# Original Article

# Study of Suicidal Deaths in Married Women in a Tertiary Care Hospital at Warangal: Medico-Legal Analysis

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#### **ABSTRACT:**

**Background and Aim:** Each suicide is a personal tragedy that prematurely takes the life of individual and suicidal deaths in married women dramatically affecting the lives of families, friends and society. The aim of study was to know the causative factors and how to prevent the suicidal deaths in married women.

**Materials and Methods:** This study was a retrospective study, which includes medico legal cases of autopsies conducted at Department of Forensic Medicine, Kakatiya Medical College, Warangal (T.S.) from 1st January 2007 to 31st December 2012, were reviewed the postmortem reports, Inquest reports.

**Results:** Out of 5308 autopsies conducted 1104 cases belongs to suicidal deaths in married women aged between 25-40 years. The factors related to suicide deaths are 90% illiterate, 30% illhealth reason, 20% dowry reasons.

**Conclusion:** Family problems and ill health were major causes for suicidal deaths in married women and committing suicide by poisoning followed by burning, hanging and drowning.

**Keywords:** Suicide, married women, dowry deaths, poisoning, burns.

#### **INTRODUCTION**

World Health Organization(WHO) estimate that nearly 9,00,000 people worldwide die from suicide every year, including about 2,00,000 in China, 1,70,000 in India, and 1,40,000 in high-income countries. The Government of India relies on its National Crime Records Bureau (NCRB) for National estimates, and these reports fewer suicidal deaths (about 1, 35,000 suicide deaths in 2010) than is estimated by WHO.<sup>[1,2]</sup>

In Warangal area, the agriculture pesticides poisoning is the commonest for suicidal deaths. In the present study suicide was committed in the following order of priorities [4]. 1. Poisoning, 2. Burns, 3. Hanging, 4. Drowning

Gopal Sharma P et al<sup>[6]</sup> showed that, health reasons stands first in suicides in rural area of Warangal District. Due to

poor medical services in the District where people are left at the mercy of unqualified persons since the area is rural and under developed one. It is not surprise that physical facts account for bulk of suicides. The both sexes were psychiatrically ill and the non-availability of medical services in the rural area might have driven at least some of them to commit suicide.<sup>[13]</sup>

In Telangana region, Warangal Session's Court has occupied with many number of dowry deaths cases and stood number one in the state in the year 1995. [7,10] The dowry death cases recorded in the police department in the year 1995 are highest and number is 52 in Warangal, compare to previous years.

- 1. The role of pesticides occurring in this area which is an ideal suicidal poison.
- 2. The age group vulnerable to suicides in married

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women.

- The factors influencing the methods and causes of suicide.
- 4. The role of dowry played vital importance in suicides among the married women within 7 years of married life.
- 5. Other than dowry the reasons forcing married women to commit suicide.
- 6. Role of illiteracy, socio-economics, health and maladjustment of individual, leading tosuicide.

The objective of this study was to know the incidence of suicidal deaths in relation to age in married women.<sup>[16]</sup>

#### **MATERIALS AND METHODS**

A study of suicides in married women was carried out from the perusal of the records available in the Forensic Medicine Department, Kakatiya Medical College, Warangal.

The records consist of post mortem certificates issued by the Medical Officers, who has conducted the postmortem examination and the inquest/panchanama conducted by the Investing Officer/Station House Officer/Mandal Executive Magistrate. In dowry death cases Mandal Executive Magistrate has conducted the inquest.

In the present study of suicides in married women deaths carried out for the period of 2007-2012. The records available in the Forensic Medicine were collected.<sup>[11]</sup>

The post mortem reports and inquest copies were studied. The present study was meant for noting the increase in the number of suicidal deaths, in a married woman of this area and to group out into the age wise mode of suicide.

## **RESULTS AND DISCUSSION**

During the period 2007-2012, out of 5308 autopsies, 1104 suicide deaths married women (Table 1). Data obtained from post mortem reports Investing Officer/Station House Officer/Mandal Executive Magistrate inquest reports. More than 90% women were illiterates, and most of them belongs to socially economically backward group. 30% were due to ill health reasons and 20% were due to dowry reasons.

Table 1: Incidence of Suicidal deaths in married women

Total no of autopsies conducted	Total no of suicidal deaths	Percentage (%)
5308	1104	21%

Table 2: Incidence of suicidal deaths related to age

Age	Total	Percentage (%)
<15 years	16	15%
15 – 25 years	382	34%
25- 40 years	510	46%
>40 years	196	18%

Nearly 22% of married women are in the state of menstruation at the time of committing suicide, suggesting hormonal provocation theory, for the suicidal act. Nearly 46% of the women are in the age group 25-40 years (Table2).<sup>[12,14]</sup>

Agricultural pesticides followed by hanging, burning, drowning are the choice of committing suicides.<sup>[5, 15]</sup> Emotional, instantaneous decisions are the least provocation has resulted in committing suicide in these married women. Most cases committing suicides during the post festival period.

Warangal is a District Head Quarter, with present population of 13, 58, 235 in the year 2012. The population of 2007 is 9,74,512. It increased by 1/3rd in decade. In the year 2000 the population is 7, 47, 657. The gross influx of the population into the city is due to disturbance in the village and migration to the city in search of food or shelter or employment. This has given a change with style of living and stress on the migrated people has increased.

Dattarwal SK<sup>[3]</sup> study showed that suicidal deaths in married women has a pattern of suicides, poisoning followed by burning, drowning and hanging. In Warangal area also the suicidal deaths in married women has a pattern of suicides, poisoning followed by burning, drowning and hanging (Table 3).

Table 3: Modes of committing suicide

Mode	No of cases	Percentage (%)
Poisoning	680	62%
Burns	274	25%
Hanging	94	8.5%
Drowning	54	5%

A woman after marriage enters into new environment with people who are totally new to her. The 18 years period of stay with mother and father has not given her proper training and confidence, to live with new environment with new people. This is the reason for the persons, who have committed suicide with in a married period of 1 year after marriage.

The women who have committed suicide with in the

period of 3-7 years, married life have failed to make a home of their own. This means there is lack of strength on the part of women, to meet the necessary requirement of husband and children together. In such cases elderly guidance certainly help the woman to avoid the tragedy. So a good faithful relationship with in -laws. [9]

#### CONCLUSION

- i. The women should maintain cordial and good relations with in-laws.
- ii. The girl who has grown up at parents residence for 18 years proper guidance, training make her to fit to stand in society after marriage to live newenvironment.
- iii. Strict laws to be implemented to prevent dowrysystem.
- iv. Control and sale of pesticides mandatory and keep out of reach family members.
- v. Physical illness, ill health to providing treatment within reach of poor people nearby health services. During menstrual period and lactation the women suffers with low back pain, which disturb the mood due to hormonal imbalance during this period the husband and in-laws do not disturb her. Which may provoke suicidal tendency in addition to the wife is temporarily abstain from sexual relationship with husband causing disharmony lack of a mutual relationship with husband during this period, which contributes for suicide.

## **CONFLICT OF INTEREST:**

The authors declared no conflict of interest.

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