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## Self-Injurious Behaviors: Medical Management

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While we do our best to prevent inpatients from injuring themselves on the unit, it is impossible to prevent very determined self-destructive patients from engaging in certain common self-injurious behaviors. When they occur, you will likely get a medicine consult to help with management, but you should also understand the basic evaluation and medical management of these common self-injuries. (Also see accompanying fact sheet on psychiatric management of self-injurious behaviors).

### Self-Cutting:

- **Typical scenarios:** Most often self-cutting on inpatient units involves patients with borderline personality disorder who repurpose items often found in common areas for self-injury. Examples include plastic utensils, staples from magazines, or simply use of their fingernails to scratch deeply.
- **Medical Treatment:**
  - Start with cleaning the wound using an antiseptic solution and assess the severity. Deep or bleeding cuts might require stitches or staples.
  - If the patient used a dirty or rusty item, consider a tetanus shot, particularly if you're uncertain about their last immunization.
  - Prescribe antibiotics (e.g., Keflex or Bactrim) to prevent infections and instruct the patient on wound care and signs of potential infection.

### Self-Strangulation:

- **Typical Scenarios:** Self-strangulation attempts usually arise from extreme emotional distress or psychotic episodes. Patients might use items like bed sheets, clothing, or cords.
- **Medical Treatment:**
  - Ensure the patient's airway is open and monitor for breathing difficulties.
  - Examine the neck for injuries and provide immediate care for symptoms like bruising or swelling.
  - Monitor patients closely post-attempt for delayed complications like airway swelling.
  - Conduct a thorough psychiatric assessment due to the high risk associated with strangulation.

### Self-Hitting:

- **Typical Scenarios:** Self-hitting usually involves patients striking their own body with their hands or objects. It may be directed at the head, limbs, or torso.
- **Medical Treatment:**
  - Inspect the hit areas for damage such as swelling, open wounds, or bruises. Imaging may be required for suspected fractures.
  - Provide pain relief, ranging from over-the-counter painkillers to prescription meds.
  - Use cold packs or compression to reduce swelling or bruising.

### Ingesting Harmful Substances:

- **Typical Scenarios:** This behavior often occurs impulsively, with patients ingesting available substances like cleaning agents or medications.
- **Medical Treatment:**
  - If you suspect a patient has ingested a toxic substance, seek emergency medical assistance immediately. Do not induce vomiting unless specifically instructed by medical professionals or poison control.
  - Contact a poison control center for specific advice (e.g., [www.Poison.org](http://www.Poison.org), tel: 800-222-1222).

### Interference with Healing Wounds:

- **Typical Scenarios:** Patients may interfere with healing wounds due to compulsive behavior, a desire to prolong care, or psychiatric symptoms like hallucinations.

- **Medical Treatment:**

- Clean and dress the wound. If the patient persistently interferes with a wound, use protective measures like bandages, dressings, or casts.
- Monitor the wound for signs of infection or delayed healing and adjust treatment as necessary.