Acute suicidal self-poisonings during pregnancy

Ostre samobójcze zatrucia wśród kobiet w ciąży

Introduction

Acute suicidal self-poisonings during pregnancy are observed very rarely and are limited mainly to the case reports [2,3,4,5,7-10].

In the study selected clinical aspects of suicidal attempts during pregnancy were presented. The main attention was put on reasons of self-intoxication, the timing of attempted suicide as well as the influence of intoxication on the mother and the child.

Results

Some clinical aspects of pregnant women connected with suicidal poisonings are presented in Table I.

The pregnant patients were merely 0.38% of all women hospitalized between 2001 and 2004 in both clinics because of suicidal attempts. For the fifteen (78.9%) females it was their first suicidal attempt.

The most popular drugs for attempting suicide among pregnant females were benzodiazepines (7 cases, 36.8%). The most often reason of suicidal attempts was unplanned pregnancy (9 cases, 47.4%).

None of the studied females admitted that the main reason of suicidal attempt was an abortion induction.

W pracy przedstawiono wybrane aspekty kliniczne ostrzych zatruć lekami u kobiet w ciąży. Analizie poddano 19 ciężarnych kobiet, w wieku od 17 do 27 (średnia 22 ± 2,58) lat, przyjętych z powodu ostrego zatrucia do Kliniki Ostrzych Zatruc w Gdańsku i Oddziału Toksykologii w Poznaniu, w latach 2001-2004. Oceniano przede wszystkim przyczyny ostrzych zatruć, zawczasowanie ciąży, a także wpływ intoxikacji na zdrowie matki i dziecka. Dla większości badanych kobiet była to pierwsza ciąża (12 przyp., 63,2%). Wiek ciąży wahał się od 4 do 37 (średnio 19 ± 9,3) tygodni. Leki najczęściej wykorzystywanym do prób samobójczych były benzodiazepiny (7 przyp., 36,8%), zaś ich przyczyną nieпланowana ciąża (9 przyp., 47,4%). Wśród badanych kobiet stwierdzono dwa przypadki poronienia oraz jeden poród przedwczesny. Wnioski: Ostre samobójcze zatrucia kobiet w ciąży nie były częstym zjawiskiem w materiale dwóch klinik toksykologii; stanowiły one zaledwie 0,38% wszystkich przyjęć kobiet w latach 2001-2004. Główną przyczyną prób samobójczych były nieplanowana ciąża (9 przyp., 47,4%). Żadna z kobiet nie przyznała się, że celem próby samobójczej była chęć wywołania poronienia.

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Selected clinical aspects of suicidal attempts during pregnancy were presented. Nineteen pregnant females, in the age range 17-27 (mean 22 ± 2.58), were admitted to the Clinic of Acute Poisonings in Gdańsk and Toxicological Ward in Poznań between 2001 and 2004 because of suicidal intoxication. The main attention was put on reasons of self-intoxication, the timing of attempted suicide as well as the influence of intoxication on the mother and the child.

The week of pregnancy varied from 4 to 37 (mean 19 ± 9.3) weeks. The most popular drugs for attempting suicide among pregnant females were benzodiazepines (7 cases, 36.8%). The most often reason of suicidal attempts was unplanned pregnancy (9 cases, 47.4%).

There were two miscarriages and one premature birth observed in our cases.

Conclusions: Acute self-poisonings during pregnancy appeared to be a relatively marginal problem in the analyzed toxicology clinics and occurred in merely 0.38% of all women hospitalized between 2001 and 2004 in both clinics. The main reason of suicidal attempts in pregnant women was unplanned pregnancy (9 cases, 47.4%). None of the studied females admitted that the main reason of suicidal attempt was an abortion induction.

Material and methods

The analysis concerned 19 pregnant women, in the age range 17-27 (mean 22 ± 2.58), who had been admitted to the Clinic of Acute Poisonings in Gdańsk and Toxicological Ward in Poznań, between 2001 and 2004, because of acute suicidal intoxication.

The frequency of suicidal attempts during the three trimesters was compared to the theoretical distribution by means of chi2 test. This theoretical distribution was calculated by dividing the sample into groups based on duration of the three physiological trimesters: I trimester (<14 week), II trimester (14-27 week), and III trimester (>27 week).

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cases, 36.8%).

The week of pregnancy, among the patients admitted to the clinics, varied from 4 to 37 (mean 19 ± 9.3) weeks. For the most admitters it was their first pregnancy (12 cases, 63.2%), however, there were four second gravidity, two females with third, and one woman with the tenth gravidity.

There were 6 females in I trimester (31.6%), 9 admitters in II trimester (47.4%), and 4 women in III trimester (21%) in analyzed groups. There was no statistical significance in number of pregnant patients who had tried to commit suicide during the three trimesters compared to the theoretical distribution.

The clinical course of acute intoxications in pregnant women was mainly mild or moderate; only in three cases the processes were temporally severe.

There were two miscarriages and one premature birth observed in our cases. Miscarriages were connected with the overdose of tamoxifen in one case and the other one concerned a heroin addicted female. Three women (15.8%) were transferred to the gynaecological ward, other three had to be hospitalized in the psychiatric ward.

There were no fatal cases in the whole observed group.

Discussion

There are three possible reasons of intoxications during pregnancy like attempted suicide, accidental overdose and induction of abortion [6]. Lester, who examined 137 pregnant patients after acute poisonings, found out that approximately 68% of them tried to attempt suicide, and about 8% tried to induct an abortion [6]. Moreover females admitted to hospital after suicidal attempt about ten times more frequently requested an abortion than those claiming that it was an accident (33% vs. 3%) [6]. This conclusion was confirmed also by Houston and Jacobson who found out the significant (p=0.01) association between induced abortion and overdose.

The timing of suicide attempts can help us understand the real motives of the attempters. According to Lester the self-poisonings during pregnancy were spread out over the three trimesters, with more in the second trimester, however those attempting abortion poisoned themselves in the first two trimesters [6]. Czeizel et al. who observed pregnant females after suicidal attempts have concluded that most self-poisonings occurred after the early recognition of unwanted pregnancies and most resulted in very early fetal loss [1]. In our study none of the examined females admitted that the reason of suicidal attempt was an abortion induction. One of the causes of such answers may be the fact that the abortion is not legal in Poland and is allowed only in strictly defined circumstances.

Conclusions

Acute self-poisonings during pregnancy appeared to be a relatively marginal problem in the analyzed toxicology clinics and occurred in merely 0.38% of all women hospitalized between 2001 and 2004 in both clinics.

The main reason of suicidal attempts in pregnant women was unplanned pregnancy (9 cases, 47.4%).

None of the studied females admitted that the main reason of suicidal attempt was an abortion induction.

References