

PHYSICAL ILLNESS AND SUICIDE

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SYNOPSIS

This is a study of 70 suicide (31%) who were found to suffer from physical illness occurring in Singapore during the year 1974. Suicide cases suffering from physical illness could be categorized into five main groups according to the mental or physical distress caused. Fifty per cent of the cases were above the age of 60. Among the different ethnic groups, the Malay was unrepresented. The physically ill who committed suicide used more positive and lethal methods of self-destruction.

INTRODUCTION

Many studies done have shown that a relationship exists between physical illness and suicide (Cavan, Sainsbury, and Tuckman and Lavell). However, except for Yap who did a comprehensive study of suicide among the Chinese in Hong Kong, there are no study of 'physical illness and suicide' among the Chinese. In his study, Yap noted that of all the physical illness, tuberculosis was then of the greatest importance as a precipitating cause of suicide. In 28% of his cases of suicide, physical illness was the main precipitating cause.

THE STUDY

Suicide is an uncommon event. In Singapore, there would be about 200-250 cases of suicide a year giving a rate of about 11 per 100,000 population per annum. Thus, suicide in Singapore can only be studied retrospectively. In most retrospective studies of suicide, the main materials were obtained from the Coroners' Courts. However data from Coroners' case-files were often found incomplete and inaccurate.

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In this study, a psychological post-mortem of all cases of suicide which occurred in the year 1974 in Singapore was attempted. From a total of 226 cases of suicide for that year, 70 were found to suffer from physical illness. Of these, 54 were male and 16 female. The author was able to personally interview the close-relatives of 46 suicide-victims (66%).

METHODOLOGY

In the analysis of individual suicide case, the determination of when physical illness had contributed to the suicide would be difficult. In most studies, the common guide-lines used were that —

1. Symptoms and signs of physical illness were present prior to the suicide.
2. A definite diagnosis of severe, incapacitating or incurable illness had been made when the case was alive or post-mortem finding had revealed definite pathological lesions.
3. The patient had expressed despair, a feeling of hopelessness and a belief that the illness were incurable and there was a determination to terminate life because of the physical illness.

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In this study, strict criteria were applied. A suicide-victim was deemed to have suffered from physical illness only when a definite medical or pathological diagnosis or diagnoses of physical illness had been made. Psychosomatic symptoms secondary to a disturbed mental rather than physical state were excluded. Further, a detailed study of the case should show that the physical illness had contributed to the suicide.

RESULTS

1. From the study, it was found that 70 out of the total of 226 cases of suicide were suffering from severe physical illness (31% of the total).
2. From the table I, it can be noted that suicide cases suffering from physical illness could be categorized into five main groups according to the mental or physical distress caused. Patients committed suicide because of — severe pain, difficulty in breathing, incapacitation, emotional problems or because they felt that their illness were incurable.

**TABLE 1
PHYSICAL ILLNESS AND SUICIDE
(YEAR 1974)**

	NO. OF CASES	%
1. PHYSICAL ILLNESS CAUSING PAIN/DISCOMFORT		
peptic ulcer	4	
ischaemic heart disease	2	
eye disease	1	
skin disease	1	
haemorrhoid	1	
renal infection/stone	1	
stone in urinary bladder	1	16
2. PHYSICAL ILLNESS CAUSING BREATHLESSNESS		
cardiac failure	7	
pulmonary tuberculosis	6	
chronic lung diseases	4	24
3. INCAPACITATING PHYSICAL ILLNESS		
blindness — partial or complete	6	
deformities	5	
post-injuries	2	19
4. DEPRESSION, ANXIETY, FEAR OR SHAME — SECONDARY TO PHYSICAL ILLNESS		
epilepsy	3	
hypertension	2	
post-operative	2	
diabetes mellitus	1	
blood disease	1	
leprosy	1	14
5. INCURABLE PHYSICAL ILLNESS		
post-cerebro-vascular accidents	10	
cancers	7	
cirrhosis of liver	2	27
TOTAL NUMBER OF SUICIDES WITH PHYSICAL ILLNESS	70	100

3. The next table (table 2) shows that 50% of suicide who were suffering from physical illness were above

the age of 60 compared to 15% who were not suffering from physical illness.

TABLE 2
DIFFERENT AGE-GROUPS AND SUICIDE WITH PHYSICAL ILLNESS
(YEAR 1974)

AGE-GROUPS	NO. OF CASES		%	
	SUICIDE WITH ILLNESS	SUICIDE WITH NO ILLNESS	SUICIDE WITH ILLNESS	SUICIDE WITH NO ILLNESS
10 — 24	5	53	7.1	34.0
25 — 44	16	57	22.9	36.5
45 — 59	14	22	20.0	14.1
60 and above	35	24	50.0	15.4
TOTAL	70	156	100.0	100.0

However, it was frequently noted that the young suicide usually suffered greater distress and resentment than the old suicide in long-lasting and incapacitating illness. Sorrow at being severely ill and being incapacitated resulted in resentment and in a feeling that fate had been unkind and unfair.

CASE EXAMPLES

1. A young man filled with inner-most bitterness and agony resentfully wrote:

'Time passes off very swiftly. During this long period, time flows away like water of the flowing stream. Spring one of the four seasons has come again. How is it that I have to lead a bitter life in this world while you all lead interesting lives? I do not find meaning at all in my living. It seems that I have to live in agony in this world throughout my life time. How unfair'.

2. An aged man wrote:

'I commit suicide because of near blindness of both eyes, weakness of limbs, degeneration of brain and chronic diabetes and haemorrhoid. None of my organ is of any good. No one to blame. I am happy to go. Go to avoid suffering. Goodbye'.

4. The population of Singapore in 1974 was estimated to be 2,219,000 persons. It is a plural society comprising of 76% Chinese, 15% Malays, 7% Indians and 2% persons of other ethnic origins. In this series, it is interesting to find that in that year no Malay committed suicide because of physical illness.

5. Table 3 illustrates that the physically ill who committed suicide chose more positive and lethal method of self-destruction.

TABLE 3
METHODS OF SUICIDE
(YEAR 1974)

METHODS	SUICIDE WITH PHYSICAL ILLNESS			SUICIDE WITH NO PHYSICAL ILLNESS		
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
LEAPING FROM HIGH BUILDINGS	47.1	52.6	48.6	38.2	50.0	44.2
HANGING	39.2	26.3	35.7	25.0	20.0	22.4
DROWNING	—	—	—	7.8	10.0	9.0
POISONING	9.8	15.8	11.4	23.7	16.3	19.9
OTHERS	3.9	5.3	4.3	5.3	3.7	4.5
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0

CONCLUSION

In Singapore, 31% of the total number of suicide in the year (1974) were found to suffer from physical illness.

From psychological post-mortem study of these cases, it was discovered that they committed suicide because —

1. Prolonged pain, severe change in physical state or repeated attacks of breathlessness had reached a level which was beyond their tolerance.
2. Repeated painful surgeries, repeated admission into hospitals or repeated attacks or relapses of illness had exhausted their will to fight or go on.
3. Loss of physical health or body integrity had resulted in separation from families and disruption from activities which had previously made their lives meaningful.
4. Rather than await and passively experiencing death, they sought to master or overcome their dilemma by actively bringing about their own demise. In Singapore only the elderly Malays had the fortitude not to commit suicide under such condition. Their religion forbids them to hasten their death prematurely.

The other social factors frequently found associated with physical illness were — fear of being a burden to others and having no immediate relatives. Of note, 73% of the male suicide in this series were unemployed because of their physical illness.

Most of the suicide in this series had received treatment for their illness. Few of them had returned to China for treatment. However many finally commented that 'further treatment was of no avail'.

These suicide-victims had lost all hope and had irrevocably decided to die. They were determined. There was no fear and often nothing would stop them from their decision. They more often chose the most definite and lethal method of self-destruction.

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