



Pathology/Biology Section - 2014

G50 Trends in Pediatric Suicides in Chicago From 1993 to 2013

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After attending this presentation, attendees will have a better understanding of the incidence and circumstances surrounding pediatric suicide in a busy, urban medical examiner's office during the last 20 years.

This presentation will impact the forensic science community by providing an overview of pediatric suicides in Chicago, which may be useful in determining risk factors and/or prevention strategies for the pediatric population.

According to the Centers for Disease Control and Prevention (CDC), suicide is the third leading cause of death in young people between the ages of 10-24 years old. It is a serious public health concern that is often overlooked. A search of the records of the Cook County Medical Examiner's Office over the past 20 years (1993-2013) identified 285 suicides that occurred in subjects who were age 17 years old and under. The youngest was 9 years old. The mean age was 15.1 years of age and the median age was 16 years old. The cohort was then divided into elementary school age (<11 years old), middle school age (11-13 years old), and high school age (14-17 years old). Among the cohorts studied, the suicides among elementary school-age subjects were 2.8% (n=8). In middle school-age subjects, the occurrence was higher at 15.1% (n=43). High school-age subjects showed the highest proportion of suicide at 82.1% (n=234). The leading cause of suicide in this cohort was hanging (46.7%; n=133), followed by gunshot wounds (38.9%; n=111), and trains striking pedestrians (4.9%; n=14). Single and/or combined drug intoxication and carbon monoxide intoxication via automobile tied for the fourth leading cause of suicide in the pediatric population (1.8%; n=5). The remaining causes of suicide among this cohort included falls from heights (1.4%; n=4), shotgun wounds (1.1%; n=3), drowning (n=2), incised wounds (n=2), automobiles striking pedestrians (n=2), asphyxia (n=1), motor vehicle collision (n=1), jumping from a vehicle (n=1), and thermal burns (n=1). Consistent with national statistics, there was a male predominance with 209 (73%) of the subjects being male and 76 (27%) female. By race, 199 (69.8%) of the subjects were White, 84 (30.2%) were Black, and 2 (0.01%) were other, both of whom hanged themselves. Over this 20-year period, the incidence of suicide in the pediatric population has, for the most part, remained steady (mean incidence = 14.25 cases per year). Peak incidences occurred in 1994 (n=23) and 1997 (n=21). The years 2005 (n=5) and 2006 (n=3) had the lowest rates of pediatric suicide deaths.

Suicide deaths in the pediatric population are a poorly studied area in forensics. Debates regarding the age at which a child can form intent to commit suicide and the most appropriate way to classify the manner of death in such cases are ongoing. This is the first forensic study of pediatric suicide in the Chicago metropolitan area and the intent is to offer unique information for future intervention programs and a basis for forthcoming research.

Pediatric, Suicide, Chicago