

CASE REPORT

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Childhood Suicide: A Report of Four Cases

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ABSTRACT: A study of childhood suicide in individuals aged twelve years or less was performed on the case files of the Office of the Medical Examiner of Metropolitan Dade County in Miami, FL, over the eight-year period from 1977 to the present. Four cases were collected; these are presented in some detail. A discussion then ensues along with a review of pertinent literature concerning this phenomenon.

KEYWORDS: pathology and biology, suicide, children

Suicide in an individual as young as age five years has been reported [1]. While most clinicians, including psychiatrists and pediatricians, are sadly aware of this suicidal behavior in children age twelve years or less [2,3], the forensic science literature is relatively barren of reports on this phenomenon. This article presents four cases in some detail, and then a discussion ensues with pertinent literature and advice to the forensic scientist concerning such cases.

Materials and Methods

Metropolitan Dade County is a community of 5180 km² (2000 miles²) and a 1980 estimated population of 1 600 000. The number of children aged 12 years or less in 1980 is estimated at 260 562, or 16% of the population. The Office of the Medical Examiner is empowered by law to investigate those deaths that occur within the county of violent, unnatural, or unexpected means. Some 3500 cases are investigated annually and of these 2800 are autopsied. For this study, the estimated 2494 suicides that occurred from 1977 through 1984 were investigated, and all suicides in which the decedent was age 12 years or less were collected. A total of four cases are presented.

Case Reports

Case 1

Miss H., an eleven-year-old white female of Hispanic origin, had recently taken the family car without permission and damaged the front end of the car. After being verbally reprimanded, she was taken to the hospital where she died.

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manded, she gave the parents a note written in English (the parents speak Spanish and did not understand the note) dated five days earlier and addressed to her diary indicating her worry at being placed in a school at which she would not "come out," that she was tired of living with so many problems, and that life would be better for her parents without her. She then went to her room as her father went to work and her mother retired to another bedroom for a nap. Later in the day, the father returned home from work, awoke the mother, and found his daughter in her bed with a gunshot wound of the head and a pistol in her right hand. The gun belonged to her father and had been kept in the kitchen. Relevant past history includes a previous suicide attempt by a drug overdose four months prior to demise. She had been under a doctor's care for "sleeping problems" for which she had been given clorazepate (Tranzene®). However, no emotional problems had been noted by that physician. Her parents indicated that she missed her grandfather, who had died from cancer six to seven years previously, and that recently she had been upset over the results of a contest at a youth fair. At autopsy, a contact gunshot wound of the right temple area on the side of the head was noted; no significant natural disease process was noted.

Case 2

Mr. R., a nine-year-old black male, had been with a baby sitter earlier in the day and had been described as being "naughty." His father, upon hearing this, verbally reprimanded him, sent him to his room, and deprived him of watching television. A few minutes later the father discovered the victim hanging from a wooden rod in the closet by the sash of a terry cloth robe. Immediate cardiopulmonary resuscitative efforts were begun; however, upon arrival at a local emergency room the victim was declared dead. Relevant history includes the victim's recently asking the father while watching television, "Why do cowboys hang bad cowboys?" Additionally, while watching a recent Clint Eastwood movie, the victim asked the mother, "Do bad people hang themselves?" At autopsy, a well-defined ligature mark was noted semicircumferentially about the neck. No natural disease process was observed, and toxicologic data consisted of a negative blood alcohol and urine enzyme multiple immunoassay technique (EMIT®) drug screen.

Case 3

Mr. D., an eleven-year-old white male, was found hanging by a rope to the railing of his divorced father's boat where he lives. He had come to Miami from Colorado approximately a year before his demise after being involved in a burglary. Both parents felt that the change in location would be beneficial and remove him from the harmful influence of certain youngsters. Recently, the victim confided in a playmate that he was depressed over his father, who worked nights as an airline mechanic and slept days, not having any time for him. Approximately ten days before his death, the victim telephoned his mother and stated that he wanted to return to her. Suicide was *not* mentioned at that time. At autopsy, a well-defined, semicircumferential abrasion was noted about the neck without significant natural disease process being noted. Blood alcohol content and drug screen were both negative.

Case 4

Mr. Fred S., a twelve-year-old white male, was last seen alive when coming home from school in the afternoon. Later in the day, when his father returned from work, the victim was found in the living room fully clothed with a plastic bag secured about his head with an elastic belt. No sexually provocative literature was noted in the area. Relevant past history included being an honor student and a model boy scout. However, he did have a congenital hypospadias for which his mother pointed out to him he must have surgery or "others would laugh at him when he

showered or took gym." Immediately prior to his death he was planning on going on an outing with the Boy Scouts. Relevant scene investigation noted "play doctor" prescription pads and related paraphernalia with the words, "Don't look at Joey," "Accidentally looked at Joey and fainted," and under treatment prescribed, "Killed Joey." At autopsy there were multiple congenital anomalies including the hypospadias along with bilateral pulmonary congestion and edema. Blood alcohol content was negative as was a urine EMIT® drug screen.

Discussion

Suicide in childhood is rare in Dade County, accounting for 0.16% of the suicides during the past 8 years with an estimated average annual occurrence of 0.2 per 100 000 population. Estimates in other studies [4] of the occurrence of suicide in children have been 0.4 per 100 000 population. However, suicidal ideation in childhood is probably much higher and has been estimated as involving 33% of all outpatient child psychiatry visits in some regard [5]. While there may be many reasons for such variation in rates, one reason may be the lack of reporting or the reluctance or both on the part of forensic pathologists to classify a case as a suicide when the victim is a child. However, the concept of death and suicide is very real to children [1-3, 5, 6]. While several theories have been advanced, Toolan [1] proposes five reasons or dynamics for suicide in childhood: (1) anger toward parents, (2) a manipulative way to gain love, (3) a signal of distress, (4) a reaction to feelings of inner disintegration, and (5) a desire to join a dead relative. All of these parameters are noted in the previous cases.

For the forensic scientist, there is a need to recognize that childhood suicide can occur. Axiomatically, as the previous cases demonstrate, there is a need for careful scene investigation and autopsy correlation. Examination of the location for notes, diaries, or play items (as in Cases 1 and 4) for depression or intention of actions may be important clues in understanding a child's action. Obtaining information from playmates is also important, as is interviewing family, neighbors, school teachers, and personal physicians. Additionally, establishing a rapport with forensic psychiatrists in one's jurisdiction may prove invaluable in interpreting a child's activity immediately before demise (for example, Case 2 and movie influences).

While psychiatrists continue with new theories concerning childhood suicide [7] it is for the forensic scientist to recognize its occurrence. Hopefully, such awareness can avoid future tragedies.

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