Suicide note in the ligature material- a case report

Dr. Mithun Ghosh, Assistant Professor, Subharti Medical College, Meerut, India **Dr. Bhim Singh**, Associate Professor, Subharti Medical College, Meerut, India

Citation: Gosh M, Singh B. Suicide note in the ligature material- a case report. Int J Eth Trauma Victimology 2017; 3(2):42-44. doi: 10.18099/ijetv.v

Article history

Received: August 30, 2017

Received in revised form: Dec 11, 2017

Accepted: Dec 13, 2017 Available online: Dec 28, 2016

Corresponding author

Dr. Mithun Ghosh

Assistant Professor, Subharti Medical College,

Meerut, India

Phone:+919013685397 Email: munish40@yahoo.com

Abstract

Suicide is a leading cause of death among young adults. About a million suicides occur annually throughout the world. A suicide note is often found at the scene. It has been reported that a note was left in 5%-43% of the suicides (1). The content of a suicide note includes apology, shame, guilt, love for those left behind and instruction regarding practical affairs (2). It is an important tool for medico-legal investigation on the manner and circumstances surrounding the death. The victim generally writes them on a paper, notebook, wall, or mirror by means of pen or marker (3). We present a case where a suicide note was recovered from the ligature itself. This method of keeping a suicide note in the ligature is unique and rarely found in the literature.

Keywords: corporal punishment; physical punishment; schools.

© IJETV. All rights reserved

Case Report

An elderly female hanged herself at her home from the railing of the first floor by a saree. The dead body was already removed from the place before the police arrived. She was last seen alive by her husband 3 hours back. Two suicide notes were recovered from her ligature entwined near the knot, which revealed that she was suffering from depression.

At autopsy, she was heavily built and obese with rigor mortis well developed, and hypostasis present in glove and stocking fashion. The ligature mark present was reddish-brown in color, hard, parchmentised and grooved, 32.5 cm in length, obliquely placed, width varying from 2.0 cm to 5.0 cm over the front, sides, and back of the neck (completely encircling the neck) above the level of the thyroid cartilage. The knot was secured tightly at the left side of the neck. Ligature material in the form of multi-colored saree was encircling the neck. Two suicide notes were recovered entwined in the ligature by the police. The ligature and suicide notes were handed over to the I.O. The underlying neck muscles were unremarkable with no fracture of thyroid or hyoid. There were no other injuries present on her body. The brain was congested, lungs were congested and edematous, coronaries of the heart showed around 50%

patency. Stomach was empty. Liver, spleen, and kidneys were congested. Cause of death was given as asphyxia as a consequence of hanging. Discussion:

According to NCRB, the number of suicides in 2013 was 1,34,799, which is less than predicted by the WHO. The NCRB records the police cases only so the fewer number of suicide cases can be explained (2). India has a diverse sociodemographic population so there is variation in the age- and sex-specific death totals, rates and risks and the mode of suicide. Women's greater vulnerability to suicidal behavior is likely to be due to gender-related vulnerability to psychopathology and to psychosocial stressors.

Hanging is one of the leading manners of suicide in which there is a suspension of the body by a ligature material compressing the neck externally, the constricting force being the weight of the body (2). Hanging is always considered suicidal except accidental hanging in sexual perverts, homicidal hanging in lynching and justifiable judicial hanging. In England and Wales, hanging accounts for about 2000 deaths each year and is considered the most common method of suicide (3). In the USA, 92.3% of all suicides were caused by firearms, hanging, and poisoning (4). A report from Canada has also

indicated hanging as the second most common method of suicide after suffocation (5). Home is the most common place for committing suicide and hanging, the most common method. All suicide notes are usually handwritten and a last wish mentioned in about 30% of cases (5).

The Factors associated with suicidal ideation were high depression and anxiety levels, hopelessness and low self-esteem. Factors associated with suicide attempts are separated family background, lower perceived family support and high rates of conduct difficulties. Notes of suicides with a previous history of deliberate self-harm were less likely than notes of suicides without a history of deliberate self-harm to contain the theme "apology/shame". Notes of elderly suicides are more likely than non-elderly notes to contain the theme "burden to others" (5).

Sex differences in asphyxia due to hanging are different in different population. In a study in Shanghai, male hanging was more common than female hanging, with a ratio of 5:2. However, there were more female than male strangulation cases, with a ratio of 13:5 (6). In other studies however the women outnumber men.

Suicide notes are often recovered at the site during these deaths. In a study in Eskisehir city, it was found that 56.5% of all cases had left a suicide letter, 41.1% cases had sent a telephone message to a person or more than one person, 2.4% cases had written notes about suicide and death in social networking sites¹. Suicide notes provide direct information from suicide victims and often are written shortly before the suicide act. In another study, it was found that victims who leave suicide notes do not differ statistically significantly from non-noteleavers in sex, age, family status, psychiatric care, motive, or method (7). This means they are representative of all suicide victims concerning important demographic factors. Leenar's stated that suicide notes are an invaluable starting point for assessing and predicting suicide and parasuicidal behavior. He also mentioned that suicide notes are windows to the mind of the deceased. The majority of suicide note is not addressed to any person, in particular, others are addressed to relatives, spouse, and mother. Most blamed no one for the act (8). The victim generally writes them on a paper, notebook, wall, or mirror by means of pen or marker. Literature also some mentions unique cases like one suicide case by hanging, the victim had written

a note on her palm in mehndi, or henna, at a wedding ceremony three days before the fatal act (9). Similarly, such notes were also recovered written on palm citing reasons to end their lives. It is not clear whether writing on skin rather than on more conventional material suggests that the suicide may not have been planned, or instead that the decedent wanted to ensure that the message was found. Messages on the skin may be slightly different to messages written on other surfaces, as space is limited and pens and markers may not write as effectively (10).



Fig 1. 1st note

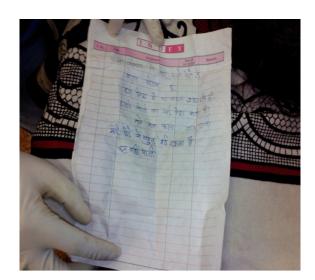


Fig2. 2nd note



Fig 3. Ligature around the neck.



Fig 4. Secured ligature.

In another case, a 39-year-old woman was a housewife who was being physically abused by her husband and committed suicide by ingesting an insecticide. It was observed that on the left leg, a note was written with a pen saying that she could not stand being beaten by her husband on account of the inheritance dispute between him and her elder brother (11).

There is paucity in the literature regarding recovery of a suicide note from the ligature material itself. In this case, it was recovered

entwined in the ligature itself making its position unique and hence discussed.

Conclusion

Suicide notes are an important tool for medicolegal investigation on the manner and circumstances surrounding the death. Suicide is a major public health problem and should be given high priority with regard to prevention and research.

References

- Karbeyaz K, Akkaya H, Balci Y, Urazel B. Analysis of Suicide Notes: An experience in Eskişehir City. Nöro Psikiyatri Arş. 2014;51(3):275.
- Namratha P, Kishor M, Rao TS, Raman R. Mysore study: A study of suicide notes. Indian J Psychiatry. 2015;57(4):379.
- Foster T. Suicide note themes and suicide prevention. Int J Psychiatry Med. 2003;33(4):323–331.
- Bennewith O, Gunnell D, Kapur N, Turnbull P, Simkin S, Sutton L, et al. Suicide by hanging: a multicentre study based on coroners' records in England. Br J Psychiatry. 2005;186(3):260–261.
- Suicide. Org. Suicide Prevention, Awareness and Support [Internet]. U.S. Suicide Statistics. 2001 [cited 2010 Mar 11]. Available from: http://www.suicide.org/suicidestatistics.html
- Ma J, Jing H, Zeng Y, Tao L, Yang Y, Ma K, et al. Retrospective analysis of 319 hanging and strangulation cases between 2001 and 2014 in Shanghai. J Forensic Leg Med. 2016;42:19–24.
- Heinrich M, Berzlanovich A, Willinger U, Eisenwort B. Measurement of cognitive constriction in suicide notes. Neuropsychiatr Klin Diagn Ther Rehabil Organ Ges Osterreichischer Nervenarzte Psychiater. 2008;22(4):252–260.
- Leenars A. Suicide notes, communication and ideation. New York: The Guilford Press; 1992. 337-55 p.
- Behera C, Swain R, Bhardwaj DN, Millo T. Skin suicide note written in mehndi (henna). Med Leg J. 2016 Mar 1;84(1):39–41.
- Austin AE, Byard RW. Skin messages in suicide an unusual occurrence. J Forensic Leg Med. 2013;20(6):618–620.
- Demirci S, Dogan KH, Erkol Z, Gunaydin G. Unusual suicide note written on the body: two case reports. Am J Forensic Med Pathol. 2009;30(3):276–279.