

Case report

Dying together: A report of two-suicide pacts and an overview of the phenomenon

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Introduction:

Death is inevitable, as one who is born, has to die. The death may be due to natural disease or by unnatural means. Suicide is an invited death, a way by which one can cut short the life. Most suicides are solitary and private, but few result from pact between people to die together (1). Suicide pacts are relatively rare phenomenon, particularly in India. It accounts for less than 1% of total number of suicide (2). Herein we are reporting two suicide pacts and summarize the circumstances that surround these pacts with an overview of this phenomenon.

Case reports:

Pact I: On September 25, a 28 year auto-rickshaw driver and his 24 year wife committed suicide by jumping into a city lake at around 5 PM. People who had been at lakeside for evening walk witnessed the incident. The people had rescued the couple and transferred them to hospital but both died. On the side of the lake they found one handbag and footwear. The bag contained a suicide note stating the reason. The reason quoted was the financial difficulty and distress. The male partner signed the note. Autopsy findings were that of death due to drowning.

Pact II: A 24 year male and his 19 year wife were brought to GMCH with history of

consumption of insecticide, and they died during treatment. The couple had consumed poison at home and had left a suicide note. The note was signed by both of them and stated that no one should be held responsible for their demise. The couple was recently married. Since it was a love marriage, they were living independently, separated from parents. The reason for suicide was not mentioned in the note, probably financial worry and hard facts of post married life could be the reason as guessed by the investigating agencies and by neighbors. The clinical, laboratory and autopsy findings were that of death due to poisoning.

Discussion:

Suicide is a type of deliberate self-harm, whereas suicide pact is an agreement between two or more people to commit suicide together. The world health report 2001, estimates that every year one million people worldwide commit suicide, while 10-20 million people attempt suicide (3). In many countries this is the leading cause of death in the most productive age group i.e. in the 25 to 34 years (4). The official suicide rate in India is 9.9/lakh population per year (3). On the other hand, suicide pacts are relatively rare; an epidemiological study on suicide pact in England and Wales had showed that the rate has declined over the

past 35 years (1). However, in India suicide pacts have not been studied systematically.

A related phenomenon is a homicide-suicide episode, in which a person commits murder and then ends his or her own life. Dyadic death is a term that encompasses both suicide pacts and homicide-suicide episodes. Suicide pacts almost always involve people well known to each other, mostly spouses as in the present series or lover or between friends and peer group. However, recently attention has been drawn to these pacts as they had been arranged between strangers who met over the Internet and planned the tragedy via special suicide website. This is in contrast to traditional suicide pacts (2).

In the present series, the couples employed same method, one pair using poison to terminate life and other preferred to drown together. In suicide pacts both members typically employ the same method, a non-violent one, which permitted painless, synchronized death together. Most common method employed is poisoning (1). However,

it was found that if access to violent means is easier, such as firearms in United States, suicide pacts entail more violent method (2). In the stated cases, both couple had left a suicide note. In one case, both partners signed the note and in other case the note bears signature of male partner only. In suicide pacts, the deaths of partners are supposed to be with premeditation and cooperation, without coercion of one partner by the other. However, studies of survivors of pact have shown that constraint is always there. But since reluctance favors survival, the findings cannot be generalized to pacts that prove fatal (1,2). Moreover, the high prevalence of jointly signed suicide notes, and employing the same method for terminating life suggest that there was no coercion. These factors make it unlikely that these deaths were homicides followed by suicide. The phenomenon of suicide pact is a complex one. With context to India, it needs a systematic study in an attempt to evaluate the causes and to identify the vulnerable population at risk. It will help to formulate a policy to prevent these episodes.

References:

- 1) Brown M, Barraclough B. Epidemiology of suicide pacts in England and Wales, 1988-92. *Br Med J* 1997; 315: 286-87.
- 2) Rajagopal S. Suicide pacts and the internet. *Br Med J* 2004; 329: 1298-89.
- 3) Ahuja N. A short textbook of psychiatry. 5th ed. New Delhi: Jaypee Brothers , 2002.
- 4) Arun M, Yoganarasimha K, Nilamadhab K, Mohanty M K, Palimar V. Suicide- an overview. *Medico-Legal Update* 2005; 5:89-92.

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