

17 Issues of Suicide and Tokophobia During Pregnancy

Ariel L. Troncoso, MD*, and Kaushal K. Sharma, MD, USC Institute of Psychiatry, Law, and Behavior, PO Box 86125, Los Angeles, CA 90086-0125

After attending this presentation, attendees will learn how pregnancy maybe a suicidal risk factor that can occur early in the first trimester of pregnancy. Tokophobia (fear of pregnancy) is a risk factor along with the psychological, physiological changes during the first trimester. These changes can trigger suicide most commonly by overdose. In obvious causes of death, the reproductive organs are not routinely examined hence suicide during pregnancy may well be under reported.

This presentation will impact the forensic community and/or humanity by increasing awareness that pregnancy is not a psychologically protected time in a woman's life. The first trimester of pregnancy can be as lethal as the third trimester or even the postpartum period up to a year. The prevalence of first trimester pregnancy can vary from 0.02% to 0.02% depending on whether or not the reproductive organs are examined. In completed autopsies, the incidence is higher, 0.2%. So, incidence of early suicide in pregnant women is under estimated.

Pregnancy in general, is considered a protective time in a woman's life. However, pregnancy might worsen psychiatric illness at that time. That is, the pregnant woman might be psychiatrically at risk as medications are reduced or removed during the first trimester, and or the circumstances of the pregnancy might contribute to significant stresses, both physically and psychologically. One contributing illness might be tokophobia (fear of pregnancy). As a consequence, the risk of suicide cannot be overlooked.

All suicidal ideation does not necessarily lead to completed suicide. Usually the focus of suicide in the pregnant woman is during the third trimester and the postpartum period (up to one year after birth). However the knowledge and experience of a woman being pregnant at any time during her gestation, may add stress on multiple levels.

Death from suicide in the year after childbirth is considered the leading cause of maternal death. However, during the first trimester, tokophobia may play a significant role. Suicide during early pregnancy may be related to issues of avoiding embarrassment, perceived ridicule, scorn of being pregnant or having an unwanted pregnancy. Physical issues such as nausea, vomiting, and other complications may be stressors that place a pregnant woman at risk for suicidal behavior.

Completed suicide during pregnancy and up to one year up to 0.2%. In many Coroner's /Medical Examiner's offices after childbirth, have a statistical prevalence range of 0.02% including the Los Angeles Coroner's office, the reproductive organs may not routinely be examined at autopsy unless there is reason to believe that the decedent was pregnant. Thus, current statistics may certainly be an under estimate of the prevalence of 1st trimester suicides.

In those published studies from Coroner's /Medical Examiner's Offices, where pregnancy was determined, the most common method of suicide was a drug overdose rather than the use of aggressive means such as firearms.

Suicide, Pregnancy, Tokophobia