.

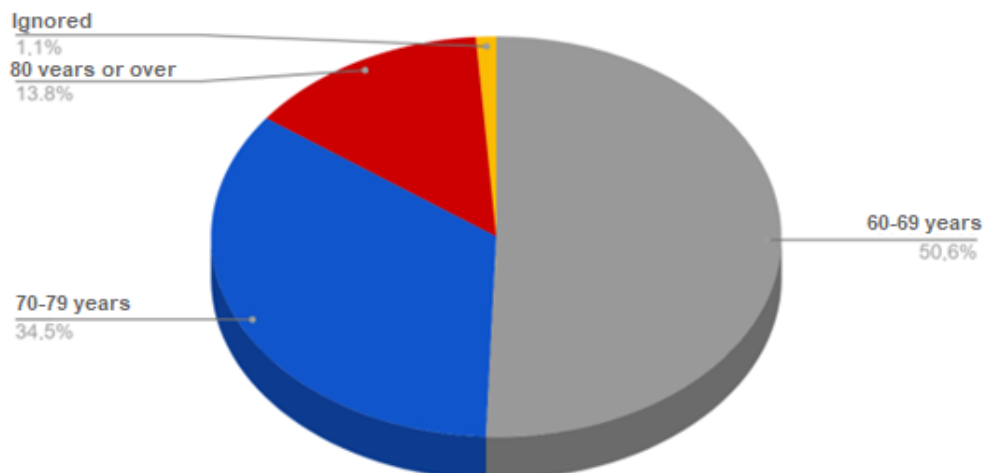
The International Statistical Classification of Diseases and Related Health Problems (ICD) – 10th revision was considered, particularly codes X60 to X84 – Intentional self-harm.

The data were entered in the Google Sheets program, from Google Drive. To select data such as age, sex, period and location, the filters already present in DATASUS and the PMPA website were used. Submission to the Research Ethics Committee (REC) was waived because this is publicly available information.

RESULTS

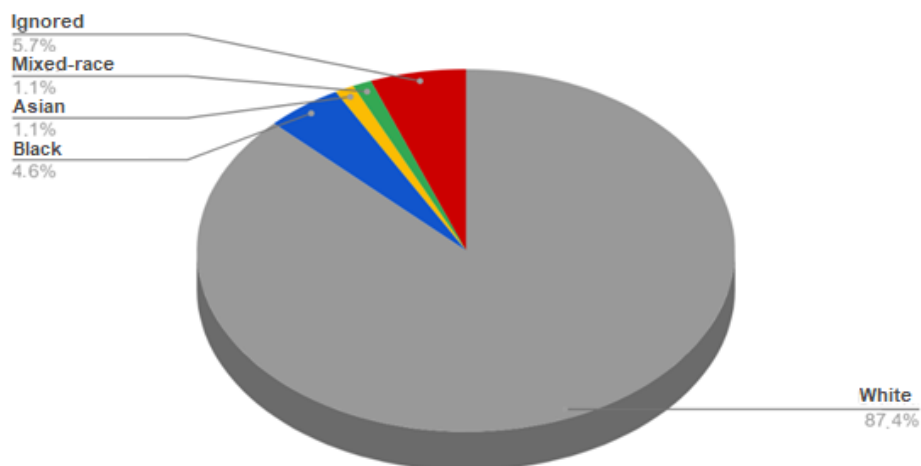
When selecting the deaths in Porto Alegre on the PMPA website, we used the ICD filters of codes X60 to X84 (Intentional self-harm) in the field of underlying causes of death; in the age field, we selected age greater than or equal to 60 years. For the months, we used every month of the years 2021 and 2022; in turn, in 2020, we considered the months from March onward and, for 2023, from January to May. For race, sex, management, health district, health center, and four-month period, no filter was used (Graph 1 and Graph 2).

When analyzing information on sex, we verified that, from March 2020 to May 2023, of the 87 suicides among older people included in this period, 69 (79.3%) of them were men and 18 (20.7%), women, as can be observed in Graph 3.



Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

Graph 1. Age proportion of suicides among older adults in Porto Alegre (state of Rio Grande do Sul – RS) during the pandemic period.



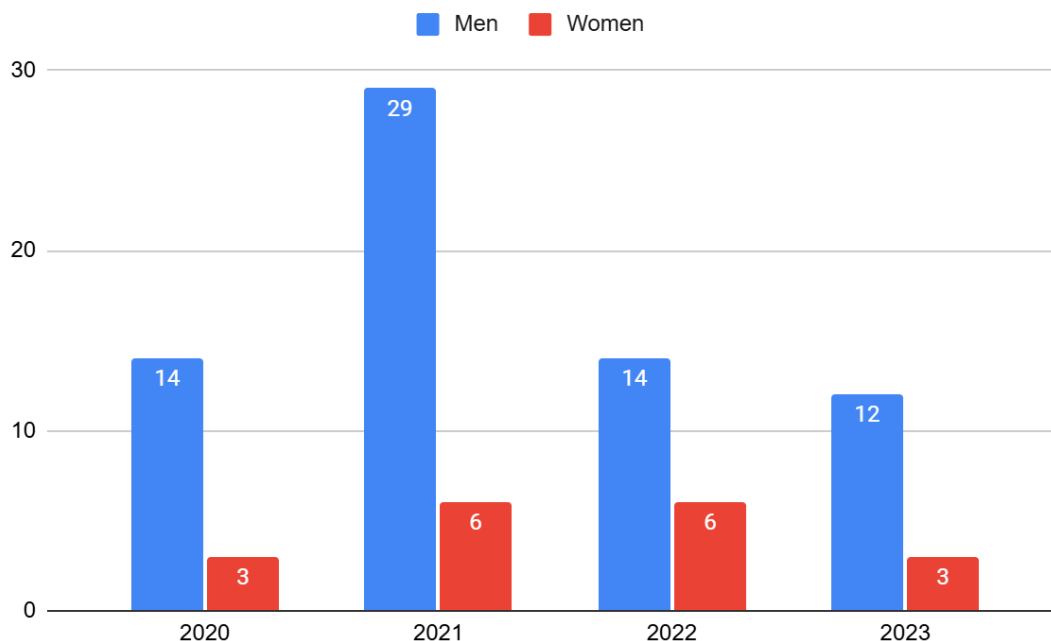
Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

Graph 2. Proportion of suicides among older adults according to ethnicity in Porto Alegre (RS) during the pandemic period.

Considering each year and analyzing the regions of the city, in 2020 there were 17 suicides of older adults as of March, five of them in the Centro region, two in Centro-Sul, two in Eixo-Baltazar, one in Extremo Sul, two in Leste, two in Noroeste, one in Partenon, and two in the Zona Sul region.

In 2021, the number of suicides increased to 35, 11 taking place in Centro, one in Centro-Sul, one in Eixo-Baltazar, one in Cristal, one in Cruzeiro, one in Extremo Sul, one in Glória, three in Leste, two in Lomba do Pinheiro, one in Nordeste, four in Noroeste, one in Partenon, two in Norte, one with no region data, and four in Zona Sul.

In 2022, there were 20 suicides: seven of them took place in Centro, one in Centro-Sul, one in Cruzeiro, three in Eixo-Baltazar, two in Leste, two in Lomba do Pinheiro, one in Partenon, two with no region data, and one in Zona Sul.

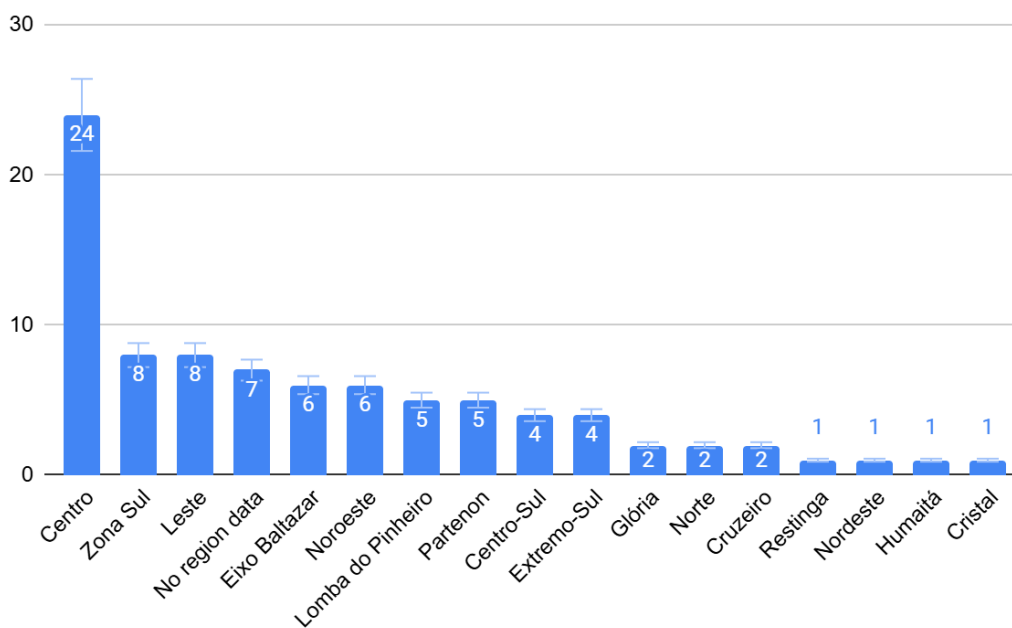


Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

Graph 3. Suicide among older adults according to sex and year during the coronavirus pandemic in Porto Alegre (RS).

Lastly, in 2023, there were 15 suicides among the older adult population until May, being one in Centro, two in Extremo Sul, one in Glória, one in Leste, one in Lomba do Pinheiro, two in Partenon, one in Restinga, five with no region data, and one in Zona Sul.

Thus, in all suicides among older people from March 2020 to May 2023, accounting for 87 records, the region that prevailed was Centro, with 24 deaths recorded, which corresponds to 27.6% of this type of death in the analyzed period (Graph 4).



Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

Graph 4. Number of deaths by suicide according to regions of Porto Alegre (RS), from 2020 to 2023.

Of the total number of deaths in 2020, from March to December, removing the ICD filter and selecting the “all” option, 11,302 deaths occurred, 83 of them by suicide. In 2021, there were 15,618 deaths, 142 by suicide. In 2022 there were 13,551 deaths, 121 by suicide. In 2023, up to May, there were 4,900 deaths, of which 61 were by suicide (Table 1). It is worth mentioning that the proportion of suicides in relation to total deaths is low, but it is a subject whose relevance lies in its preventable character.

Table 1. Total suicides in relation to the total number of deaths from 2020 to 2023 in Porto Alegre (RS).

Year	Total deaths	Deaths by suicide	Proportion of suicides (%)
2020	11,302	83	0.7
2021	15,618	142	0.9
2022	13,551	121	0.8
2023	4,900	61	1.2

2020: from March to December; 2023: from January to May.

Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

Moreover, it should be noted that, in 2020, from March to December, the main cause of death in the general population was determined by ICD B25-B34 (Other viral diseases), with a record of 1,864 deaths — 16.4% of the total records —, of which 87.2% correspond to the population aged over 60 years. We observed similar statistics in 2021, with 4,022 (25.5%) deaths by ICD B25-B34, of which 78.4% correspond to older adults.

However, in 2022, the panorama changed, and the ICD I60-I69 (Cerebrovascular diseases) accounted for the highest number of records in the general population, with 1,055 deaths (7.7%), with ICD B25-B34 ranking at 4th place, with 838 (6.1%) deaths, of which 88.6% were in the age group of 60 years or over.

In turn, in 2023, from January to May, the ICD B25-B34 fall in position, ranking at 18th place as cause of death in the general population, with 67 (1.3%) deaths; and at 15th place as cause of death among older adults, with 62 deaths (1.6% of the total among older people) — with ICD C15-C26 (Malignant neoplasms of digestive organs) being the most common cause in the general population until May 2023, accounting for 8.2% of the total deaths in this period of the year —, while the main cause of death among people aged 60 years or over corresponded to ICD G30-G32 (Other degenerative diseases of the nervous system), with 8.9% of the total among older adults (Table 2).

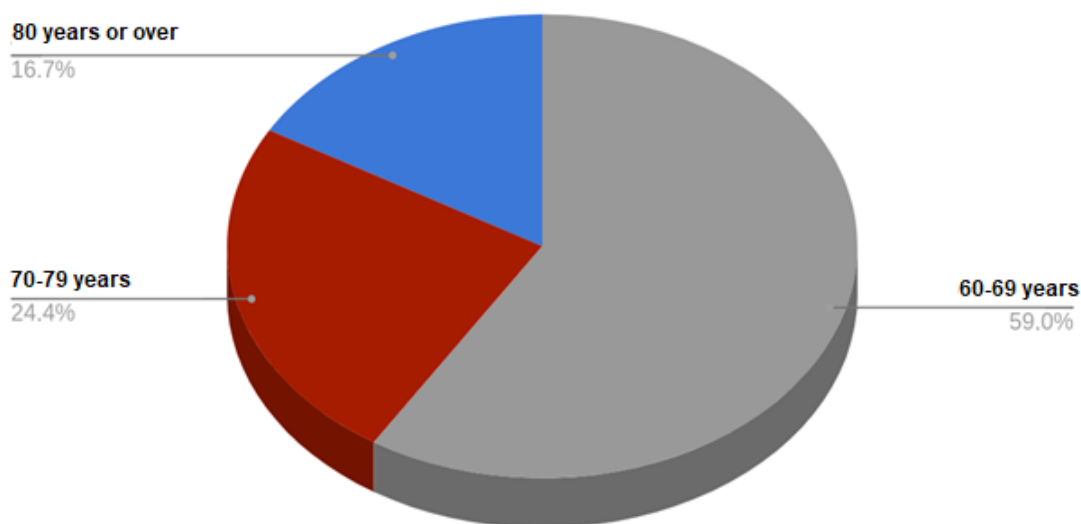
Table 2. Main causes of death according to the International Statistical Classification of Diseases, divided by years and periods, in the general population and in older adults, in Porto Alegre (RS).

Year	Month	ICD of the main causes of death	Total deaths according to ICD	Total deaths in older adults according to ICD
2020	March to December	1st place, general: B25–B34	1,864	1,627
2021	January to December	1st place, general: B25–B34	4,022	3,156
2022	January to December	1st place, general: I60–I69	1,055	950
		4th place, general: B25–B34	838	743
2023	January to May	1st place, general: C15–C26	403	334
		1st place, older adults: G30–G32	343	342
		18th place, general: B25–B34	67	62

ICD: International Statistical Classification of Diseases and Related Health Problems.

Source: Mortalidade Geral em Porto Alegre website – Prefeitura Municipal de Porto Alegre.

To establish a chronological comparison, we collected data from the three years prior to the pandemic through DATASUS, in the segment called “Death from external causes — Rio Grande do Sul,” via the Mortality Information System (SIM). We used the following filters: “municipality” in the rows, “age group” in the columns, and “deaths by occurrence” in the content. The city of Porto Alegre was selected as the municipality; and as age groups, the ages 60-69 years, 70-79 years, and 80 years or over, according to the selections available on the website. For ICD, we used the large group ICD10 X 60-84, which corresponds to Intentional self-harm, and the period from 2017 to 2019. Thus, we verified that the age distribution regarding suicides among older adults was predominantly concentrated in the 60-69-year-old group, accounting for 78 deaths in Porto Alegre in the aforementioned period (Graph 5).



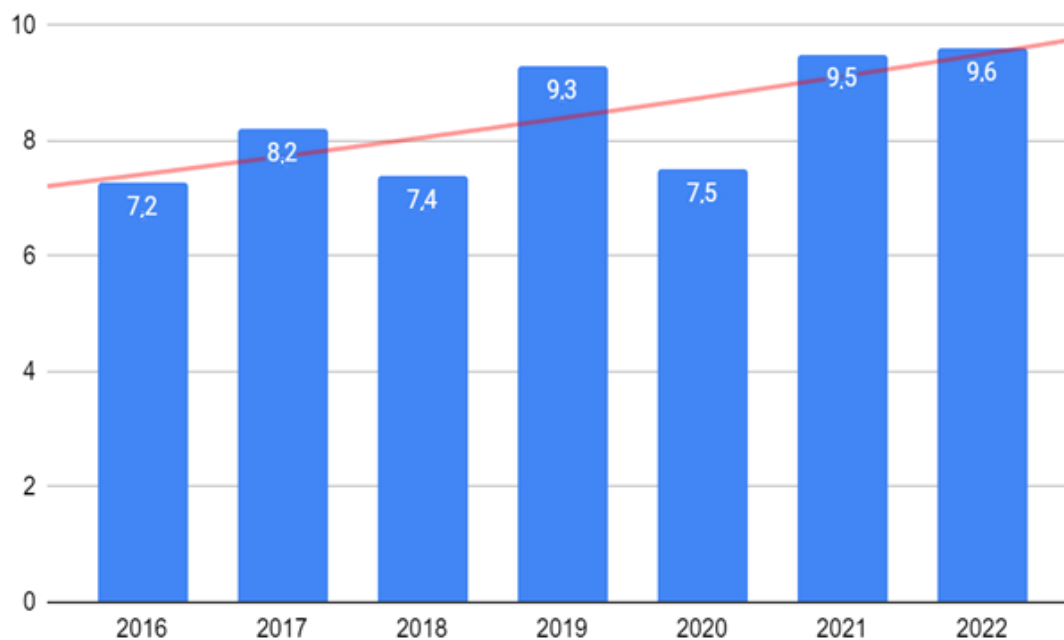
Source: MS [Ministry of Health]/SVS [Department of Health Surveillance]/CGIAE [General Coordination of Epidemiological Information and Analysis] – Mortality Information System.

Graph 5. Age proportions in deaths by suicide among older adults, from 2017 to 2019, in Porto Alegre (RS).

However, in order to measure it more accurately, we compared the result from 2017 to 2019 with the period from March 2020 to February 2023, obtaining an equivalent comparison of both, with 36 months in each period. We found an equivalent of 82 deaths by suicide among older adults between March 2020 and February 2023. Hence, there was an increase of 5.1% in this type of death during the pandemic. To ratify these results, we found an increase in the number of suicides in Porto Alegre in the general population, from 2016 to 2022 — and the trend line is increasing, as observed in Graph 6. Population density data in 2023 are not yet available at DATASUS or the Brazilian Institute of Geography and Statistics (IBGE), preventing this calculation from being carried out for this year, as the most recent Demographic Census dates 2022.

DISCUSSION

In this research, we present suicide rates among older adults in Porto Alegre, during the period of pandemic and state of health emergency due to COVID-19 (March 2020 to May 2023). According to the literature, when it comes to suicide in older adults, the number of attempts decreases, but the number of attempts that result in death increases, causing a ratio of 2:1 between suicide attempts and death by suicide. Therefore, the mental health of this population must be observed very carefully.^{15,16}



Source: MS/SVS/CGIAE – Mortality Information System, preliminary estimates prepared by the Ministry of Health/SVSA [Department of Health and Environment Surveillance]/DAENT [Department of Epidemiological Analyses and Noncommunicable Diseases Surveillance]/CGIAE.

Graph 6. Suicide mortality rate per 100 thousand inhabitants from 2016 to 2022, in Porto Alegre (RS).

According to the data pointed out in this research, older adult men from Porto Alegre died more by suicide than older adult women, which can be justified by the fact that older men do not have a well-defined role in society, no longer belong to their former role as “breadwinner,” because they are often seen as incapable; unlike women, who are associated with the roles of careful grandmothers, excellent cooks, and extremely kind. This may be associated with another sociocultural issue: men seek less professional help for their health issues. Moreover, according to a survey by Agência Brasil, 62% of Brazilian men only seek a doctor when symptoms become unbearable, thus making their health issues to be diagnosed late.¹⁷ As per a survey by the Ministry of Health, 70% of Brazilian men only seek a doctor after the insistence of their spouses or children¹⁸. This suggests that they rarely have the initiative to search for help, but rather do so from external pressure. Data from the 2019 National Survey of Health (*Pesquisa Nacional de Saúde – PNS*), from IBGE, show that although the proportion of Brazilians who sought a doctor was 76.2%, the proportion of women who did so was 82.3%, and that of men, 69.4%.¹⁹

Furthermore, among the population aged 60 years or over, those aged between 60 and 69 years comprise the group that died by suicide the most, perhaps because it is the age that accounts for the highest number of people, according to the 2022 IBGE Census.²⁰

Regarding the regions, Centro was the area of the city with the highest occurrence of suicide. As it is an extensive and quite populous area, it is assumed that there are more expressive numbers.

In addition, we noticed that COVID-19 caused the death of many older people, having an inherent impact on the mental health of survivors, who had to deal with loneliness and the loss of close relatives and friends. Moreover, we observed that a lower number of suicides among older adults was recorded in the period before the pandemic, from 2017 to 2019, reinforcing that the pandemic period had considerable impacts on the mental health of this population. We also noticed that suicide in general had an increasing trend from 2016 to 2022.

CONCLUSION

Considering the study data, we observed that the older adult population corresponds to an important portion of suicides in Porto Alegre, and that the general suicide rates increased in the capital during the COVID-19 pandemic. According to the literature, it is usual and expected that these rates increase in periods of crisis,²¹ such as pandemics, but attention should be paid to older adults, who constituted the majority of deaths due to COVID-19 — affecting even more the isolation of this population, generating impacts on mental health, and increasing the risk for suicidal ideation. Older adults already suffer from the stigma of “better age” and have difficulty finding their role in society, either because of lack of employment opportunity or the belief that they are not able to maintain full sexual health, either due to functional limitations and physical problems or, even, the death of loved ones.

Considering the large number of deaths of individuals aged 60 years or over due to COVID-19 infection, we can consider the extent to which it must have been a period of loneliness and losses to this population. Therefore, Primary Health Care professionals should be willing and prepared to always address and detect mental health issues, especially with regard to the older adult population, preventing this type of death so that we can reverse this sad scenario.

CONFLICT OF INTERESTS

Nothing to declare.

AUTHORS' CONTRIBUTIONS

LHLB: Project administration, Formal analysis, Conceptualization, Data curation, Writing – original draft, Writing – review & editing, Investigation, Methodology, Funding acquisition, Resources, Software. VBM: Supervision, Validation, Visualization.

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