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A STUDY ON PSYCHOSOCIODEMOGRAPHIC PROFILE OF PATIENTS PRESENTING WITH ATTEMPTED SUICIDE: AN OBSERVATIONAL STUDY FROM CENTRAL INDIA

General Medicine

Dr. Adarsh Bajpai Assistant Professor, Department of General Medicine, L.N Medical College & Research Centre, Bhopal, M.P.

Dr.Pritesh Goutam* Associate Professor, Department of Psychiatry, L.N Medical College & Research Centre, Bhopal, M.P. *Corresponding Author

ABSTRACT

Introduction: The presence of psychiatric illness is an important risk factor for suicide. Attempted suicide is one of the major psychiatric emergencies. Suicide attempts are considered to be the best predictors of an eventual completed suicide.
Objective: The aim of the study was to explore the Socio-demographic profile and psychiatric diagnosis of the patients with suicidal attempt.
Methods: The study population included those patients who were admitted and being managedfor attempted suicide and brought for psychiatric evaluation during the period of 12 months (1st Feb 2019- 31stJan 2020) at L.N.M.C Bhopal. Each patient underwent a detailed psychiatric evaluation by a consultant psychiatrist once they were medicallystable.
Result: Among the total patients (N=100), 83% were in the age group 20-39 years. Majority of the cases were female (n=76). 68% cases were married and majority was of Hindu religion.
Most common method of attempted suicide was by poisoning, by intake of Organophosphates. Depressive Disorder (50%) and Alcohol use disorder (25%) were the most common psychiatric diagnosis.`
Conclusion: Attempted suicide is widely prevalent in younger age group. It is usually by poisoning and the use of Organophosphates is the most common in our setting and is commonly associated with Depressive disorder. Hence, psychiatric care is essential for this patient.

KEYWORDS

Suicide attempt, Diagnosis of psychiatric illness, Depressive disorder, Alcohol use disorder.

INTRODUCTION:

Suicide is defined as death caused by self-directed injurious behavior with any intent to die as a result of the behavior[1]. Suicide Attempt is a nonfatal self-directed potentially injurious behavior with any intent to die as a result of the behavior. A suicide attempt may or may not result in injury.[1]Every year more than 703000 people take their own life whole over the world and there are many more people who attempt suicide. Suicide is a tragic event that has a profound and long lasting effect on families, and communities. In 2019 globally it is the fourth leading cause of death among persons aged 15–29year.[2]Furthermore, for each suicide, there are more than 20 suicide attempts.[3]

The epidemiological data suggests that a total of 1,39,123 suicides were reported in India during 2019 showing an increase of 3.4% in comparison to 2018 and the rate of suicides has increased by 0. 2% during 2019 over 2018.[4]

Financial difficulties, psychosocial problems, failure in exams, defamation are the major stressors that lead to suicide in males. Females found harassment, family problems, diseases, unemployment etc. as the major stressors. Consumerism, spending beyond resources pushing people in to debt is claimed to be major factor. Low frustration tolerance, problems in education system, parenting attitudes, weakening protective values of social institutions like family, increased use of alcohol all contributes to the stressor ultimately leading to suicide. [5-6]

It has been seen that suicide among young adults was associated with parameters such as relationship issues, unemployment, insufficient education as well as alcohol and drug misuse and it has been further escalating on exposure to stress[7]

MATERIALAND METHOD:

This cross-sectional observational study was based on the interview of the patients referred to the Department of Psychiatry at LNMC Bhopal. The study population included all those patients who were admitted and being managed for attempted suicide and brought for psychiatric evaluation during the period of 12 months (1st Feb 2019 – 31st Jan 2020). Each patient underwent a detailed psychiatric evaluation by a consultant psychiatrist. Psychiatric diagnoses were considered as per DSM-V.

There were total 100 patients with history of attempted suicide. Details of these patients including socio-demographic data, psychiatric diagnosis were considered for analysis. The patients who died after reaching the hospital and those died during the recovery phase from physical ill health following attempted suicide were excluded from the study.

RESULT:

Table no: 1 Percentage of suicide attempter among various age group

Age	Total no cases	Percentage
Less than 20 years	83	83%
20-39 years	16	16%
39 above	01	1%

In this study it was found that, majority of the cases were from the age group 20-39 years which constituted 83% of the total cases followed by 16% in the age group of below 20 years and 1% above 39 years (Table No-1).

Total no Cases	Marital status	Male (n=24)	Female (n=76)	Total
100	Married	18	50	68
	Unmarried	06	26	32

The above table showing majority of the cases were female (n = 76) while 24 cases were male. Of the total 76 females50 were married while 26were unmarried. Of the total 24 males, 18 were married and 6 unmarried. Of the total 100 cases 68 were married.

Hindu being the majority consisting 84% of the total cases, followed by Muslims 10%, 3% Christian and 3% others. Poisoning was the most common method of attempted suicide (80%) followed by hanging (10%) and wrist slashing 10%.

Around 80% used pesticides (Organophosphate) as the means of self-poisoning.

Table 3: showing Different illness among total no of Pyschiatric cases (n=60).

Psychiatric diagnosis Number patients = 60	Frequency (n=60)	Percentage (100%)
Depression	30	50
Adjustment disorder	3	5
Schizophrenia	3	5
Alcohol use disorder	15	25
Personality disorder	9	15

Among total number of cases, psychiatric illness was found among 60 cases. Among these depressive disorders was found in 30 patients, alcohol use disorder was found in 15 patients and personality disorder in 9 patients.

DISCUSSION:

In this investigation, larger part of the cases with self-destructive endeavor were from the age bunch 20-39 (83%) which is also observed in other studies.[8-11] This recommends that the vast majority of the younger age group in the general public is profoundly impacted by self-destructive behavior. Circumstances leading to suicide attempts among youth may be identified with both individual and financial reasons like relationship issues, joblessness, disturbed schooling, and substance abuse as reported in other comparable studies.[7] Female attempter's outnumbered male with male to female ratio being 1:3.1. These findings are at par with other published literature[8,12-14]. Globally suicide attempt is more common in women.[15] In our study majority of the patients were married and this has also been reported in other studies from India.[16-18] There are several reasons for suicide being more common in the married in India. Marriage in India is considered a socio-cultural necessity irrespective of the individuals willingness for it. Marital partners and their families in India are virtually strangers to each other (arranged marriage being most common form of marriage). As a result several adjustment problems usually arise among the married. Divorce being not readily accepted by Indian society and still difficult to go for, suicide provides the only escape for the ongoing problems in the concern's life.[19]. In the west, on the other hand, marriage is believed to be a measure of emotional stability and married people have a lower rate of mental illness.[20]

Prevalence of suicide in females is more common in general due to social, cultural and religious constraints, as these discourage women from employment, financial and social independence and encourage them to remain within unhappy marriages, in dependent living arrangements with extended family. Common stressors identified being early marriage, young motherhood, low socio-economic status, domestic violence and economic dependence.[21]

In the present study self-poisoning was the most widely commonly usemethod for suicidal attempt and organophosphates were the most well-known pesticides utilized which in line with the existing literature[13,14,16,17,22]. Easy availability and poor safety measures for storing at home makes the agent Organophosphates among the most common poison for attempting suicide. In south-east Asian countries organophosphates are the most commonly utilized because of simple accessibility and absence of any stringent laws in procuring and there use [2]. Depressive disorder was found in 50% of our study sample of attempted suicide diagnosed with psychiatric illness followed by alcohol use disorder, which was found in 25% (Table No-3).

Most common cause of attempted suicide in our study was depressive disorder followed by alcohol use disorder which contributes to the existing literature [22,24].

CONCLUSION:

Self-destructive behavior is a clinically important psychiatric entity. Its importance lies in the fact that, if identified promptly, majority of the leading consequences can be prevented on time. It is usually more common among youths. The most common modes were consuming poison, hanging, and cutting on various parts of body, jumping into well or other water bodies or in front of fast moving vehicles.

Psychiatric illnesses are very common among suicide attempters and are increasing diagnosed these days. Most common among them are depressive disorder, alcohol use disorder, personality disorder and adjustment disorder. If these psychiatric illnesses are identified, diagnosed and treated adequately on time many of such suicides can be prevented promptly.

So, we suggests on the basis of the findings of our study that every patient hospitalized with history or expressed suicidal ideation should undergo detailed psychiatric evaluation to prevent any such future attempts. Vice versa every psychiatric patient should be assessed for suicidal ideas to identify any self-destructive behaviors in future.

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