

# EDITORIAL

## FROM INCANDESCENT BEGINNING TO AN ABYSMAL END: RISING SUICIDE NUMBERS AMONG MEDICAL STUDENTS

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February 8<sup>th</sup>, 2019, dawns with excruciating melancholy, informing the suicide of two more medical students. Yousaf Pirkani and Tasneem Ahmad are the latest victims along with three other medical students to depart us just in the last six months due to suicide. Life of a medical professional or a student can be particularly difficult in terms of emotional drainage and physical toll, however, the mind is forced to ponder over the reasons for this recent resurgence of suicide among medical students.

Suicide and depression go hand in hand. The prevalence of depression among medical students has been noted to be significantly higher than general population with figures of 27.2% for depression and 11.1% for suicidal ideation, around the world<sup>1</sup>. These figures are even higher as we look at the replication studies in local population with suicidal ideation 12 months prevalence as high as 35.6%<sup>2</sup>. These numbers speak volumes of how under-reported and under-identified depression, and thereby suicidal ideations, may be among medical students in Pakistan.

The nature of medical education has always been such that it has caused concerns over- burdening the students excessively. A higher level of perceived stress was reported by the students<sup>3</sup>. The main stressors were related to academic and psychosocial domains<sup>3</sup>. This becomes even more of a problem when the students in private medical colleges are inducted at a lower merit and therefore may not have the same intellectual capacity to perform equally as well as students in high merit inductions of public sector medical college, thereby, rendering a greater level of academic stress to them. Moreover, it is a common perception that all private medical students come from affluent families and failure/retention does not cause any significant financial burden onto their families. This may not always be the case and some parents put themselves in exceptionally dire circumstances to pay for their children's medical education. The extremely high cost of study confers an additional burden on such students to perform, at times, against all odds.

Substance abuse, another predictor of suicide, has been on a steep incline among medical students. It is one of the most common coping mechanisms used by medical students to relieve them of stress and for

recreation<sup>4</sup>. Ease of access, knowledge of drugs and hostel living seem to be the main culprits.

Bullying is another, under-rated, cause of significant stress among medical students. Hostel living, shared by medical students of all years, make certain student particularly susceptible to different forms of bullying and therefore predispose them to psychiatric problems, even self-harm and suicide. Close monitoring of medical students in their living quarters can offer some amelioration.

Tyrannical and mistaken ambitions on part of parents coupled with identity crisis also seem to go a long way into creating a persistent and agonizing state of emotional conflict among medical students that may lead to depression and suicidal ideation.

Recent research into suicide has shown that suicide may not always be a corollary of a longstanding and diagnosable psychiatric disorder and may have other mediators particularly in instances where suicide presents as unexpected and uncanny which should inspire more robust investigation into the subject.

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