

Anguish... the pain of death: predictors of suicidal ideation

Opinion

About 800 000 people worldwide commit suicide every year, which means one suicide every 40 seconds.¹ It is in Europe that the highest suicide rates are to be found (14,1 for every 100 000 inhabitants), followed by Southeast Asia (12,9), Western Pacific (10,8), America (9,6), Africa (8,8) and lastly Eastern Mediterranean (3,8). Within European statistics, Portugal is below average, yet it is still above the world average. The data from the Direção Geral de Saúde, Portugal, in recent years has shown a continual increase in the number of suicides,^{2,3} presenting a rate of 13,7 suicides per 100 000 inhabitants in 2015 for Portugal and a worldwide rate of 10,7 (WHO, 2017). As such the study of suicidal ideation becomes pressing and fundamental to the understanding and prevention of suicidal behaviour.

Suicide was defined by the WHO (1984) as the process to terminate one's own life, intentionally and premeditatedly initiated and prepared, with awareness of the true motivation towards the act and previous knowledge of the outcome.^{4,5}

Suicidal ideation is regarded as a preliminary state that precedes suicidal behaviour and it refers to self-destructive thoughts and the devaluation of life. These thoughts are the first fundamental indicators of suicidal risk most commonly accepted in the scientific community.⁶⁻¹⁰

Suicidal ideation is accompanied by severe emotional suffering and can result from the interaction of several other factors, psychological, social, cultural and emotional.^{7,8}

Nonetheless, there is a consensus in the literature that refers to depressions, despair¹¹⁻¹³ and anguish¹⁴ as the most prevalent psychological variables in the act of suicide.

Hopelessness refers to the complex affective, psychological and emotional tendency of a person that results in a profoundly negative expectation when regarding the future¹⁵ and it is defined by Beck et al.,¹¹ as "a system of common cognitive schemes whose denomination are negative expectations on the future".

Brás¹⁴ on the other hand regards sadness as an emotion experienced when there are experiences that lead to maladjustment, which may impair life strategy and require reflection on harmful events. Anguish is the physical sensation you feel when you are sad. This state, characterized by an apathy of soul, exists for the person to enter an introspective process in the attempt to find a meaning or response to the disturbing events so that he may avoid them in the future. In this state people do not react to stimuli that disturb the introspective process. In the state of anguish, people experience sensations of low-reactive energy depletion, calling into question the value they normally attribute to their own needs or even to their own lives.

The author also considers that the greater the degree of sadness, the greater will be the degree of anguish experienced. Rarely, the individual feels an anguish that he can not bear. Anguish and sadness are normal reactions to the events of life and, as a rule, no normative experience causes death or desire.¹⁶ However, there are mental processes that cause the individual

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to desire his death, surpassing the human nature process of protecting life. This phenomenon, of suicidal ideation, happens when an individual can not withstand the anguish felt. In a state of extreme distress, the mind, in an attempt to seek the relief of pain, often finds only one solution: to leave the body that suffers. This thought can become a strong obsession of physical release from pain, the only thought being to end life, or turn off the body. According to Brás¹⁶ this mental process is called the Cyclic Disturbance of Distress and is due to the wrong emotional management of a negative event. When the Human Being feels an extreme anguish caused by an emotion of mild sadness, a wrong and exaggerated correspondence of a physical state to an emotional state is created, causing the person to react to events of mild sadness with extreme anguish. "In these cases, those who suffer, rationally do not identify the cause that causes such anguish. To complete this cycle of disturbance, it becomes necessary to understand the symbiosis between the body and the mind, where the mind powers physical states, and physical states also potentiate mental states, becoming an exponential vicious cycle".¹⁶ So if it is true that someone who is sad feels anguish, the anguish itself also adds to the sadness. Only in the Cyclic Disturbance of Anguish this mental process is dysfunctional because the symbiosis between body and mind has a dysfunctional connection because physical sensations are amplified in their correspondence with the mental perception of sadness.

Through the study of the literature, one becomes aware that there are fundamental variables that exert influence in suicidal ideation that can be understood as symptoms, as well as consequences of depression and predictors of the risk of suicide, and as such deserve the utmost attention by the scientific community.

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Conflict of interest

The author declares that there is no conflict of interest.

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