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Corona-associated suicide – Observations made in the autopsy room



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Dear Editor,

Suicides are the largest group of violent deaths worldwide. Approximately one suicidal death per hour occurs in Germany [1], and accordingly, suicidal deaths are regularly examined in forensic autopsy practice. Psychiatric patients with i.e. depression or schizophrenia are at significantly higher risk of committing suicide than the general population [2].

The current Corona pandemic presents the world with unprecedented challenges. Given the massive restrictions in social and economic life with ensuing psychosocial stressors leading to psychological decompensation, an increase in suicides is likely and was currently reported in the U. S. [3].

On March 22nd, 2020, the German capital Berlin released far-reaching restrictions on public life. Apart from suicides that were not related to Corona pandemic lockdown, until now (May 29th, 2020), eleven suicidal deaths associated with the effects of Corona pandemic lockdown underwent autopsy in our institute. Association of the suicidal act with the Corona pandemic lockdown was based on the results of the content of the prosecutor's investigation files, including farewell letters and police interviews with relatives. Methods of suicide were hanging (n = 5), falling from height (n = 5), and train suicide (n = 1). All eleven cases suffered from pre-existing mental peculiarities, e.g. depression and hypochondriacal delusion with fear of CoVid-19-disease, but none of the cases was proven postmortem as being infected with Sars-CoV-2. The effects of the lockdown as well as the media omnipresence of the topic with partly apocalyptic overscription and statements made by medical experts out of context were regarded as triggering the decision to commit suicide.

External circumstances and personal experience of rapidly changed social and private circumstances with an uncertain outcome may have the potential to cause psychological symptoms and to intensify pre-

existing psychiatric illnesses, known as “low uncertainty tolerance” or “uncertainty intolerance”, especially in patients with (mental) health concerns [4].

Particularly in (pandemic) times of crisis, special attention must be paid to vulnerable patient groups – not only those susceptible to SARS-CoV-2 (higher age, comorbidities), but also to mentally unstable patients. This results in great social responsibility. Not only the fear of CoVid-19-disease, but also the social and economic effects of the pandemic might affect future suicide rates. We propose the shortened term “Corona Suicide” for forthcoming similar cases of suicide due to Corona lockdown effects with or without pre-existing mental disturbances. Forensic medicine was and is a mirror of our society.

Yours sincerely,

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