

SUICIDAL AND NON-SUICIDAL AUTOAGGRESSION IN WOMEN SUFFERING FROM ALCOHOL DEPENDENCE**M.F. Elieva**

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Abstract: The paper describes the characteristics of suicidal and non-suicidal auto-aggressive behavior in women suffering from alcohol addiction.

Keywords: female alcoholism, auto-aggressive behavior, suicide.

INTRODUCTION

Alcohol dependence and associated suicidal and non-suicidal behavior is a serious problem of modern society. Up to 17% of female mortality is, in one way or another, related to alcohol consumption. An intensive (threatening) increase in female alcoholism is noted. Alcoholism in women develops 3-5 times less often than in men [1]. At the same time, according to some data, in recent years there has been a tendency to reduce the difference in male and female morbidity. In particular, it is indicated that if in previous years, among schoolchildren and students, alcohol abuse was more common among young men than among young women, then at present these indicators are equalizing, and in certain youth subpopulations, drinking girls quantitatively exceed drinking boys [2].

MATERIALS AND METHODS

The ratio of women to men among alcoholics in our country is currently at the level of 1:5. A serious risk factor for the development of alcoholism in women of any age is the influence of a spouse who abuses alcohol [3, 4]. In many women suffering from alcoholism, up to 70% of husbands also abuse alcohol.

RESULTS AND DISCUSSION

According to WHO, in different countries from 40 to 60% of autoaggressive actions (suicides, suicide attempts and life-threatening self-harm) are committed by people who abuse alcohol. Against the background of alcoholism, suicides and other forms of autoaggressive behavior are observed 20-60 times more often. In women suffering from alcohol dependence, suicidal behavior, and therefore suicide attempts, are 6 times more common than in male alcoholics, and 37 times more common than in non-drinking women. The most common method of committing suicide is poisoning with drugs or gas [2].

Compared with men, women more often have suicide attempts of a demonstrative-blackmail nature than completed suicide. Due to the short preparatory period, in most cases the most accessible means are used to implement autoaggression. Alcohol dependence in female doctors is the main cause of completed suicides.

The presence of suicides and affective disorders in the family history significantly increases the likelihood of suicide in women and reaches 90%, with alcoholism in the mother it reaches 22%.

Women suffering from alcohol dependence have the greatest suicidal activity in certain periods of life, namely: 20-29 years; at the age of 40-45 years, the greatest number of completed suicides is noted, associated with the loss of former sexual attractiveness. In women over 60 years of age who are dependent on alcohol, suicidal actions are committed against the background of the death of a spouse and have a pronounced affective component [1]. More than 50% of women suffering from alcohol dependence have concomitant psychopathology at the time of committing suicide, and in the overwhelming majority of cases we are talking about depression and personality disorders. An extremely high level of suicidal activity is observed in women in places of imprisonment, compared to male alcoholics.

An increasing body of research supports suicide capability as a construct that differentiates suicide attempters from suicide ideators [1]. Trait impulsivity has been described as acting as a distal risk factor via capability, as individuals with high levels of trait impulsivity can experience more injuries and engage more in suicidal behaviour, and by doing so experience more habituation to pain [2]. Outward-directed aggression can also be linked to suicide capability as outward-directed aggression has been reported as higher in suicide attempters compared to suicide ideators. In a study of characteristics of people who died by suicide in prison, it was found that close to 18% had an episode of agitated behaviour within the week before suicide.

To understand the process from suicidal thoughts to suicide death, it can be especially valuable to also include individuals who have died in suicide and individuals who have survived a high lethal suicide attempt. Research indicates that the lethality of previous suicide attempts predicts lethality of future attempts. A study comparing suicide ideators, suicide attempters of low medical seriousness, and suicide attempters of high medical seriousness found that higher levels of aggression, impulsivity, and mental pain differentiated attempters from suicide ideators. They found communication difficulties to be the only factor that differentiated medically serious attempters from medically non-serious attempters [3]. A systematic review of suicide attempters with different degree of seriousness concluded that the risk factors of interpersonal problems, impulsivity, and aggression can differentiate serious suicide attempts from less serious attempts [4]. However, there are also studies that have found no difference between high lethal suicide attempters and low lethal suicide attempters on the measures of impulsivity and aggression.

A main aim of the current study is to seek an understanding of the relation between impulsivity, aggression, and suicidal behaviour. The study will also add knowledge to the scarce literature on lethality nuances in suicide attempts, and gender differences in suicidal behaviour. Suicide ideators, low lethal suicide attempters, and high lethal suicide attempters will be compared on suicide-related characteristics, clinical characteristics, and measures of aggression and impulsivity. It is predicted that suicide attempters will score higher than suicide ideators on impulsivity and aggression, and it is predicted that men will score higher than women on most measures. It is uncertain whether there will be a difference between low lethal suicide attempters and high lethal suicide attempters so analysis will explore these associations.

CONCLUSION

Thus, alcohol dependence in women and the auto-aggressive behavior associated with it represents a serious medical and social problem and requires further study in the context of both suicidology and drug addiction practice.

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