

THE IMPENDING SUICIDAL INTENT IN D. EPRESSED PATIENTS C- O. MING TO PSYCHIATRY DEPARTMENTS AT LUMHS HYDERABAD & DHQ HOSPITAL, PMC FAISALABAD.

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## OBJECTIVE

To find the frequency of suicidal intent among depressed patients coming to out patient Departments of Psychiatry, LUMS & Sir CJIP, HyderabadandDHQHospital/PMCFaisalabad.

# DESIGN:

Cross SectionalStudy

## PLACE& DURATION OFSTUDY:

The study was conducted at Sir Cowasjee institute of Psychiatry, Liaquat Un1verslty of Medical & Health Sciences, Hyderabad and Department of Psychiatry & Behavioral Sciences, Punjab Medical College, Faisalabad in six months from 1st March 2014 to 31st August 2014.

## SUBJECTS AND MTTHOOS

A total of 150 patients with depressive disorder diagnosed as per International Classification of diseases 10th Revision (ICD-10) (75 each from each department) wererecruitedfor thestudy.

### RESULTS

In 150 participants, 87 (58%) had moderate level of depression while 56 {37%) were having mild depression. Medium suicidal intent was found to be highest in 41.3% of the sample while high suicidal Intent wasfoundin 26.7% participanrs.

Past Psychiatry history of suicide was positive in 48%, family history of suicide was positive In 73%. Availability of socialsupport was 54%.Low selfesteem was prevalent (78.7 %) and 93.3 % of participants showedmoderateto severehopelessness.

## CONCLUSION:

Mostof theparticipants had moderate depression and medium suicidal intent. Married females working as housewives aremoresusceptible.

## K[YWORDS

Suicidal lntent,Selfesteem,Hopelessness,Depression.

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Suicidal intent is defined as the seriousness or intensity of the patient's wish to terminate hisorherlife';it also predicts thefuturerisk of complete suicide.It lieson a continuum from fairly common vague suicidal thoughts to rarer high intent

/high lethality suicidal acts'. Suicide is the 10th leading cause of deaths in the world. Around a million deaths occur annually and this will likely to reach 1.53 million by the year 2020'. More recent work shows the highest prevalence of suicideattemptsisfoundin Asia(about60%)'.

Retrospective psychological autopsy studies reveal that 90% of completed suicides were associated with psychiatric disorder, mood disorder being the strongest riskfactorand predictor ofsuicide".

Cross n;,tional risk factors for suicidal ideation, attempts and plans are female gender, younger age, less education, single marital status and having a mental disorder. Interestingly, the strongest diagnostic risk factors were mood disorders in high-income countries but impulse control disorders in low- and middle­ income countries'.

The appraisal of suicide risk requires a comprehensive biopsychosocial assessment of thepatient, detarls of suicidal thoughts, intent,plans, personal and demographic risk factors likehopelessness, lack of social support.copingskills,life events, .-iccess to leth.-il means. medication, substance abuse, chronic medical illness, mental state examination & collateral information are the contributory warning signsof suicide'.Nock et alInferred that 29% of people harboringsuicidal thoughts wenton to makea suicidal attempt,usually within ayearof onset of the thoughts'.

Densely populatedcountriesexceeding 100million IikePakistan, Bangladesh and Indonesia. there is lack of research and reporting' in this regard. In Pakistan this area has been overlooked as only limited researches are available with regard to prevalence of current suicidal intent in depression and associated factors. This studyis-aimedto bridge thegap.

## SUBJ[CTS ANO MITHOOS

This study was conducted simultaneously at Psychiatry departments of LUHMS Hyderabad and DHQ Hospital/PM( Faisalabad after having approval from the hospital ethical committees of respective departments. It was a cross sectional survey and was conducted in si)( months from 1st April 2014 to 30thSeptembic:r 2014.A total of 150 patients were recruited purposive convenient sampling. An Informed written consent was taken from patients after fully explaining the purpose and benefits of the study. Detailed history, physical and mental state examinationwererecordedandorganicity wasruledout.

Depression was assessed and was categorized into mild, moderate and severe by using ICD-10 Diagnostic Criteria for Depression. Beck suicide intent scale was applied afterwards to seethe currentintent and details of previous attempt, Rosenberg's self esteem scale and Beck's Hopelessness scale were applied to see the levels of self esteemandhoperessness. Aperforma havingall socio demographic variables like age, gender, marital status, occupation, employment status, socio economic background ,family system ,past psychiatric

Fig1trc2

**Bar Diagram Showing Occupation of the Patients**

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history ,family history of suicide. current suicidal ideation and social support. Collected data were entered and analyzed in Statistical Package for Social Sciences (SPSS) version16.0.Means andStandard deviation wascalculated for continuous variablesand frequency and percentages werecalculated forcategoric:alvariables.

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### RESULTS

In 150participants, 87(58%) had moderate level of depression while 56 (37%) were having mild depression. Medium suicidal intent was found to be highest in 41.3% of the.sample while highsuicidal intent was found in 26.7 % participants (see table 1). The socio demographics show that participants were predominantly females (N= 89,59%) with mean age 31 -40 years, while male proportion in

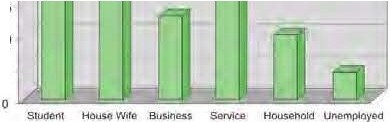
this segment was 61 (40%).Marital status showsthat 75 {50%) were married, 58(38.7%) were single,9 divorcees and8 widows/widowers

(seefig 1 ).

**Figure** I

**Pie Chart Showing proportion of Marital Status of Patients**

**oc:c:opation**



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Suicidal intent *was* found to behigh innuclear family system(76.7%) than Joint family system (23.3%). Past Psychiatry history of suicide was posftl\/e in 48%, famlly history of suicide was positive ln 73%. Availability of social support was 54%.Low self esteem was found in

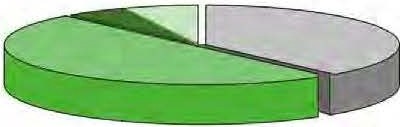
78.7% of the participants (see table2).93.3%of participants showed

moderate to severehopelessness (seetable3).

Table2

**Level of Rosenberg Self Esteem Scale**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Valid | | | | Cumulative  Percent |
| Frequency | | Percent | Percent |
| 15 25 Normal | 32 | 21.3 | 21.3 | 21.3 |
| Below 15 Low Self | 118 | 78.7 | 78.7 | 100.0 |
| Esleeem |  |  |  |  |
| Total | 150 | 100.0 | 100.0 |  |

**D** Single

* Marriage
* Widow

r:- Divorced

TnbleJ

**Level of Hopelessness**

Most of participants belonged to middle socioeconomic class (69%) and the lower and higher socioeconomic class are 12.2% and 18.8% respectively. The educationalstatusshows thatmost arestudentsor

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | | | Valtd  Percent ' | G<1mutatlve  Percent |
|  | Frequency | Percent |
| Mild | 10 | 6,7 | 6.7 | 6.7 |
| Moderate | 95 | 63.3 | 63.3 | 70.0 |
| Severe | 45 | 30.0 | 3CJ.O | 100.0 |
| Total | 150 | 100.0 | 100.0 |  |

In service; housewives constituted a good proportion of the sample (see figure 2).



Table l

**Level of Suicide intent on Beck Suicide Intent Scale**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Level of Suicide intent | Frequency | Percent | Valid Percent | Cumulntive  P-erccnt |
| No Intent | 33 | 22.0 | 22.U | 22.{) |
| I5-19 Low Intent | 15 | 10.0 | 10.0 | 32.0 |
| 20-28 Medium | 62 | 41.J | 41.3 | 73.3 |
| Intent |  |  |  |  |
| 29 + I ligh lmem | 40 | 26.7 | 26.7 | 100.0 |
| Totul | 150 | 100.0 | 100.0 |  |

# DISCUSSION

In present study most of the participants were females, married housewives With mean age of participants between 31 to 40 years. A former research found below 30 years of age as a risk factor In a sukidal ideation, plans & anempts' while for depression middle age

group was found to be vulnerable in Pakistan•. Previousresearch has co11firrl')ed that female gender has beel') a risk factor'10• However a contrasting view was brought forward by one previous finding", lllyas Mirza found that depression and anxiety were more prevalent in a housewives specially those having relationship difficulties with husbandand inlaws', but being singleis also found a posing riskin a previousresearch'.

Another surprising finding of present study Is that qualified people who have done their masters, students and graduates were more depressed than uneducated ones. Previous researches also showed thatliterate andeducated beingmore vulnerable'',another research found that education was a risk factor for depression In woman but nor formen".Yet someoft heresearches found illiteracy a riskfactor fordepression'·'.



Results showed that depression and impending suicidal Intent was more prevalent in students and people in service. Other studies are consistent with this finding", Another study showedEmployment is **risk** factorsin bothgenders".

Among social factors results showed that middle socioeconomic class and nuclear family system are risk factors however previous research showed that high and low income classes were more vulnerable to suicide' whilejointfamily wasalsoarisk factor".

Current study inferred that most prevalent suicidal Intent was medium as compared with high and low. A previous research showed that the most of the patients scored in moderate-to-high range of suicide intent", while in another study mild to moderate suicide intent was found8. Lack of social support is an evidenced based risk factor for suicide and indeed a red flag warning sign' however our study showed an adequate social support and yet emerging suicidalintent.

Moderate hopelessnessisfound tobe more prevalent in our study;it is supported by previous studies that stated that hopelessness is considered to beanimportant predictorof'·''".Lowselfesteem was found to be most prevalent In present findings;low self esteem has beenahighestpredictive valueotsuicide among depressed patients asperprevious research",

# CONCLUSION

Medium Suicidal intent and moderate depression is more prevalent in female gender,married, students, service men and housewives. Middle socioeconomic background, nuclear family system, Intact social support, low self esteem and moderate hopelessness are associated withimpending suicidalintentin depressed patients.

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1. Beck AT,Schuyler D, Herman I. Development of suicide Intent scales. In: Beck AT, Resnick HLP, Lettieri DJ, editors. The prediction of suicide.Bowie,MD:Charles Press; 1974.pp.45-46.
2. Cole-King A,Green G,Gask L,Hines K,Platt 5.Suicide mitigation: A compassionate approach to suicide prevention. Advances in PsychiatricTreatment 2013;19:276-283.
3. Bertolote JM, Fleischmann A. A global perspective on the epidemiology of suicide.Suicidology.2002;7:6-81.
4. World Health Report. Suicide risk for young people. World HealthOrganization 2009.
5. Khan MM, Mahmud 5, Karim MS, Zaman M, Prince M. Case­ Control Study of Suicide in Karachi, Pakistan. Br J Psychiatry 2008;193:402-5.5.
6. Nock MK. Borges G, Bromet EJ. Cross-national prevalence and

risk factors for suicidal ideation, plans and attempts. British JournalofPsychiatry(2008) 192:98-105.

1. Khan MM.Suicide Prevention and developing countries.JR Soc Media 2005;98:459·63
2. Jain V, Singh H, Gupta SC, Kumar 5. A study of hopelessness, suicidal intent and depression in anattempted suicide. Indian J Psychiatry. 1999 Apr-Jun; 41(2):122-130.
3. Mirza I, Jenkins R. Risk factors, prevalence, and treatment of anxiety anddepres,ive disorders in Pakistan: systematicreview. BMJ2004;328:794.
4. Richards D, Sanabria A. Point-prevalence of depression and associatedriskfactors. J Psycho!. 2014May-Jun;148(3):305-26.
5. Al-Habeeb AA,Sherra KS, AI-Sharqi AM,QureshiNA. Assessment of suicidal and self:injurious behaviours among patients with depression.Psycho!.2014May-Jun;148(3):305-26.
6. Wagenaar BH, Hagaman AK. Kaiser BN, McLean KE, Kohrt BA.

Depression, suicidal ideation, and associated factors: a cross­ sectional study In rural Haiti. BMC Psychiatry. 2012 Sep 19;12: 149.doi: 10.1186/1471-244X-12-149

1. Menon V,Kattimani S, Shrivastava MK, Thazath HK.Clinical and socio-demographic correlates of suicidal intent among young adults: a study from South India.Crisis.2013 Jan I; 34(4):282-8. doi:10.1027/0227-5910/a000203.
2. Wetzel RD, Margulies T, Davis R. Karam E. Hopelessness,

depression, and suicide intent. Journal of Clinical Psychiatry, May1980;Vol41(5):159-1.

1. VanGastel A,SchotteC.MaesM .Theprediction of suicidalIntent

in depressed patients. Acta Psychiatr Scand. 1997 Oct; 96(4):254-9.