

Prevalence of suicidal ideation among depressive patients

Ali Burhan Mustafa,¹ Bisma Jamil Makhdoom,¹ Mahwish Adnan,¹ Sarmad Mushtaq,¹ Muhammad Waseem Tufail,¹ Iram Shahzadi¹

Abstract

Background: Depression is most common mental disorder associated with suicidal ideation and behavior.

Objective: To explore the level of suicidal ideation among depressive patients.

Methodology: The sample size comprised of 50 diagnosed patients including both genders (25 male, 25 female) and were recruited from Sheikh Zayed Hospital, Rahim Yar Khan. Study design: Cross-sectional study. We used questionnaire, Suicidal Behaviors Questionnaire-Revised (SBQ-R) to measure the prevalence of suicidal ideation among target population. Data were collected through convenient sampling. After that data was analyzed through SPSS version 21. The statistical tools were descriptive statistics such as a mean std. deviation and t. test was used.

Results: The result of the study shows that females have significantly more suicidal ideation (M= 14.57) as compared to male (M= 12.32) depressive patients, p-value (0.0396)

Conclusion: This study shows that female depressive patients have more suicidal ideation as compared to male patients in our setting.

Keywords: Depression, Hospital, Suicidal Ideation.

Introduction

Suicidal ideation is thinking about suicide, intentions or urges to commit suicide.¹ It is a key element in a process called suicidal behavior, and trigger for other components like the suicide attempt and committing suicide.² The most common risk factors of suicidal ideation or to committed suicide, are personality disorders, substance use disorder, depression or anxiety disorders, medical illness or psychosocial factors, but depression is the most common risk factor and psychological disorder in suicidal ideation or implementation of suicide.³ It is important to have the knowledge of the relationship between suicidal ideation and depression.⁴ There is a strong relation between suicidal behavior and depression.¹ According to the World Health Organization in 2012 suicide was known as the second leading reason of death.⁵ Suicidal ideation is a common, core symptom of major depressive disorder (MDD). WHO reported that 804,000 people committed suicide in the world, and the major reason of suicide was depression.⁵ According to American Psychological Association (APA) depression can be defined as a condition in which patient experienced low mood, irritability, lack of interest and pleasure, feeling of helpless and hopelessness and often involve suicidal ideation.⁶⁻¹⁰

In previous years suicide was not reported in

Pakistan. Pakistani law is based on Islam, and suicide is considered a sin in Islam. Suicidal behavior and attempts are considered as criminal act and punishable by Islamic law. Majority of population in Pakistan is Muslim. Due to social and legal taboos related with suicidal behaviors or acts such behaviors are often less reported in Pakistan.⁷ Research on suicidal ideation and attempted suicide in Pakistan is sporadic; only few studies were conducted on suicide and attempted suicide.⁸ Suicide rates in the city of Karachi estimated from 1959 to 1963 as 0.72 per 100,000 and from 1974 to 1978 as 0.11 per 100,000.⁹ In Pakistan from the last couple of decades, suicidal behavior has been increase as suicidal ideation, deliberate self-harm or complete suicide recognized as a serious community problem related to health and.¹⁰ The ratio of suicide is increasing day by day among male and females from 2010 in Pakistan, and other Muslim countries.¹¹⁻¹⁵ Studies estimated that most suicides associate with depression in Pakistan is committed by young people below age of 30, the rate of suicide is higher in women than men.⁹⁻¹¹

This study was aimed to estimate the prevalence of suicidal ideation among diagnosed depressive patients. This study also assessed the sex risks factor of suicide and the level of suicidal ideation.

Methodology

This cross-sectional study was conducted 50 diagnosed patients of depression in Department of

1. Department of Psychiatry, Sheikh Zayed Medical College/Hospital, Rahim Yar Khan, University of Health Sciences, Lahore, Pakistan.

Correspondence: Dr. Ali Burhan Mustafa, Associate Professor, Department of Psychiatry, Sheikh Zayed Medical College/Hospital, Rahim Yar Khan, Pakistan.

Email: aliburhanmustafa@gmail.com

Received: 07-01-2019

Accepted: 15-05-2019

Published: 29-06-2019

Psychiatry and Behavior Science Sheikh Zayed Hospital and Medical College, Rahim Yar Khan. In this study, Suicidal Behaviors Questionnaire (SBQ-R) scale was applied to assess the prevalence of suicidal ideation among both genders, diagnosed with Major Depressive Disorder (MDD). The participants of the study were selected from indoor patients having depression with suicidal ideation; 25 patients were male and 25 were females. The participants were selected by purposive sampling technique on the basis of symptoms of suicidal ideation among depression.

The participants with mild, moderate and high level of MDD diagnosed with clinical assessment scale were included for data in this research. The data was taken from those patients who were in stable condition and were previously diagnosed as the patient of depression with suicidal ideation. The patients diagnosed with depression with psychotic features and co morbidity of other mental disorders was not included in the study because most of them were not in the stable condition. Statistical Package for Social Science (SPSS) version 21 was used for statistical analysis and results on descriptive statistics and t-test was applied. Demographic variables consisted of patient's age, gender, marital and socioeconomic status.

Suicidal Behaviors Questionnaire-Revised:

SBQ-R was developed by Augustine Osman, it is consisting of 4 items.¹² SBQ-R is used to measure of past suicidal thoughts and attempts which have proved to be significant predictors of future suicidal behavior. The first item asks if the respondent has ever thought about or attempted suicide, second item ask how frequent suicidal thoughts in the past years were, third item ask have they told someone about such thoughts, and fourth item ask what is the likelihood of attempting suicide in the future. The higher the obtained score reflects the higher risk for subsequent suicidal behavior. Suicidal thoughts and behavior has been indicated by scoring of SBQ-R, it was used in many researchers conducted on suicidal ideation and attempt suicide in Pakistan.¹²

Ethical approval was sought out from Institutional Review Board. The rationale of the current study was explained to patients and the consent of each patient was taken for conducting this research. There was one questionnaire given to the data collector and they were instructed to fill the

demographic sheet first and SBQ-R after that. Every respondent was rated on the basis of information provided. The performas were properly filled, each performa was checked individually and rated according to the scoring manual.

Results

The data were analyzed and compiled for the results and from the overall sample, 50% were male and 50% were female depressive patients. From the collected data, 23% patients have age less than 25 years, 48% patients having age from 25 to 50 years, and 29% patients having age more than 50 years. The study shows the comparison of suicidal ideation of among male and female. The average score of male population was 12.32 and the average score of female population was 14.57. Hence the level of suicidal ideation in female population was higher as compared to male population. T-test was used to compare significance of both genders, and p-value was significant (0.0396) at 5% level of confidence interval. The prevalence of suicidal ideation was found significant in females.

Table I: Comparison both genders having Suicidal Ideation

Gender	N	Mean	SD	P.Value
Male	25	12.32	3.181	
Female	25	14.57	5.606	0.0396

Discussion

The current study aimed to find out the prevalence of suicidal among patients diagnosed with MDD. In this study, a total of 50 patients were selected, 50% were male and 25 (50%) were female depressive patients. The result of the study shows that females have significantly more rate of suicidal ideation as compared to male patients.

It is supported by study results from other countries as well.¹⁶⁻¹⁹ Some studies estimated that in Pakistan most suicides are committed by people under age of 30 years and the rate of suicidal behavior is higher in women than men.¹³ Some studies found that gender has an important determinant in Pakistan in perspective of suicidal ideation. It is also consistent with the global WHO suicide report that indicated females attempt more suicide than males.⁵ The possible reason for this might be women's greater

vulnerability to other psychosocial stressors.²⁰⁻²² In Pakistan, risk of suicidal ideation is high in women than men, especially co morbidity of depression and suicidal behavior in Pakistani women is high.¹⁴ In Pakistan, being women is itself a risk factor for suicidal ideation or behavior associated with issues of empowerment, domestic violence, and lack of employment.¹⁵ Depression is a burden for the people who are suffering from it and also effect their interpersonal and social life.¹⁶ The increase in the frequency of depression shows that there is need for more work for screening or measurement and treatment of depression. Because it has been reported that more than 90% of those who die by suicide have a diagnosable mental disorder.¹⁶

Mood disorders were most predictive of suicide related outcomes, as has been reported in prior studies.²¹ This is also supported by the study conducted in South Africa,¹⁸ and India.²² The possible reason might be that depression decreases neurotransmitter serotonin which resulted in suicidal behavior.

In this study, there are some limitations. Our sample is only representative of clinical population of Sheikh Zayed Hospital, Rahim yarn khan, and visitors of local clinic and hospitals were not represented. Small sample size and purposive sampling involved in this study and only diagnosed patients were selected, but other clinical population might be missed. This is the first study in Rahim Yar Khan to identify the prevalence of suicidal ideation in Patients diagnosed with MDD.

It is suggested that there should increase the area and sample size of the respondents to make the study more valid. Because of the high prevalence of suicidal ideation in depressive patients, there is a need to identify the causes and interventions for depression, to reduce the risk of suicidal ideation. It is also suggested that prospective studies should be conducted with intervention for the patients as well as consider prevention and treatment of suicidal behaviors in Pakistan.

Conclusion

This research showed the Prevalence of Suicidal Ideation among Male and Female Patients Diagnosed with MDD. The Prevalence of suicidal ideation are higher in female than male depressive patients. However, many cases of depression and

suicidal ideation might be under treated and under diagnosed in Rahim Yar Khan.

Authors Contribution: ABM: Design of work, drafting and final approval. **BJM:** Conception of work, Interpretation of data, drafting and final approval. **MA:** Design of work, revising and final approval. **SM:** Interpretation of data, revising and final approval. **MWT:** Acquisition of data, revising and final approval.

All the authors gave final approval for publication and agreed to be accountable for all aspect of work.

Conflict of Interest: None

Sources of Funding: Self

References

1. Naseem S, Munaf S. Suicidal ideation, depression, anxiety, stress, and life satisfaction of medical, engineering, and social sciences students. *Journal of Ayub Medical College Abbottabad*. 2017 Jul 30;29(3):422-7.
2. Pereira A, Cardoso F. Suicidal ideation in university students: prevalence and association with school and gender. *Paidéia (Ribeirão Preto)*. 2015 Dec;25(62):299-306.
3. Mackenzie, S., Wiegel, J. R., Mundt, M., Brown, D., Saewyc, E., Heiligenstein, E., & Fleming, M. Depression and suicide ideation among students accessing campus health care. *American journal of orthopsychiatry*, 2011.81(1): 101.
4. Nock MK, Kessler RC. Prevalence of and risk factors for suicide attempts versus suicide gestures: analysis of the National Comorbidity Survey. *Journal of abnormal psychology*. 2006 Aug;115(3):616.
5. World Health Organization. Preventing suicide: A global imperative. World Health Organization; 2014.
6. American Psychiatric Association, APA. Practice guideline for the assessment and treatment of patients with suicidal behaviors. *Am J Psychiatry*, 2003, 160 (11), 1-60.
7. Shah A, Chandia M. The relationship between suicide and Islam: a cross-national study. *Journal of Injury and Violence Research*. 2010 Jun;2(2):93.
8. Khan F, Ali U. Impact Of Religious Orientation On Suicide Behaviors Among Psychiatric Patients. *Journal Of Pakistan Psychiatric Society*. 2016 Jan 1;13(1).
9. Naveed S, Qadir T, Afzaal T, Waqas A. Suicide and its legal implications in Pakistan: a literature review. *Cureus*. 2017 Sep;9(9)
10. Shekhani SS, Perveen S, Akbar K, Bachani S, Khan MM. Suicide and deliberate self-harm in Pakistan: a scoping review. *BMC psychiatry*. 2018 Dec;18(1):44.

11. Kazmi SF, Pervez T, Sultan N, Tahir R. Unemployment as a factor of suicidal ideation in Hazara Division (KP) Pakistan. *International Journal of Marketing and Technology*. 2013 Jan 1;3(1):259.
12. Khatoon H, Khalid H, Fatima M, Minhas FA. Undiagnosed depression with suicidal ideation/intent among patients visiting medical OPD: Depression in disguise. *Int J Indian Psychol*. 2015;2(4):57-68
13. Yousuf S. Understanding the cultural meanings and context of suicide attempts: a qualitative study from Karachi (Pakistan). *HKU Theses Online (HKUTO)*. 2016.
14. Shahid M, Iqbal R, Khan MM, Khan MZ, Shamsi US, Nakeer R. Risk factors for deliberate self-harm in patients presenting to the emergency Departments of Karachi. *Journal of the College of Physicians and Surgeons--Pakistan: JCPSP*. 2015 Jan;25(1):50.
15. Qadir F, Khan MM, Medhin G, Prince M. Male gender preference, female gender disadvantage as risk factors for psychological morbidity in Pakistani women of childbearing age-a life course perspective. *BMC public health*. 2011 Dec;11(1):745.
16. Deneke DE, Schultz HE, Fluent TE. Screening for depression in the primary care population. *Psychiatric Clinics*. 2015 Mar 1;38(1):23-43.
17. Ohayon MM, Roberts LW. Links between occupational activities and depressive mood in young adult populations. *Journal of psychiatric research*. 2014 Feb 1;49:10-7.
18. Peltzer K, Louw J. Prevalence of suicidal behaviour& associated factors among tuberculosis patients in public primary care in South Africa. *The Indian journal of medical research*. 2013 Aug;138(2):194.
19. Scocco P, de Girolamo G, Vilagut G, Alonso J. Prevalence of suicide ideation, plans, and attempts and related risk factors in Italy:: Results from the European Study on the Epidemiology of Mental Disorders-World Mental Health study. *Comprehensive psychiatry*. 2008 Jan 1;49(1):13-21.
20. Al-Maani MA. Suicidal Ideation among Patients Suffering Depression. *Middle East Journal of Psychiatry and Alzheimers*. 2015 Mar;84(1696):1-3.
21. Platt S, Bille Brahe U, Kerkhof AJ, Schmidtke A, Bjerke T, Crepet P, Leo DD, Haring C, Lonnqvist J, Michel K, Philippe A. Parasiticide in Europe: the WHO/EURO multicenter study on parasuicide. I. Introduction and preliminary analysis for 1989. *Acta-psychiatrica Scandinavica*. 1992 Feb;85(2):97-104.
22. Rajeswari R, Muniyandi M, Balasubramanian R, Narayanan PR. Perceptions of tuberculosis patients about their physical, mental and social well-being: a field report from south India. *Social science & medicine*. 2005 Apr 1;60(8):1845-53.

Article Citation: Mustafa AB, Makhdoom BJ, Adnan M, Mushtaq S, Tufail MW, Shahzadi I. Level of suicidal ideation among depressive patients. *JSZMC* 2019;10(2): 1634-1637