

A Study to Assess Hostility, Violence and Suicidal Behaviour in Persons Suffering from Alcohol Dependence Syndrome

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ABSTRACT

Alcoholism is among the most common psychiatric disorders in our country. Alcohol is a potent drug that causes both acute and chronic changes in almost all neurochemical systems. Thus, alcohol abuse can produce serious temporary psychological symptom including depression, anxiety and psychoses. It is descriptive study, 50 persons suffering from alcohol dependence syndrome along with their relatives were recruited from inpatient department of Psychiatry at Sree Balaji Medical College, Chennai. Inclusion criteria Patients aged 18 to 60 years Diagnosis of alcohol dependence Syndrome as per ICD 10 diagnostic criteria clinically stable for an interview. Exclusion criteria: Patients' having comorbid substance dependence /mood / psychotic disorders Persons with cognitive deficits/organic mental disorder Patients with delirium tremens during their inpatient stay. Prevalence of suicidal intent, the results showed 64% to have no suicidal intent or ideation. 36% have positive scores for suicidal intent of which 18% has low intent, 14% medium intent and 4% has high intent to commit suicide. Prevalence of violence, In the study group 48% has history of intimate physical violence, 38% has history of intimate emotional violence, 28% has history of intimate sexual violence and 10% has history of non-intimate violence. 48% of the study group has low risk of committing violence in the near future. 14% has medium risk and 6% has high risk to commit or repeat their act of violence. Conclusion The prevalence of suicidal behaviour is higher among persons suffering from alcohol dependence syndrome. Earlier the age of alcohol abuse higher the intent of suicidal behaviour. Persons who consumes high quantity of alcohol found to have high intent of suicidal behaviour. In this study there is no correlation between duration and quantity of alcohol abuse with domestic violence.

Key words: Alcohol dependence syndrome, Suicidal behaviour, Psychiatric disorders

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INTRODUCTION

Globally, alcohol consumption has increased in recent decades, with all or most of that increase is seen in developing countries. Alcohol consumption has health and social consequences via intoxication (drunkenness), dependence (habitual, compulsive and long-term drinking), and biochemical effects. Heavy alcohol use results in loss of many years of life due to disability and death in a relatively young age, in addition to chronic diseases affecting heavy drinkers.

Alcohol is the leading substance among the abused substances which is legal to use and causes considerable burden than any other substances. Alcohol not only harms the health of the drinker but also the wellbeing and health of the peoples around the drinkers including their family. Majority of crimes, suicides, road traffic accidents, divorces are related to alcohol.

Suicide once an escalating public health problem, and alcohol use has been consistently implicated in the precipitation of suicidal behaviour. Alcohol abuse may cause disinhibition, impaired judgment and impulsiveness which leads to suicidality. In the last 45 years, suicide rates have increased by about 60% worldwide, with global suicide figures potentially reaching 1.5 million deaths by the year 2020 [1-3].

The focus of this paper is to provide a broad overview of the much-debated relationship between alcohols, suicide, and violence. Suicidal behaviour among alcohol abusers is a matter of great concern, it is vital to study the prevalence of such behaviour among these persons suffering from alcohol dependence syndrome. The study is aimed to assess suicidal behaviour in terms of prevalence and intensity, hostile tendency to harm themselves or to harm others in persons suffering from alcohol dependence syndrome.

MATERIALS AND METHODS

It is descriptive study, 50 persons suffering from alcohol dependence syndrome along with their relatives were

recruited from inpatient department of Psychiatry at Sree Balaji Medical College, Chennai. Inclusion criteria Patients aged 18 to 60 years Diagnosis of alcohol dependence Syndrome as per ICD 10 diagnostic criteria clinically stable for an interview. . Exclusion criteria. Patients' having comorbid substance dependence / mood /psychotic disorders Persons with cognitive deficits/organic mental disorder Patients with delirium tremens during their inpatient stay. Instruments used for assessment, CAGE Questionnaire, MAST, Beck's suicidal intent scale, Extrapunitive-intropunitive scale (Hostility scale), & Historical Clinical Risk management scale- 20 (HCR 20). 50 persons from inpatient department of

psychiatry ward diagnosed to be suffering from alcoholendemic syndrome using ICD-10 and who fulfils the inclusion and exclusion criteria for the study are recruited all with their\ attenders. After obtaining informed consent, their socio demographic, clinical details were collected using the semi structured proforma developed especially for this study. The details were collected during the day of admission and on 4 the day of admission and on the day of discharge.

RESULTS

Socio demographic variables of persons suffering from alcohol dependence (Table 1).

Table 1: Syndrome.

Variable	Group	Number	%
Education Status	Illiterate	1	2
	Primary Education	20	40
	Secondary Education	20	40
	Graduate	9	18
Occupation	Unemployed	6	12
	Semi-Skilled	33	66
	Skilled	8	16
	Professional	3	6
Marital Status	Single	5	10
	Married	42	84
	Separated	3	6
Age of Onset of Substance Abuse	15-20 Years	26	52
	21-25 Years	16	32
	26-30 Years	8	16
Duration of Substance Abuse	<10 years	14	28
	>10 years	36	72
Daily Quantity of alcohol consumption	<360ML	27	54
	>360 ML	23	46
Family History of Alcohol Abuse	Parents , Siblings	35	70
	Grandparents, Uncle Aunts	4	8
	No history	11	22
Family History of Suicide	Grandparents , Uncle Aunts	5	10
	No history	45	90
History of Intimate Emotional Violence	Present	19	38
	Absent	31	62
History of Intimate Sexual Violence	Present	14	28
	Absent	36	72
History of Violence	Present	5	10
	Absent	45	90
Age Group	25-35	23	46
	36-45	13	26
	46-58	14	28

Duration of substance abuse

36% of the study participants consumes alcohol for duration of more than 10years, 14% of them consumes alcohol for duration of less than 10 years (Figure 1).

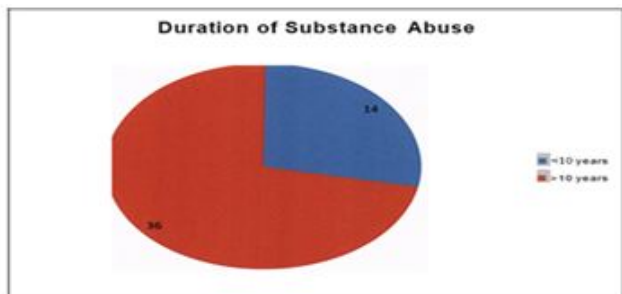


Figure 1: Duration of substance abuse.

Daily quantity of alcohol consumption

Among the study participants 23% consumes less than 360 ml IMFL daily and 27% consumes more than 360ml IMFL daily (Figure 2).

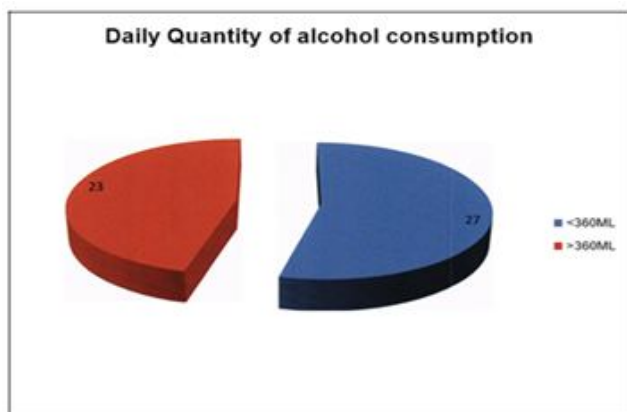


Figure 2: Daily quantity of alcohol consumption.

Prevalence of hostility

EI Scale is used to measure the prevalence and punitiveness of hostility in this study group. All the study participants scored positive for hostile tendency. Further the results showed that around 66% were extropunitive 1.e tendency to harm others and 34% were intropunitive 1.e tendency to harm self.

Prevalence of suicidal intent

Suicidal intent among the study participants were measured using Beck's suicide intent scale. The results

showed 64% to have no suicidal intent or ideation. 36% have positive scores for suicidal intent of which 18% has low intent, 14% medium intent and 4% has high intent to commit suicide (Figure 3).

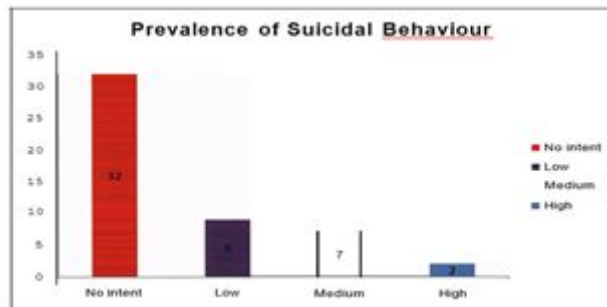


Figure 3: Prevalence of suicidal intent.

Prevalence of violence (intimate and non-intimate)

In the study group 48% has history of intimate physical violence, 38% has history of intimate emotional violence, 28% has history of intimate sexual violence and 10% has history of non-intimate violence (Figure 4). Table 2 shows Association of BECK'S Suicidal intent scale with other variables.

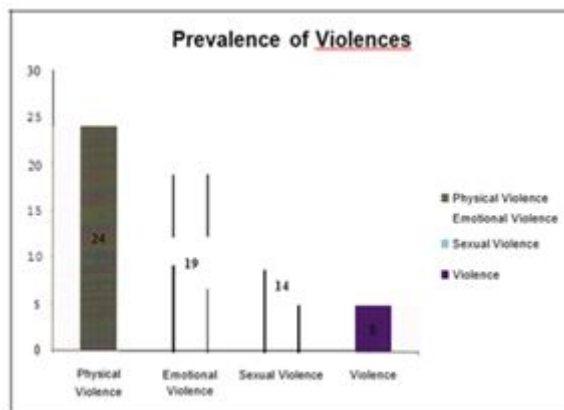


Figure 4: Prevalence of violence (intimate and non-intimate).

Table 2: Association of BECK'S Suicidal intent scale with other variables.

Variable	Group	BECK'S Suicidal intent				P-value
		No intent	Low	Medium	High	
Age Group	25-35	15 (46.9%)	3 (33.3%)	5 (71.4%)	0	0.137

	36-45	9 (28.1%)	4 (44.4%)	0	0	
	46-58	8 (25%)	2 (22.2%)	2 (28.6%)	2	
Duration of substance abuse	<10 years	9 (28.1%)	1 (11.1%)	4 (57.1%)	0	0.172
	> 10 years	23 (71.9%)	8 (88.9%)	3 (42.9%)	2 (100%)	
Daily quantity of alcohol consumption	<360 ml	17 (53.1%)	4 (44.4%)	6 (85.7%)	0	0.137
	>360 ml	15 (46.9%)	5 (55.6%)	1 (14.3%)	2 (100%)	
Age of onset of substance abuse	15-20 years	14 (43.8%)	6 (66.7%)	4 (57.1%)	2 (100%)	0.735
	21-25 years	12 (37.5%)	2 (22.2%)	2 (28.6%)	0	
	26-30 years	6 (18.8%)	1 (11.1%)	1 (14.3%)	0	
Marital Status	Single	4 (12.5%)	0	1 (14.3%)	0	0.733
	Married	25 (78.1%)	9 (100%)	6 (85.7%)	2 (100%)	
	Separated	3 (9.4%)	0	0	0	
EI Scale	Extrapunitive	31 (96.9%)	2 (22.2%)	0	0	0
	Intrapunitive	1 (3.1%)	7 (77.8%)	7 (100%)	2 (100%)	

Chi square

There is significant association between the hostility score and suicidal behaviour in the study group. It is also found that suicidal behaviour is more prevalent in the study group who score high for hostility towards self. The

suicidal intent is high in the study group who has early age of onset of substance abuse, longer duration of alcohol consumption, high quantity of alcohol consumption & elder age group (Table 3).

Table 3: Chi square.

Variables	N	Mean	Std. Deviation
Age	50	38.78	8.397
H Item	50	4.68	1.789
C Item	50	3.42	1.642
R Item	50	3.14	2.09
HCR total	50	11.2	4.342

Risk assessment instruments predict violence with moderate/large effect sizes AUC ~. 783. Using the ROC curve, the cut off 9.50 is found to have high predictive value. There by persons who score above 10 in HCR 20 are predisposed to commit violence in the near future. 10 to 14 - low risk, 14 to 18 - medium risk & >18 - high risk. 48% of the study group has low risk of committing violence in the near future. 14% has medium risk and 6% has high risk to commit or repeat their act of violence.

DISCUSSION

Prevalence of suicidal intent, the results showed 64% to have no suicidal intent or ideation. 36% have positive scores for suicidal intent of which 18% has low intent, 14% medium intent and 4% has high intent to commit suicide. Prevalence of violence, In the study group 48% has history of intimate physical violence, 38% has history of intimate emotional violence, 28% has history of intimate sexual violence and 10% has history of non-intimate violence. 48% of the study group has low risk of committing violence in the near future. 14% has medium risk and 6% has high risk to commit or repeat their act of violence [4-25].

CONCLUSION

The prevalence of suicidal behaviour is higher among persons suffering from alcohol dependence syndrome. Earlier the age of alcohol abuse higher the intent of suicidal behaviour. Persons who consumes high quantity of alcohol found to have high intent of suicidal behaviour. In this study there is no correlation between duration and quantity of alcohol abuse with domestic violence.

LIMITATIONS

It's a hospital based sample and not truly representative of the community, Sample size is limited, Subjects were seen only in their inpatient time period of 7-10 days, & there is no comparative group for the study sample.

FUNDING

No funding sources.

ETHICAL APPROVAL

The study was approved by the Institutional Ethics Committee.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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