

Case Report

Oral Heroin Overdose in a Non-Addict Woman; A Very Rare Method for Suicide Attempt

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Abstract

Suicide may be regarded as an intentional act of one's own death. The most important reasons of committing suicide are defined as: serious depression, bipolar disorder, socioeconomic reasons, low education, distress and substance abuse. Family conflicts and especially spouse's disagrees are among the main causes of this disorder. Suicide is an act of conscious ending one's live and it is derived from parameters. In the present investigation, a case study is described regarding the related issues. We introduce a 26 years old patient who committed suicide by eating 5 grams of oral heroin. In individuals with heroin dependency this is not a well-known method for suicide and based on investigated articles, committing suicide with oral heroin is rare.

Introduction

One of the major socio-medical issues around the word is suicide [1]. In this regard we may state addiction disorder as a regular psychiatric problem [2]. In individuals with heroin dependency this is not a well-known method for suicide and based on investigated articles, committing suicide with oral heroin is rare. This type of suicidal attempt is not mentioned in articles. Authors ignore this way because of two reasons. First of all, it is reported that patients are aware that heroin is a non-lethality suicide way that could be done. Secondly this way of suicide is not more often mentioned in the past literature. Heroin decrease the serum cholesterol and HDL level and accordingly it might have a relation with committing

suicide [3]. However, the debate on relationships between cholesterol and suicide is open and longitudinal studies on a larger sample of patients are needed to further clarify this important issue [4]. It is said that 15mg of morphine is approximately equal to 5mg of heroin taken orally. Morphine's oral bioavailability is tremendous ranging from 20 to 40%; during oral consumption of heroin the main volume of it approximately 40 to 70% is absorbed; however before reaching the brain, it may result in the liver's first pass metabolism and deactivated into morphine. Heroin intake leads to significant morphological changes in the liver tissue such as vesicular changes, fat changes, chronic hepatitis, and cirrhosis. In this sense, it is noted that heroin is a morphine's prodrug; however, the exact mechanism of it is not

completely discovered [5,6]. Based on investigated articles committing suicide with oral heroin is rare. In individuals with heroin dependency this trend is not a well method for suicide; yet in non-dependent individuals this may result in serious consequences. The present study tries to investigate the physical, psychiatric and psychological effects in this regard.

Case Presentation

A 26 years old patient is selected for this study. She is a married woman having continues conflicts with her husband who finally committed suicide by eating 5grams of heroin orally. She had a record of this act since her socioeconomic, low education, and distressed status. She was referred to a clinical center for treatment. Even though it was expected some physical problems such as low level of alertness observed; her examination routines were all normal and although she was depressed and hopeless there was no sign of cardiac disorders. Her examination revealed the following features: dry mouth, mild dilated pupils, psychomotor retardation, dry mouth and feeling heaviness in hands and feet. She was depressed with conflicts and marital quarrel with her husband that was mainly stemmed from addictive behavior of her spouse. It is excepted if this way of suicide takes place one more time some of neurological disturbance will be observed that is inevitable and irreversible.

Discussion

Suicide is act of conscious ending one's live and it almost derived by some certain parameters like frustration or mental disorders, depression, bipolar disorder, schizophrenia, and serious problems related to the addiction to alcohol or drugs. Suicide is considered as a main cause of death between youth especially individuals under 35 years old. It is asserted that the rate of suicide is 3 times in women than men [1]. Two different physical and chemical methods are shown regarding committing suicide; physical method is associated with causing some sort of malfunctioning in respiratory system or central nervous system; chemical method is related to elimination of biological processes like cellular respiration [7]. Moreover, some actions like hand-cutting, using potassium cyanide, cases of poisoning, taking opiate, among other similar routines are considered as some common approach regarding suicide. Opiate, as the common routine in this respect, divided into different kinds and with different effects, like opium, heroin, and methadone. It is worthy to note that consumption of heroin and methadone increase risk of respiratory depression and death. In addition, eating 2 to 3 teaspoons of opium alone or with alcohol may result death. Heroin is one of the strongest and the most destructive drug in the world [8]. Heroin is a powder-like substance with usually white or brown color. If a person with 75kg consume more than 75 to 375mg of heroin it may lead to death. The effects of heroin is feeling joy for a short time, and then drowsiness, hot body, dry mouth, and feeling heaviness of hands and feet. It is because disruption of nervous system. After a long time consumption

serious effects would gradually revealed. These effects are as follows: blood lining damage with vein's injury, symptoms of different complications in other parts of the body like liver, lung, testis, ovary, and etc. Decreasing function of the brain's respiratory system is among dangerous aspect of heroin that may cause shortage of breathing and finally death because of the brain's inadequate supply of oxygen [9]. A study that performed by Ali Ghaffari in 2010-2011 showed that opium and heroin may suffer from this shortage, especially patients dependent on heroin, comparing opium dependency, suffer more from mental disorders and therefore need more attention [10]. The above mentioned patient despite taking 5gm of heroin did not experienced any complication that may be regarded as her history of consumption. It is worthy to note that heroin comparing to new chemical drugs like methamphetamine is considered as a traditional substance with less lethal effects [10].

Conclusion

The suicide attempt by oral heroin use is a very rare method for suicide that all patients should aware it. Although the physical changes were expected but all the routine experiments were normal and pupil and alertness changes were not observed. A growing body of data that was gathered of this case hypothesizes the possibility of woman's aggressive attitude toward substance. Our hypothesis of psychoanalytical background showed considered case had depression disorder because of her spouse addiction. That causes her aggression toward substance and she knew substance as a problem in her life. One of her unconscious goal may be putting down this disaster. She had dysfunctional mechanism and was not psychological minded.

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