

behavioral sciences

Gathered from the Second Annual Conference of the American Association of Suicidology in New York

GERIATRICS

A role is a must

Suicide is the tenth leading cause of death among the aging in the United States, according to a study by the National Center for Health Statistics.

David Rachlis, field services coordinator of the National Council on the Aging, New York, cites the severity of life's natural problems, the fact that the old suffer far more losses than the young and the inability to handle loss-riddled lives as possible keys to self-destructive drives.

Rachlis notes that the loss of a significant role, such as that of breadwinner or mother to young children, is the hardest psychological situation for the suicide-prone person to bear.

This loss is added to the more concrete losses of physical and mental health, financial security and a shrinking circle of friends and relatives.

SOCIOLOGY

Rat race against suicide

A study of suicides in both literate and non-literate societies shows that societies with a high suicide rate appear to be characterized by a placid, cooperative and uncompetitive style of life.

Prof. Stuart Palmer, a University of New Hampshire sociologist, conducted the study. He also observes that these societies do not stress individualism, but are community-oriented instead.

He finds that those societies with a low suicide rate stress moderate competition and individualism.

Suicide rates increase with age in both literate and non-literate societies.

Suicide in non-literate societies is most frequently carried out without the use of weapons.

In the majority of cases, hanging, poisoning, drowning and jumping from high places were the usual methods.

In about half of the non-literate societies studied, self-condemnation and fears of various kinds were the commonest motives for self-destruction.

PSYCHOLOGY

Someone else to hate

One of the few good things that can be said about warfare is that it decreases the suicide rate.

The decrease holds true for both civilians and soldiers.

Dr. Stephen J. Rojcewicz Jr. of Georgetown Medical School, who has studied suicide rates among various combatant nations, concludes that a major factor in the decrease is the greater social integration resulting from the state of war.

He speculates that patriotism, better economic conditions, a sense of purpose and other social forces combine to cause a decrease in the average citizen's sense of the meaninglessness of life.

According to the author, the decrease in the suicide rate during wartime also occurred in occupied countries and in some neutral countries.

There also appears to have been a low rate of suicide within concentration camps. This may be explained by the strong integration of the inmates into the camp's social structure.

TRANSPLANTS

Human sacrifice

A University of Oregon suicide researcher suggests that opportunities for suicidal persons to donate organs or blood may be one way to conquer their self-destructive tendencies.

Dr. Paul H. Blachly says that it is quite likely that organ donation would be psychotherapeutic for some suicidal persons.

A donation of an organ or blood, he argues, would increase self-esteem, especially if the potential suicide believes that he cannot be loved until he has given love himself in the form of donating an organ. It might also help to relieve guilt, which is so often found coexisting with the suicide drive.

Gift of an organ or blood would tend to diminish egoism and the sense of omnipotent individualism, and it might also counter anomic tendencies by involving the person more in society.

Dr. Blachly cites studies which find that those who donate organs reap lasting psychological benefits in the form of increased self-esteem, happiness and maturity.

He observes that although sacrifice, ranging from financial to human, has been used in most ancient cultures as a means of emotional catharsis, resolving grief and expiating guilt, no modern psychotherapy makes use of sacrifice in its technique.

ENDOCRINOLOGY

Self-destruct hormone

Two scientists are probing the possible connection between an elevated level of a stress hormone called 17-OHCS and the suicidal drive.

The findings are only tentative but a study of the 17-OHCS levels in three patients who showed suicidal tendencies revealed an excess of the substance when compared to the levels in non-suicidal individuals.

The researchers, Drs. Jan A. Fawcett and Donald L. Kerste of the Illinois State Psychiatric Institute in Chicago, caution that no single observation can be relied upon to assess suicide potential.

The hormone, 17-hydroxycorticosteroid, represents the major metabolic breakdown product of the primary adrenal cortico-hormone, cortisol, which is secreted in increased amounts when a person is under heavy physical or environmental stress.

They cited studies that show that a non-suicidal person may have his 17-OHCS level raised when exposed to psychological stress in laboratory experiments.

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