



## SUICIDE INTENT;

### DEPRESSIVE PATIENTS HAVING SUICIDE INTENT SOCIO DEMOGRAPHIC PROFILE PRESENTED AT DEPARTMENTS OF PSYCHIATRY LUMS, SCJIP, HYDERABAD AND DHQ HOSPITAL/ PMC FAISALABAD.

irum.siddique@gmail.com

Irum Siddique<sup>1</sup>, Sadaf Aijaz<sup>2</sup>, Dr. M. Akhter Parvez<sup>3</sup>, Dr. Imtiaz Ahmad Dogar<sup>4</sup>, Moin Ansari<sup>5</sup>, Nighat Haider<sup>6</sup>

1. Assistant Professor  
Department of Psychiatry & Behavioral Sciences,  
DHQ/Allied Hospitals & PMC,  
Faisalabad,
2. Assistant Professor  
Sir Cowasjee Institute of Psychiatry,  
LUMS, Hyderabad.
3. Assistant Professor  
Community Medicine  
PMC, Faisalabad.
4. HOD, Department of Psychiatry & Behavioral Sciences,  
DHQ/Allied Hospitals & PMC,  
Faisalabad,
5. HOD, Sir Cowasjee Institute of Psychiatry,  
LUMS, Hyderabad.
5. Clinical Psychologist  
Department of Psychiatry & Behavioral Sciences,  
DHQ/Allied Hospitals & PMC,  
Faisalabad,

#### Correspondence Address:

Dr. Irum Siddique,  
Assistant Professor,  
Department of Psychiatry and Behavioral Sciences,  
DHQ/Allied Hospitals & PMC,  
Faisalabad,  
irum.siddique@gmail.com

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**ABSTRACT... Objectives:** To see the Socio demographic profile of depressive patients who has current suicide intent coming to the Psychiatry Departments of LUMS, SCJIP, Hyderabad and DHQ Hospital/ PMC Faisalabad. **Design:** Cross Sectional Study. **Place & Duration of Study:** The study was conducted in six months from 1<sup>st</sup> April 2014 to 30<sup>th</sup> September 2014 at Liaquat University of Medical & Health Sciences (LUMHS) & Sir Cowasjee institute of Psychiatry and Department of Psychiatry and Behavioral Sciences, Faisalabad. **Subjects and Methods:** A total of 117 depressive patients were included in this study having moderate to high Suicidal Intent. **Results:** Out of 117 depressed patients with suicidal intent, predominantly females (59%) approached psychiatry ward as compared with males (41%). Mean age of the participants was between 31 -40 years. Among patients 56% were married, 28% were housewives and 28% were student. Most of them were educated. Suicide intent was found more in middle socioeconomic group and more in nuclear family system. 96 patients (82.1%) were taking treatment for Depression or Anxiety at the time of interview. **Conclusion:** Prevalence of depressed population with suicidal intent predominates in students, married females especially housewives belonging from middle socioeconomic background and nuclear family system. Most of patients used drugs of abuse. Past psychiatric history, family psychiatric history, past history of suicide, family history of suicide and suicidal Ideations were present in patients with current suicide Intent.

**Key words:** Socio-demographics, Depression, Suicidal intent

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## INTRODUCTION

Suicide has been defined as an act with a fatal outcome, deliberately initiated and performed in the knowledge or expectation of its fatal outcome.<sup>1</sup> Suicidal intent is defined as the seriousness or intensity of the patient's wish to terminate his or her life, also Predicts the future risk of complete suicide.<sup>2</sup> Suicide is the 10th leading cause of deaths in the world. Around a million deaths occurs annually and will likely increase to 1.53 million by year 2021. It constitutes 12.7% of global burden of disease and its prevalence in middle & low income countries being 85%.<sup>3</sup> In making a 'diagnosis' of suicide risk, clinicians rely on their patients to trust them with often painful and difficult disclosure of their suicidal thoughts. The importance of such disclosure must not be underestimated; in itself, it can be a protective

factor.<sup>4</sup>

Retrospective Psychological Autopsy studies reveal that 90% of complete suicides were associated with psychiatric disorder, mood disorder being the strongest risk factor & predictor of suicide.<sup>5</sup> Suicide intent lies on a continuum from fairly common, vague, passive suicidal thoughts to rarer, high- intent/high-lethality suicidal acts.<sup>4</sup> It found that 29% of people with suicidal thoughts went on to make a suicidal attempt, usually within a year of onset of the thoughts.<sup>6</sup> If those people who were experiencing suicidal thoughts also had a well-formed plan they were far more likely to engage in suicidal behavior.<sup>3</sup> Psychiatrists have a responsibility to all patients experiencing suicidal thoughts, regardless of the presence of mental illness. A patient contemplating suicide,

or one who has tried to take their life, will at the very least be experiencing personal distress that needs respectful consideration.<sup>3</sup>

Recent studies in several low- and middle-income countries such as China and India suggest the occurrence of suicidal behaviors may differ markedly from high-income countries.<sup>6</sup> A number of psychosocial risk factors have also been reported to be significantly associated with the risk of suicide. They include marital disruption, unemployment, lower socio-economic status, living alone, a recent migration, early parental deprivation, family history of suicidal behaviour and psychopathology, poor physical health and stressful life events as explained by Cheng et al.<sup>7</sup> Some of studies focused on family history of suicide, previous suicidal attempts and Family history of Psychiatric illness are found to increase risk of current suicide intent and attempt.<sup>1,8,9</sup>

However, in Pakistan, this area has been overlooked due to lack of research, poor assessment and documentation by clinicians. Therefore this study is aimed to find out the predictors or psychosocial factors that lead to a person for suicidal attempt. It will also aimed to see any association between the current suicidal intent and previous suicidal history, family suicide history and current suicide ideation.

## MATERIAL AND METHODS

### Participants

A total of 117 depressive patients were included in this study having current suicidal Intent through non probability consecutive sampling techniques from the departments of psychiatry Sir Cowasjee Jahangir institute of psychiatry Liaquat University of Medical & Health Sciences and DHQ/PMC Faisalabad.

### Tools and procedure

After approval from hospital ethical committee, the patients were asked for informed written consent after fully explaining the purpose and benefits of the study. Detailed history, physical and mental state examination were recorded and organicity

was ruled out. Depression was assessed and was categorized into severity into mild, moderate and severe by using ICD -10 Diagnostic Criteria for Depression. Beck suicide intent scale was applied afterwards to see the current intent. Data were collected in a performa having socio demographic variables like age, gender, marital status, occupation, employment status, socio economic background, family system, past psychiatric history, family history of suicide, drug history, current suicidal ideation and Past history of suicide attempt.

## DATA ANALYSIS

All the data were entered and analyzed using SPSS version 17.0. Descriptive statistics were calculated for all variables. Mean and standard deviation were calculated for quantitative variable like age. Frequency and percentages were calculated for all qualitative variables like gender, marital status, socioeconomic status and presence of depression. Data is presented in form of Tables and graphs.

## RESULTS

Among the total population the Mean age was between 31-40 years. Regarding gender there are 59% females and 41% males. Out of these 117 patients 56 were married and 48 were single. Most of the participants were educated. The majority of the sample was service personals or students. House wives also made up a meaningful proportion of the sample.

The suicidal intent was higher in Middle socioeconomic group (69%) as compared with lower (18.2%) and high Socio economic class (12.2%). Intent of suicide was more in nuclear family system (56%) than Joint family system (43%). Most of the patients (52.1%) reported that they took drug of abuse to reduce their stress. 96 patients (82.1%) were already taking treatment for Depression or Anxiety.

Depressed patients who had high suicide intent had more frequently positive Past Psychiatric History (see Table-I), Positive Family Psychiatric History (see Table-II), Past History of Suicidal

Attempt (see Table-III), and Presence of Suicidal Ideation (see Table-IV). Low, medium and high suicide intent was more frequent among the depressed patients whose family history of suicide was negative (see Table-V) with the intensity of current suicide intent in depressed patients.

		Past Psychiatric History		Total
		Yes	No.	
Beck Suicide Intent Scale score	15-19 Low Intent	9	6	15
	20-28 Medium Intent	32	30	62
	29 + High Intent	25	15	40
Total		66	51	117

**Table-I. Beck Suicide Intent Scale Score and Past Psychiatric History**

		Family History Psychiatric Illness		Total
		Yes	No.	
Beck Suicide Intent Scale Score	15-19 Low Intent	7	8	15
	20-28 Medium Intent	30	32	62
	29 + High Intent	30	10	40
Total		67	50	117

**Table-II. Beck Suicide Intent Scale Score and Family History Psychiatric Illness**

		Past History of Suicide Attempt		Total
		Yes	No.	
Beck Suicide Intent Scale Score	15-19 Low Intent	4	11	15
	20-28 Medium Intent	29	33	62
	29 + High Intent	27	13	40
Total		60	57	117

**Table-III. Beck Suicide Intent Scale Score and Past History of Suicide Attempt**

		Suicidal Ideation		Total
		Yes	No	
Beck Suicide Intent Scale Score	15-19 Low Intent	3	12	15
	20-28 Medium Intent	24	38	62
	29 + High Intent	32	8	40
Total		59	58	117

**Table-IV. Beck Suicide Intent Scale Score and Suicidal Ideation**

		Family History of Suicide Attempt		Total
		Yes	No.	
Beck Suicide Intent Scale Score	15-19 Low Intent	3	12	15
	20-28 Medium Intent	20	42	62
	29 + High Intent	13	27	40
Total		36	81	117

**Table-V. Beck Suicide Intent Scale Score and Family History of Suicide Attempt**

**DISCUSSION**

The results showed that females were more in the sample, which is far true in case of depression shown by many studies.<sup>2,5-9</sup> But when it comes to suicide some studies showed high rates in males study explain by Cowen et al<sup>1,3</sup> but other studies are in favor of the results of this study.<sup>5,6,10,11</sup> Intent of suicide was seen more frequent in married females and students. Being married has long been considered as a protective factor against suicide in literature<sup>1,8</sup> that is in contrast with current finding. But some other studies favour the results<sup>5,6</sup> The reason why suicide intent is so frequent in students may be due to the current prevailing economic, energy and political crisis in our country as consistent with other studies.<sup>11</sup>

Results showed that high suicide intent was more frequent in participants with positive past psychiatric history and past suicidal attempt. Previous studies agree with the results of current study.<sup>4,6,7,9,14</sup>

High suicide intent was also found more

frequent in participants with positive family psychiatric history. Other studies also agree that family psychiatric history is seen positive in people with suicide intent beck<sup>2,12,7</sup> This connection hints that there may be a possibility of some genetics playing underhand; this way suicide intent may be explained through the biological causes. But the issue demands genetic investigation.

Current high suicidal intent was more frequent in participants with suicidal ideation some studies hint that Suicidal ideations may turn into plans and further into attempts.<sup>7,9,13,14</sup> A study conducted by WHO the World Health Organization's World Mental Health Survey Initiative studied 84,850 people from the general population in 28 countries to identify any association between suicidal thoughts, plans and suicidal behavior. It found that 29% of people with suicidal thoughts went on to make a suicidal attempt, usually within a year of onset of the thoughts. If those people who were experiencing suicidal thoughts also had a well-formed plan they were far more likely to engage in suicidal behavior.<sup>6</sup>

The suicide intent was less frequent on all three levels (low, medium, & high) in participants who had family history of suicidal attempt. Some previous studies suggested the opposite; high suicidal rates in patients having strong family history of suicide.<sup>2,8</sup> These studies reported data from the west which is an individualistic society where family support and family involvements are less available. Hence the individual may learn from the history of family suicide, the way to escape through suicide and because of less family involvement among the members of family, he did not observed any catastrophic effects upon the family of the suicide attempter. On the contrary, present study has been carried out in collective culture where every member of the family is affected by the other member of the family. A suicide in the past in the family by another member might have been observed with the sufferings on the part of other family members and this may serve

as a protective factor against suicide intent.

## CONCLUSION

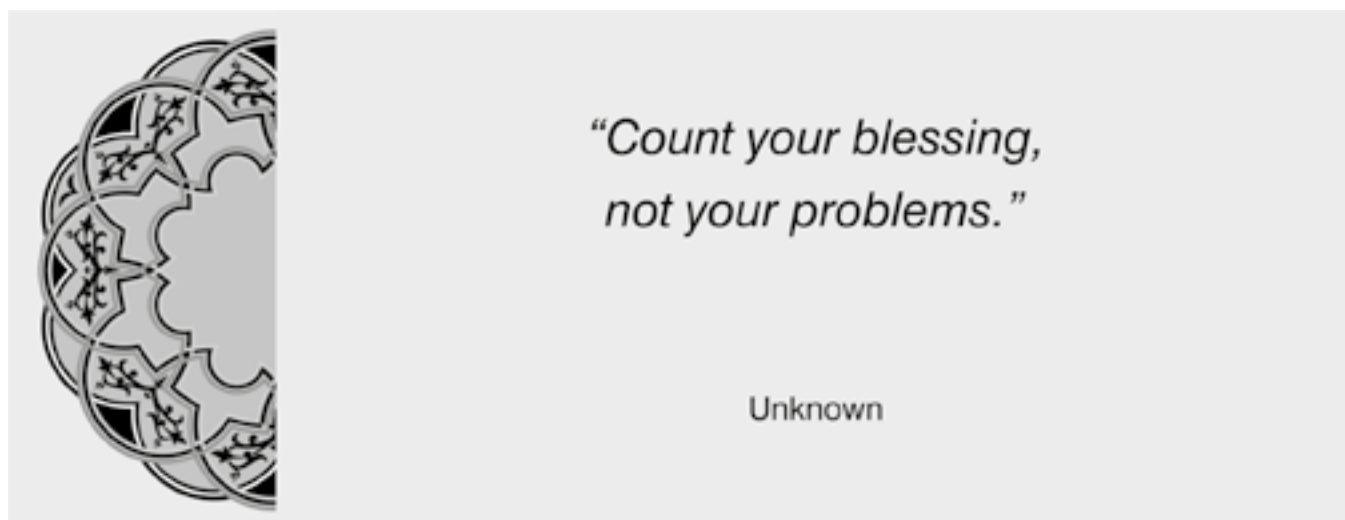
Married females, Students, employed personals with middle socio economic status are at higher risk of High Suicide Intent. High suicidal intent was more frequent in patients with Past & Family psychiatric history, previous suicidal attempt, and current suicidal ideation. So there is a need to work on preventive and management aspects. Earlier interventional strategies should be adopted for minimizing the problem.

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**AUTHORSHIP AND CONTRIBUTION DECLARATION**

Sr. #	Author-s Full Name	Contribution to the paper	Author=s Signature
1	Irum Siddique	1st Author	
2	Sadaf Aijaz	2nd Author	
3	Dr. M. Akhter Parvez	3rd Author	
4	Dr. Imtiaz Ahmad Dogar	4th Author	
5	Moin Ansari	5th Author	
6	Nighat Haider	6th Author	