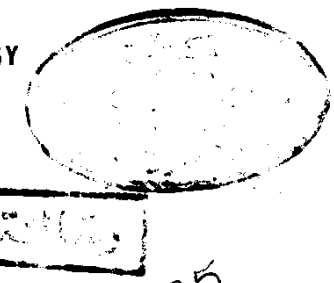
STATICAL STUDY OF SUICIDAL DEATH
AN INTERCULTURAL STUDY OF TWO LOCALITIES
GREATER CAIRO AND BANI-SWEEF GOVERNORATES

Submitted For The Partial Fulfilment of The
MASTER'S DEGREE
In
FORENSIC MEDICINE AND TOXICOLOGY



By

MAGDA KAMEL MOUSTAFA
(M.B.,B.Ch.)

Under the Supervision of

Prof.Dr. AHMED KAMEL MASHHOUR
Prof. of Forensic Medicine and Toxicology.
Faculty of Medicine
Ain Shams University

Prof.Dr. SAWSAN A.F. SHALABY
Assist. Prof. of Forensic Medicine and Toxicology,
Faculty of Medicine
Ain Shams University

Dr. SEHAM ABDEL AAL
Lecturer of Forensic Medicine and Toxicology,
Faculty of Medicine
Ain Shams University

Dr. MOHEY EL MASRY
Lecturer of Forensic Medicine and Toxicology,
Faculty of Medicine
Ain Shams University

FACULTY OF MEDICINE

AIN SHAMS UNIVERSITY

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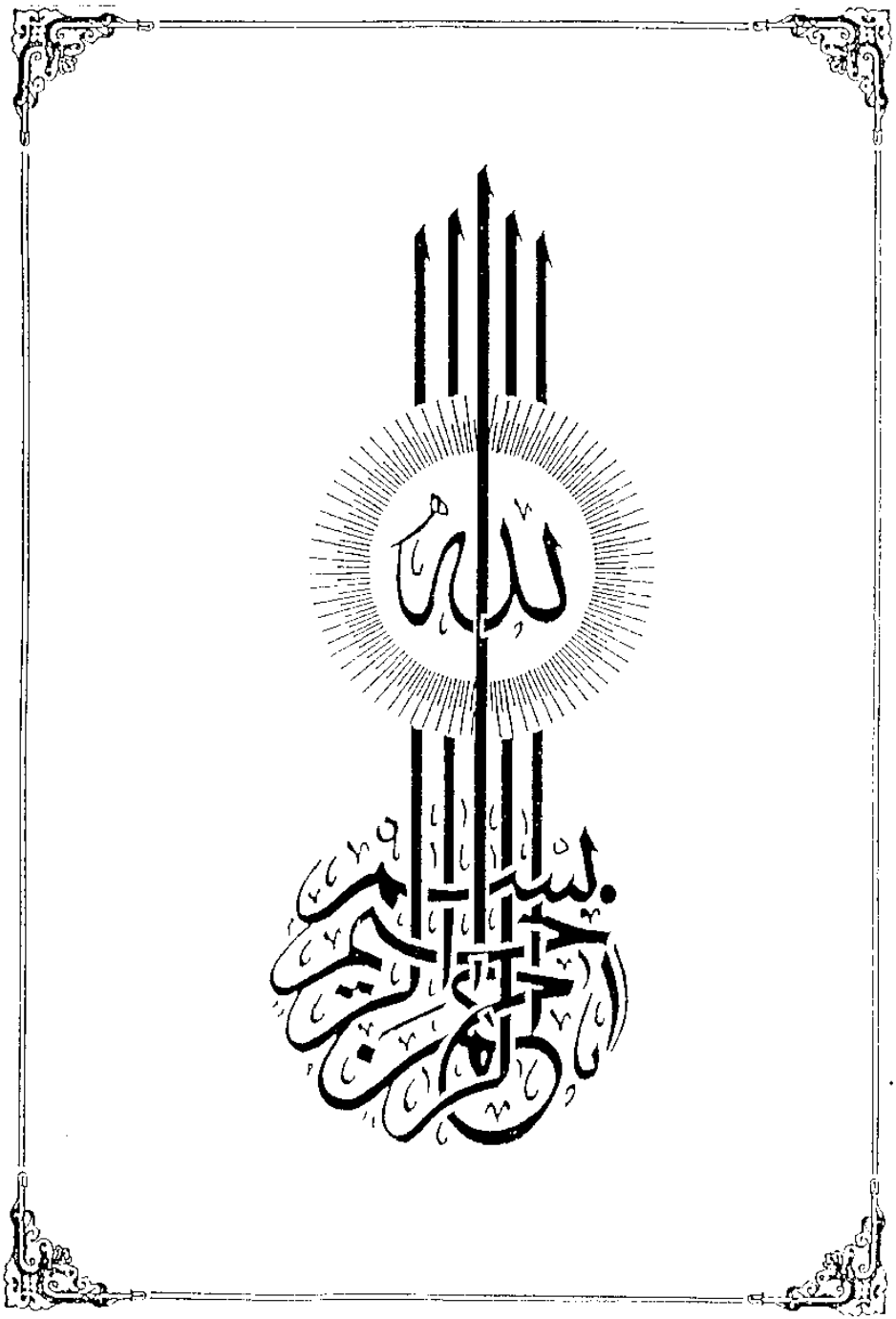
بسم الله الرحمن الرحيم

اهداء ....

الى والدتى ... زوجى ... أولادى

بفضل الله وتفضله تم تخريج رسالتى العلمية فى الجراحة

د. ماهر



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I. AIM OF THE WORK

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Suicide murder is a good reflection of socio-economic and psychological status of the community. Many factors contributed to self destructive behaviour in individuals.

This work is concerned with a comparative retrospective study of suicidal deaths in Greater Cairo and Upper Egypt governorates.

Greater Cairo represent Cairo, Kalyoubya and Giza governorates, and Upper Egypt represents BenySweef, Fayoum and Assiout gevernorates. These two localities are chosen because of the different aspects of the pattern of life in these intercultural communities.

The period of this comparative study is five years from 1982 to 1986. The study is conducted to assess and evaluate the magnitude of the problem by analyzing the different risk factors using psychological autopsy method.

According to Farborow (1966), analytical study is performed for demographic and socioeconomic data on age and sex, educated status and the methods with which suicides were committed.

II. REVIEW OF THE LITERATURE

TERMINOLOGY

Suicide is derived from Latin word "Suicidium". It is a relatively recent word. According to the Oxford English Dictionary, the word was first used in 1651 by Walter Charlston. The traditional (and current) German term is "Selbstmord".. self-murder, French term is "le Suicide" (Hankoff, 1979). The Arabic term is " الانتحار ".

In the 1960 a relatively new word, Suicidology, was introduced. Suicidology was used in a text by a Dutch professor, Bonger, in 1929 but did not become widely known. Independently, the word was used by Shneidman in a book review (1964) and then in the "Bulletin of Suicidology" (1967) and at the first Convention of the American Asssociation of Suicidology, which met in 1968. Since then the word has come into general use.

Suicidology is defined as the scientific study of suicidal phenomena (Hankoff, 1979).

HISTORICAL BACKGROUND

Ancient Egyptian viewed suicide with neutrality; death was a merely a passage from one form of existence to another, Hankoff (1979).

The evidence that suicide was not condemned in Egypt is found in Negative Confession Book of the Dead, 42 statements made by the deceased before 42 divine jurors deciding his fate as an inhabitant of the world of the dead. Included in the Negative Confession are items pertaining to killing, violence, suffering, and personal attack. However, there is no statement especially concerning or condemning injury to one self (Hankoff, 1979).

The most ancient suicide comes from the Egyptian history is the suicide of Amenophis 1500 Before Christ (B.C). Suicide in prison was mentioned in the period of Ramses III (Hankoff, 1979). Suicide note was written by Amenophis inaform of farewell note to thePharaoh, which is the first suicide note known in the history. The only suicide of a female mentioned was the suicide of Cleopatra (30 B.C)(Hankoff, 1979).

The ancient Israelites, regarded the death of even one Hebrew as a threat to tribal continuity. The act of suicide as matrydroms has been adjudged and religiously accepted by the ancient Israelites (Hankoff, 1979).

Suicide pact was mentioned by Flavious jesus, one of the great historians, and one who made many references to suicide. This occurred when Jatapata city fell to the Roman (76 A.D.) when 960 survivors of the masada were lid to mass suicide by their Zealous leader, Eleazar in the war between Jesus and Romans (Hankoff, 1979).

The Christian doctrine regarding suicide was first formulated theologically by St. Augustine (354-430 A.D.), who condemned any form of suicide. The Council of Bragas (536 A.D.), denied funeral rites to suicides, attempted suicide was punished by the Council of Toledo (639 A.D.) by exclusion from church practice for months (Cassidy et al., 1979). So before the Augustinian prohibition, suicide was seen and accepted positively as a mean of avoiding sinful distraction (Resnik, 1980).

Suicide came to be mental illness in the nineteenth Century.

Subsequent Secularisation of western through emphasized civil, legal and behavior dimensions of suicide (Resnik, 1980).

Diana (1984), considered euthanasia as patients legal rights in relation to the distribution of suicide booklets entitled "AG wide to Self-Deliverance" published by the Voluntary Euthanasia Society.

One of the fundamental human rights in Islam is the existance of life. This rights should not be provoked.

"ويقول الله سبحانه وتعالى":"وماكان لنفس ان تموت الاباذن الله كتابا مؤجلا"
سورة آل عمـــــــران : آية"١٤٤" "صدق الله العظيم"

ويقول الله سبحانه وتعالى "ولا تقتلوا النفس التى حرم الله الا بالحق ٠ وأما قاتل نفسه فالله سبحانه وتعالى يحذر من ذلك فيقـــــــول ٠ " ولا تلقـــوا بأيديكم الى التهلكه " سوره البقره الايه ١٩٥٠

وروى البخارى ومسلمعن ابى هريره رضى الله عنه انالرسول صلى الله عليه وسلم قال :" من تردى من جبل فقتل نفسه فهو فى نار جهنم يتردى فيها مخلدا فيهـــا ابدا ، ومن تحسى سما فقتل نفسه فسمه فى يده متحساه فى نار جنهم خالـــــــدا مخلدا فيها ابدا ـ ومن قتل نفسه بحديده فحديدته فى يده يتوجأ بها فى نـــــار جهنم خالدامخلدا فيها ابدا ٠

"السيد سابق ـ فقه السنه ـ المجلد الثانى ـ دار الكتاب العربـــــى ـ الطبعه الثالثه ص ٥١٠ ٠

INTRODUCTION

Suicide has been with us as long as humanisity, and yet our understanding of this complex phenomenon is fragmentary (Fraberowand Simone, 1969). It can be defined as self destructive behaviour (Kato, 1962 and Grossop et al, 1975) or as the intentional taking of one's life (Hankoff, 1979). It is a total act, either completed or just attempted (Moskop and Engelhardt, 1979). Stengel and Cook (1958), introduced the term attempted suicide, Kessel (1965), deliberate self poisoning, Morgan (1981), non fatal deliberate self harm, Kennedy and Kreitman (1974) and Kreitman (1977), para suicide. Resnik (1968) and Schneidman (1979), considered suicide as it is the concept of intermission a wish to communicate, to test fate, to coerce others, self punishment, revenge and reunion. Farberow et al. (1966) and Kreitman (1981), thaught that suicide's roots are both intrapsychic and enviromental with social aspects relating both the family, work and interpersonal relationships. Drukheim (1897), laid its major stress on the generalized societal

factors. Menninger (1938) and Freuds (1957) view of a suicide proposed three components of suicide, the wish to kill, the wish to be killed and the wish to die. Barracloug et al. (1974, 1975) stated that there is no specific psychodynamic or personality in suicide. Meerlo (1962), Siegel (1979) and Rosen (1981) found various dynamics which underlie mass suicides like Masada and Jones town.

Lindemann (1944) and Schneidman (1979) views and studies of suicide after the Coconnut Grove fire in Boston are based on the crisis theory and on an impulsive and transient act. This is started by a hazardous event and immediately after this event the person's personal equilibrium is upset. Frightening and numbing sensation will be experienced. Persons cannot solve problems in their usual way. According to Lindmanns (1944),the crisis is differentiated into several phases: The initial phase is one of shock with physical collapse, outbursts, dazed withdrawal and denial as common experiences. The person's body is reacting to the hazardous event by shielding the person from its full impact. The intermediate phase is an extended cyclic period of intense

release of feelings, regain of control, problem-solving and then feeling released with loss of control. Dublin (1963) and Jacob (1971) stated that most people depend on coping methods that they used in childhood to manage this period. The last phase is the renewal phase in which the person renews social links to the outer world, rebuilds an inner world and regains usual skills in problem solving.

There is a prevelant myth that those who threaten suicide do not commit suicide. Actually, a large percentage of those who attempt or commit suicide have spoken overtly or covertly of their intention. Four out of five people who completed succeeded suicide have previously attempted suicide (Buglass and Horton, 1974).

Paykel and Rassaby (1978), carried out cluster analytic, procedures for classification on a sample of 236 suicide attempters aged 16 and over. This classification includes suicidal gestures, rating variables concerning previous suicidal behavior, details on the recent attempts and their motivation,