

Emergency psychiatry – suicide aggression

- Suicide
- Homicide
- Accidents due to confusion delirium dementia
- Medication related (dystonia)
- Medical emergencies associated with psychiatric

### S u i c i d e

Social	Medical	Psychiatric	The event		
Male 3/1 Age 45 and more Support (marriage family protects from suicide) Unemployed Immigrants Cities Durkheim social cohesiveness (egoistic, altruistic, anomic (loss))	Cancer Chronic (dialysis) Pain Causing depression (hypothyroidism Pancreas cancer) Neurological (Dementia CVA epilepsy)	15-30% compared to normal Depression 80% more Schizophrenia 15% more when psychotic and with insight Alcohol street drugs Personality disorders Anxiety (untreated) Genetics	<p><b>Before</b></p> Repeated Thoughts Repeated attempts Plan (letter)	<p><b>The event</b></p> Means determination Cry for help Social context	<p><b>After</b></p> Remorse Apathy Philosophic ideation

### H o m i c i d e

Social	Medical	Psychiatric
Male Age 25-45 Socioeconomic Violence in the family Victim as child Legal police issues	Alcohol and drugs Mental retardation Organic brain disorders Psychomotor epilepsy	Catatonic (random) Paranoid delusions (realted) Manic Personality disorders (frustration) (Antisocial) Impulse control (uncontrolled Psychotic, controlled kleptomania)

Rapist	Victim
Male Age 25-45 Socioeconomic Legal police issues Sadistic Exploit for sexual drive Those think no woman will sleep with them Type of aggression to weak victim	Young females 50% rapist is known 10% more than one rapist Experienced as extreme panic attack fear of dying After: humiliation, guilt, fear, confusion, revenge, rage. Later on PTSD fear from intercourse Vaginismus

