



COMUNICAÇÃO BREVE

“Psychological Biopsy”: Re-reading the concept, a strategy for prospective evaluation

“Biópsia Psicológica”: releitura do conceito, uma estratégia de avaliação prospectiva

“Biopsia Psicológica”: Relectura del concepto, una estrategia para la evaluación prospectiva

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Abstract

Introduction: To face the topic of death as a natural consequence of life is not easy for many persons, and circumstances become more complex when suicide is brought into the picture. Objective: this brief communication presents a build of a questionnaire about suicidal attempt called “psychological biopsy”. Methods: In the worldwide literature there are no consistent definition of the term “psychological biopsy” according to the search carried out in several databases (PubMed, SciELO, Bireme, PsycInfo, Web of Science, Google Scholar, Embase, SCOPUS, LILACS or BVS Psicologia). Results: questionnaire constructed proposes to investigate suicidal intention, that is, to carry out a psychological biopsy. Conclusion: The psychological biopsy was designed to produce a diagnosis of attempted suicide in order to complement information needed to qualify the emotional disturbances of the person.

Keywords: Psychological; Biopsy; Suicidal ideation

Resumo

Introdução: Enfrentar o tema da morte como uma consequência natural da vida não é fácil para muitas pessoas, e as circunstâncias se tornam mais complexas quando o assunto é suicídio. **Objetivo:** essa comunicação breve visa apresentara construção de um questionário sobre intenção suicida chamado “biópsia psicológica”. **Métodos:** Na literatura mundial não há uma definição consistente do termo “biópsia psicológica” conforme busca em diversas bases de dados (PubMed, SciELO, Bireme, PsycInfo, Web of Science, Google Acadêmico, Embase, SCOPUS, LILACS ou BVS Psicologia). **Resultados:** o questionário construído propõe investigar a intenção suicida, ou seja, realizar uma biópsia psicológica. **Conclusão:** A biópsia psicológica foi projetada para produzir um diagnóstico de tentativa de suicídio, a fim de complementar as informações necessárias para qualificar os distúrbios emocionais da pessoa.

Palavras chave: Psicológico; Biopsia; Ideação suicida

Resumen

Introducción: Para muchas personas, enfrentar el tema de la muerte como una consecuencia natural de la vida no es fácil, y las circunstancias se vuelven más complejas cuando se pone en evidencia el suicidio. **Objetivo:** Esta breve comunicación presenta un cuestionario sobre un intento de suicidio llamado “biopsia psicológica”. **Métodos:** en la literatura mundial no existe una definición coherente del término “biopsia psicológica” según la búsqueda realizada en varias bases de datos (PubMed, SciELO, Bireme, PsycInfo, Web of Science, Google Scholar, Embase, SCOPUS, LILACS o BVS Psicología). **Resultados:** el cuestionario construido propone investigar la intención suicida, es decir, realizar una biopsia psicológica. **Conclusión:** La biopsia psicológica fue diseñada para producir un diagnóstico de intento de suicidio con el fin de complementar la información necesaria para calificar los trastornos emocionales de la persona.

Palabras clave: Psicológico; Biopsia; Ideación suicida

Introduction

According to data from the Pan-American Health Organization/World Health Organization¹, about 3000 persons kill themselves every day, meaning almost 1,200,000 per year. Calculations are that for each person who in fact takes their life, 20 or more make an attempt. Also, according to PAHO/WHO (2018), the majority of the more than one million deaths per year could have been prevented. It is therefore essential to deal with prevention and to articulate an efficacious care net.

To face the topic of death as a natural consequence of life is not easy for many persons, and circumstances become more complex when suicide is brought into the picture. Various researchers on the topic study why some people decide to take their own lives while others, in similar or worse situations, do not^{2,3}. In order to deepen our understanding in this area, certain procedures of research have been developed over time, one of the tools being a "psychological autopsy", a term coined by Edwin Shneidman in the 1960s. The tool is used in various contexts, including clinical contexts, as well as in legal evaluations and research on suicide⁴. However, when we come across the term "psychological autopsy", applied to patients who actually died by suicide, we also searched in the literature the expression "psychological biopsy" as an investigatory method used for patients who survived one or more suicide attempts. This communication represents an attempt to construct a formal definition of the term "psychological biopsy".

Method

A literature search was conducted in the databases: PubMed, SciELO, Bireme, PsycInfo, Web of Science, Google Scholar, Embase, SCOPUS, LILACS or BVS Psicologia, using the term "psychological biopsy" (last date of the search 31/12/2018). No complete definition of the term "psychological biopsy" was found. Therefore, this communication represents an attempt to construct a formal definition of the term. Although "psychological biopsy" was used by Matilda McIntire in 1973⁵, no indication was found as to where the expression came from in the databases. McIntire (1973) presents only a table with a model of evaluation of the emotional and suicidal thoughts that the author calls "psychological biopsy"⁵.

Results and Discussion

An autopsy is a medical procedure carried out on dead bodies to examine the cause of death of the subject, whereas a biopsy is a medical examination involving tissues of living persons in order to examine diseases. These are the basic concepts to explain the term in question.

A psychological biopsy, on the other hand, was defined by the authors here as a psychological interview with a qualitative nature. It makes it possible to enter into the history of the subject, where the chances of a deeper understanding of the act of suicide could be more clearly revealed, thus allowing professionals broader access to the psychic functioning of such persons. A psychological biopsy has the objective of identifying traumatic stories, suicidal ideas, previous suicide attempts, knowledge of lethality, the method, self-aggression and other aspects of psychiatric suffering that can be clarified with persons who survived attempts to take their own lives.

In a study carried out in Spain, deaths by suicide were investigated based on statistical data obtained

from official records as well as from the use of the technique of psychological autopsy^{1*} with survivors of suicide (persons who saw their life change through the loss of a loved one by suicide). The results suggest that among the psychiatric antecedents of the evaluated group, the depressive trend was the most prevalent⁴.

A study of the Vanessa Longaray et al., (2017) carried out at the morgue of the Medical-Legal Department of the General Institute of Expertise (IGP), an autonomous organ of the Secretary of Public Security of the State of Rio Grande do Sul, studied 21 cases of suicide using psychological autopsy. The results suggest that deaths occasioned by suicide represent an opportunity not only to study the biology of suicide, but also the most serious expressions of the various associated mental traits that precede suicide⁶.

Actions of attempted suicide are related to multiple factors such as mistreatment in infancy, sexual abuse, physical negligence, depression, weak social support, loneliness and impulsivity. But even discrete forms of abandonment due to separated families may contribute to risk of suicide⁷. One exploratory Brazilian study at the University Hospital of Santa Maria, in Rio Grande do Sul, showed that patients admitted after suicide attempts presented aspects of aggressive profiles⁸.

A study of the Alec Roy (2011) carried out in the United States shows that a combination of a history of trauma and family suicidal behavior including a significantly higher incidence of traumas in infancy, was associated with a higher risk of attempted suicide. Higher scores from both sexes were obtained from patients with attempted suicides than from those who had never attempted suicide. Of the 281 attempts studied by Roy, 79.1% showed positive results for traumas in infancy. These showed higher occurrence of attempted suicides than those who did not show trauma in childhood. Another finding was that cases of bipolar patients combined with infantile sexual abuse were successful the first time they tried to kill themselves, as compared to patients with the same pathology but without a history of childhood trauma⁹.

When a child undergoes adversities during their vital cycle, such as situations of sexual abuse, negligence, violence or traumatic experiences, this fact can unleash intense mental suffering and a predisposition for a series of mental crises and other problems in adult life, leading to an increase in the risk of suicide. A master's research of the Cleonice Zatti (2017)¹⁰ which investigated patients in situations of crisis following attempts at suicide at the Emergency Treatment Hospital in Porto Alegre, RS, showed results that indicate an important association between child traumas and suicide attempts in adult life. This reinforces the relevance of adopting inventive and therapeutic actions related to treatment during child development as an important fact in reducing suicide.

Most societies show preconceptions in treating the topic because suicidal acts are considered unnatural. Many health professionals, for example, present various counter-transference feelings towards suicide patients, such as irritation and fear. The questionnaire developed by Zatti and her professor adviser Lucia Machado in 2017 had the objective of investigating aspects related to suicidal intentions. It was thus applied in order to

^{1*} This is a post-mortum investigation tool with the objective of analyzing, retrospectively, the profile of death by suicide. It consists of an interview carried out on the basis of secondary thoughts of informers closest to the victim, certificates, medical exams and reports.

psychologically evaluate patients who had tried to kill themselves. To ask someone about suicidal thoughts does not provoke reactions. On the contrary, it alleviates and treats them².

The questionnaire constructed proposes to investigate suicidal intention, that is, to carry out a psychological biopsy. Some questions were drawn up on the basis of the investigation of suicidal behavior from the master dissertation of Zatti, 2017¹⁰, and were therefore suggested in this communication. The following scales were also taken as a basis: Psychological Biopsy (in English) by McIntire (1973)⁵, Beck Depression Inventory (BDI) (also in English) by Gorenstein & Andrade (1998)¹¹, and Semi-Structured Interview for Psychological Autopsy (*Entrevista Semiestruturada para Autópsia Psicológica*) (ESAP) by Werlang & Botega (2003)³.

Based on the above, we sought to present suggestions for questions about how to deal with suicidal behavior.

Table 1. Psychological biopsy: Questionnaire on suicidal intention	
<u>Psychic traumas</u>	Loss, either historical or recent, of a parental figures during infancy? If yes, what happened?
	Did you ever suffer any trauma that left marks?
	What did you do to deal with this? What thoughts came up during this period?
<u>Emotional disturbance</u>	Feel helpless?
	Feel alone? Who offered support?
	Did you feel abandoned?
	What are your future projects?
<u>Suicidal intentions</u>	Did you ever think about suicide?
	Were you aggressive to yourself? Did you cut yourself?
	Have you thought about death in recent weeks?
	If you have ever tried to kill yourself, how long ago was that? Why did you do that? Did you leave a note, or telephone someone? What did you think about not having died?
	Did you know how to evaluate if the method would kill you?
<u>Fantasies and concepts about death</u>	Did you imagine that this situation would provoke some kind of impact on other people? What type of impact or sentiment would you feel it would provoke?
	If you ever attempted suicide, did your view of things in the world become different since then?
	Do you think that one or another person would be unable to live without you?
	What is the worst thing you ever thought about doing? Do you identify a motive? What?
	What do you think would happen if you committed suicide?
	If you died, what do you think would happen afterwards?
	Did you feel that dying would be like sleeping forever?
	After someone dies, do they know what is happening to those who are still alive?
When someone dies, do their thoughts die too?	

Conclusion

It should be noted that these questions in the “psychological biopsy” serve as a compliment to an investigation about intended suicide. For further information, they should be accompanied by other diagnostic tools. The psychological biopsy is designed to produce a diagnosis of attempted suicide in order to complement information needed to qualify the emotional disturbances of the person.

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