



Socio Demographic Profile of the Poisoning Cases in Kashmir Valley

Farhana Bashir¹, Mushtaq Ahmad Rather^{*2}, Bashrat Salem³, Abdul Hamid⁴, SM Kadri⁵

ABSTRACT

A retrospective study of poisoning cases admitted in ICU [Department of Anaesthesiology and Critical Care GMC Srinagar] from Jan 2006 to May 2014 was conducted to evaluate the socio demographic variables and type of poison consumed in these cases. Organophosphorous poisoning cases were predominant, amounting to 394 cases. Maximum cases (281) were in the age group of 18 to 35 years. Female predominance was seen in the study population. It was observed that unmarried people (294) had high incidence of poisoning as compared to married people (150). Most of the cases admitted in ICU were from south zone (204) which had a population of 2,328,950 as compared to central (129) and north (111) zones of Kashmir that had a population of 1,250,173 and 2,573,169 respectively.

Keywords: Organophosphorous Poisoning, Socio Demographic Variables

INTRODUCTION

Poisons are subtle and silent weapons that can be easily used without violence and often without arousing suspicion.¹ Organophosphate based pesticides are widely used and have emerged as the major contributors to ill health associated with pesticides worldwide. Organophosphate Poisoning (OPP) are the most common suicidal poison in developing countries and mortality continues to be high. Most of these poisons are usually ingested with a suicidal intent.² Because the organophosphorous compounds are readily available, relatively cheap and have a rapidly lethal action even in smaller doses, they are widely used as suicidal poisons.³ The various factors that can be held responsible for self-poisoning are emotional disturbances, chronic diseases, loss in the business or failure in examination. While as accidental poisoning occurs mostly due to bites and stings and in children.^{4,5}

A study conducted in Kashmir valley from 1994-97 showed an increasing incidence of OPP in the valley particularly from areas having more apple orchards, females being more commonly affected than males.⁶

Although extensive data is available regarding the pattern of poisoning in India, there is often little information regarding the victim profiles in Kashmir. This study aimed to analyse the socio demographic variables of poisoning cases in the valley.

MATERIALS AND METHODS

The study was conducted in the Department of Anaesthesiology and Critical care SMHS Hospital Srinagar. Records of all the cases of poisoning admitted in ICU SMHS hospital from Jan 2006 - May 2014 were analysed. All the information was recorded on a specially prepared proforma, which included age, sex, marital status, residence and nature of poison consumed. Analysis was done in the form of percentages and proportions.

RESULTS

In the study, a total of 444 cases were analysed in nine years from Jan 2006 to May 2014. It was observed that, out of 444 cases, 394 cases (88.78%)

GJMEDPH 2014; Vol. 3, issue 6

¹Resident Specialist, Department of Anaesthesiology and Critical Care GMC Srinagar

²Senior Resident, Department of Anaesthesiology and Critical Care GMC Srinagar

³Professor and Head, Department of Anaesthesiology and Critical Care GMC Srinagar

⁴Professor, Department of Anaesthesiology and Critical Care GMC Srinagar

⁵Epidemiologist, Jammu and Kashmir Health Services

*Corresponding Author:

Mushtaq Ahmad Rather

mushtaqahmad767@gmail.com

Conflict of Interest—none

Funding—none



were due to organophosphorus poisoning making it the predominant poison consumed.

Table 1 Type of Poisoning from Year 2006 to May 2014

Year	2006	2007	2008	2009	2010	2011	2012	2013	2014 (Jan. – May)	Total (%)
Organophosphorous (%)	24	34	36	42	60	82	60	42	14	394(88.78)
Others (%)	0	4	6	10	6	6	8	8	2	50(11.26)
Total cases	24	38	42	52	66	88	68	50	16	444

Overall females (316) were more in number as compared to males (128). The female male ratio was 2.46:1. Unmarried (294) cases were more in number than married cases (150). Out of 444 cases female

preponderance were more to males with a ratio of 2.46:1. Similarly unmarried to married cases had a ratio of 1.96:1.

Table 2 Demographic Profile of Patients from Year 2006 to May 2014

Year	No. of cases	Males (%)	Females (%)	Married (%)	Unmarried (%)
2006	24	10(41.67)	14(58.33)	10(41.17)	14(58.33)
2007	38	8(21.06)	30(78.94)	16(42.11)	22(57.89)
2008	42	8(19.05)	34(80.95)	10(23.81)	32(76.19)
2009	52	18(34.62)	34(65.38)	30(57.70)	22(42.30)
2010	66	18(27.28)	48(72.72)	14(21.22)	52(78.78)
2011	88	26(29.55)	62(70.45)	28(31.82)	60(68.18)
2012	68	20(29.42)	48(70.58)	24(35.30)	44(64.70)
2013	50	14(28.0)	36(72.0)	16(32.0)	34(68.0)
2014 (Jan - May)	16	6(37.5)	10(62.5)	2(12.5)	14(87.5)
Total No. of cases	444	128(28.83)	316(71.17)	150(33.79)	294(66.21)

Age group ranging from 18 years to 35 years showed the maximum cases (63.28%). Maximum cases

belong to age group of 18 to 35 years and minimum cases belong to age group above 50 years.

Table 3 Age Wise Distribution of Cases

Age Group	2006	2007	2008	2009	2010	2011	2012	2013	2014 (Jan. – May)	Total (%)
<18	4	10	12	6	14	22	18	2	3	91(20.45)
18-35	16	22	26	38	36	54	39	40	10	281(63.28)
35-50	4	6	2	4	10	8	7	6	2	49(11.03)
>50	0	0	2	4	6	4	4	2	1	23(0.51)

Maximum number of cases was reported from south zone (204) as compared to other zones of the valley. Maximum cases were from the South zone of the

Valley (45.9%) as compared to other zones of the valley.



Table 4 Zone Wise Distribution of Cases

Zone	2006	2007	2008	2009	2010	2011	2012	2013	2014 (Jan. –May)	Total (%)
Central	5	16	11	17	14	32	22	8	4	129(29)
South	10	14	19	22	37	42	26	24	10	204(45.9)
North	9	8	12	13	15	14	20	18	2	111(25)

DISCUSSION

Organophosphates are widely used in the household and in the agriculture as ours is an agriculturally based society. Intoxication with OPP is a worldwide problem and may cause severe morbidity and mortality.⁷ Overall case fatality rate ranges from 10-20 %.^{8,9} According to national crime records bureau India, every five minutes a person commits suicide and seven attempt to kill themselves, resulting in about 1,00,000 deaths per year.¹⁰ Suicide rate was highest in the state of Kerala¹¹ and organophosphorous poison was the most common agent used for suicide purpose.¹²

A study conducted on 276 cases of OPP in Kashmir valley from 2000-2002 showed high incidence of suicidal poisoning in females (36.9%) and age group involved was 14-29years (60%). 63.7% were unmarried cases. OPP was most common & pattern of poisoning was suicidal in majority of the cases.¹³

A study conducted among 164 patients in Kashmir valley observed that poisoning was more common in females (69.51%) and majority of patients (74.39%) consumed the poison for suicidal intentions, mainly due to strained social relations.70% of cases belonged to the districts having largest areas of apple orchards.⁶

Our present study of poisoning cases admitted in SMHS hospital Srinagar over a vast period of nine years and analysing these cases have helped us to draw some important conclusions:

- (1) Most of the cases of poisoning reported from south zone of Kashmir as compared to other zones.
- (2) OPP was most common type of poisoning as compared to other poisons.

- (3) Females showed a highest incidence of poisoning as compared to males
- (4) 18 to 35 years age group was highly affected.

Most of the cases were unmarried.

The reasons for above conclusions are as follows:

- (1) The contribution in the field of agriculture in Kashmir is predominantly from south zone that can be the reason why poisoning cases were reported to be on higher side from this zone.
- (2) As already discussed above, organophosphorous agents are widely used in the households and in the agriculture as compared to other pesticides that is why organophosphorous poisoning was the most common type of poisoning found.
- (3) One of the reasons for higher incidence of poisoning in females is that females are emotionally more labile than the males.^{14,15}
- (4) Majority of victims were in the age group of 18 to 35 years, the reason being that this age group is the most active age group whether physically, mentally or socially and people in this age group are more prone to stress.
- (5) Single and unmarried individuals are more responsive to psychological stress than married individuals, a finding consistent with a growing body of evidence showing that marriage and social support can buffer against stress. It has been found that marriage and committed relationships



reduce production of stress hormones hence decreasing stress.

Kashmir is one of the major fruit growing and agricultural states in India. Rural population of this region is mostly dependent on their agriculture. The Organophosphorus agents which are used in the agricultural industry in Kashmir are readily available as over the counter drugs in village shops and are easily accessible in the village households hence they act as common agents for suicidal purposes following trivial day to day stresses. Present study highlights the problem of organophosphorous poisoning in this region. It is essential to establish strict policies against the sale and availability of insecticides and pesticides and their safer storage at village households to prevent both suicidal and accidental poisoning.

REFERENCES

1. Kora SA, Doddamani GB, Halagali GR, Vijayamahantesh SN and Boke Umakanth (2011). Sociodemographic profile of the organophosphorous poisoning cases in southern India. *Journal of clinical and diagnostic research*.5(5):953-956
2. Lall SB, Peshin SS and Seth SD (1994) Acute poisoning: a ten years study. *Ann Natl Acad Med Sci (India)*. 30 : 35-44.
3. Palimar V, Saralaya KM, Arun M, Mohanty MK and Singh B (2005). The profile of methyl parathion poisoning in Manipal, India. *J. Ind. Soc. Toxicol.* 1(2):35
4. Bhoopendra Sing and Unnikrishnan (2006). A profile of acute poisoning at Mangalore (South India). *jcfm* 13:112–116
5. Jesslin J, Adepu R and Churi S (2010). Assessment of prevalence and mortality incidence due to poisoning in a south indian tertiary care teaching hospital. *Indian J.Pharm. sci.* 72(5):587-5
6. Malik GM; Romshoo GJ; Mubarik M; Basu JA; Rashid S; Hussain T and Wani MA (1998) Increasing incidence of organophosphorus poisoning in Kashmir Valley (a preliminary study *JK Practitioner*. 5 (2): 117-20.
7. Singh SS, Sharma BK and Wahi PL. Spectrum of acute poisoning in adults (1984). *JAPI* 32(7):561-3.
8. Eddleston M, Szinicz L and Buckley NA (2002). Oximes in acute organophosphorus pesticide poisoning: a systematic review of clinical trials, *QJM* 95. 275–283.
9. Phillips M.R, Yang G, Zhang Y and Wang L et. al (2002). Risk factors for suicide in China: a national case control psychological autopsy study, *Lancet* 360. 1728–1736.
10. Baby S, Haridas M P and Yesudas K F (2006). Psychiatric diagnosis in attempted suicide 2006. *Calicut Med Journal*. 4(3):2.
11. Indrayan A, Wysocki M J, Kumar R, Chawla A and Singh N (2002). Estimates of the years of life lost due to the top nine causes of death in rural areas of major states in India in 1995 *Nat Med J of India*. 15:1.
12. Galgali R B, Sanjeeb R, Ashok M V, Appaya P and Srinivasan K (1998). Psychiatric diagnosis of Self Poisoning cases; A general Hospital study. *Indian Journal of Psychiatry*.40 (3); 254- 259.
13. Khan GQ, Kundal DC, Hassan G and Tak Shahid and Kak Manish (2003) Clinical and Socio-demographic Profile and Associated Factors in Attempted Suicidal Poisoning in Kashmir Valley in a General Hospital Setting. *JAPI*. 51.
14. Hauser G, Tkalčić M, Stimac D, Milić S, Sincić BM. Gender related differences in quality of life and affective status in patients with inflammatory bowel disease. *Coll Antropol.* 2011 Sep; 35 Suppl 2:203-7. PubMed PMID: 22220436.
15. Suzanne G. Haynes, Sollevine, Norman Scotch, Manning Feinleib and William B. Kannel. The Relationship of Psychological Factors to Coronary Heart Disease in the Framingham Study. *Methods and Risk Factors. Am. J. Epidemiol.* (1978) 107 (5): 362-38