

Original article

# Childhood trauma as a correlative factor of suicidal behavior – via aggression traits. Similar results in an Italian and in a French sample

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## Abstract

**Background and objective.** – Childhood trauma and aggressive traits are considered risk factors for suicidal behavior. The hypothesis we aimed to test in this study was the existence of an association between childhood trauma and aggression in two distinct samples of Italian and French suicide attempters.

**Method.** – Study participants comprise 587 subjects with different psychiatric diagnoses according to DSM-IV-TR criteria. Three different samples were analyzed and compared: a group of French suicide attempters ( $N = 396$ ; mean age 40.47 SD = 13.52; M/F: 110/286); a group of Italian suicide attempters ( $N = 103$ ; mean age 38.60 SD = 12.04; M/F 27/76) and an Italian psychiatric comparison group ( $N = 88$ ; mean age: 41.49 SD = 12.05; M/F; 37/51). Patients were interviewed with the Brown–Goodwin Assessment for Lifetime History of Aggression (BGLHA) and the Childhood Trauma Questionnaire (CTQ) 34-items for Italian data and 28-items for French data.

**Results.** – When compared with the comparison group, Italian suicide attempters had significantly higher scores on the BGLHA scale and reported higher scores on the CTQ scores for physical abuse, sexual abuse and emotional abuse. Significant correlations between childhood trauma and aggression were found in both groups, Italian and French, of suicide attempters.

**Conclusion.** – The hypothesis tested was supported as psychiatric patients who had attempted suicide reported significantly more childhood trauma and aggression. Significant correlations were found between aggressive behavior, and childhood trauma in suicidal patients. This finding was replicated in two independently recruited samples in two countries with different prevalence of suicidal behavior.

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**Keywords:** Suicidal behaviour; Child abuse; Aggression; Violence

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## 1. Introduction

Early relationships in childhood determine in a unique manner the basic neurobiological organization of the human

being and are determinant in establishing social skills and interaction with the surrounding environment. There is founded evidence that a positive pattern of early experiences during childhood is a fundamental neurotrophic factor for a healthy development of the human brain and leads to the correct differentiation of the emotional, cognitive, behavioral and motor domains [15]. The influence on such a delicate path of traumatic experiences may not only condition the immediate child functioning but also have a negative influence on

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the developmental process and determine an increased vulnerability for developing mental disorders, including suicidal behavior, in adulthood. Over the past two decades, many studies have demonstrated a strong link between traumatic experiences during childhood and adult psychopathology including suicide attempts. Childhood trauma has been found associated with increased odds' ratios of depression and anxiety [11], dissociative symptoms [32], personality disorders [12] and substance use disorders [18]. Roy first studied the role of childhood trauma in the suicidal behavior of a large sample of cocaine and opiate addicts, and alcoholics [19]. After dividing the patients into those who had attempted suicide and those who had not, he showed that attempters had significantly higher childhood trauma scores for emotional abuse, physical abuse, sexual abuse, emotional neglect and physical neglect than non-attempters. He then studied childhood trauma and suicide in depressed patients [33]. Similar to the results in drug addicts, he found that depressed patients who had attempted suicide had significantly higher scores of retrospectively assessed childhood trauma (using the Childhood Trauma Questionnaire) and aggression traits (using Brown–Goodwin History of Aggression) than depressed patients who had never attempted suicide.

Aggressive traits are also considered a risk factor for suicidal behavior. The role of aggressive behaviors in risk of suicide has been well substantiated by several lines of evidence, including case–control studies in clinical populations, cohort studies in epidemiological samples, retrospective studies of completed suicides and case registries [35]. The hypothesis we aimed to test in this study was the existence of an association between childhood trauma and aggression in two distinct samples of Italian and French suicide attempters. In spite of meaningful country variation in prevalence, general risk factors for suicidality have been reported to be consistent in the European countries [1]. We then tested the existence of the same association in a sample of psychiatric patients with no suicidal history.

## 2. Materials and methods

### 2.1. Subjects

The study was performed on 587 subjects in three different groups: French suicide attempters ( $N = 396$ ; mean age 40.5 SD = 13.5; M/F: 110/286); Italian suicide attempters ( $N = 103$ ; mean age 38.6 SD = 12.0; M/F 27/76) and an Italian psychiatric comparison group ( $N = 88$ ; mean age: 41.5 SD = 12.0; M/F; 37/51). A suicide attempt was defined as the occurrence of self-directed injurious acts with intent to end one's own life. Patients have been interviewed by trained psychiatrists or psychologists, using either the Diagnostic Interview for Genetics Studies (DIGS) or the Mini International Neuropsychiatric Interview (MINI) [16,34]. Before participating the study, all subjects were given oral and written information about the study. A written consent was subsequently obtained from them. The study has been approved by the local Ethics Board in each country.

In the aim to investigate our hypothesis, patients have been assessed for the history of a childhood maltreatment using the Childhood Trauma Questionnaire (CTQ) [2] and for aggression with the Brown–Goodwin Assessment for Lifetime History of Aggression (BGLHA) [3,4]. Psychometric testing was performed by a specifically trained rater. The Childhood Trauma Questionnaire (CTQ) [5] is a retrospective self-report questionnaire that examines the traumatic experiences during childhood and adolescence. It assesses five types of childhood trauma: emotional abuse, emotional neglect, physical abuse, physical neglect and sexual abuse. CTQ has demonstrated excellent test–retest reliability and convergent validity [2,5] It comprises 28 (short version) or 34 items (standard version) and each item is rated from 1 (never) to 5 (very often). Scores range from 5 to 25 for each type of trauma. The 28-item CTQ has been standardised and validated in French since 2004 [7]. While no Italian version of the CTQ exists, it was adapted for the Italian population just prior to the beginning of the present study. Psychometric and statistical techniques were used to establish the equivalence of the source and target language versions of the instrument. Cronbach alpha coefficients for EA, PA, SA, EN and PN in the Italian sample ( $n = 191$ ) were 0.849, 0.860, 0.862, 0.869 and 0.666, respectively. CTQ has been scarcely used in transcultural settings. Some cultural differences have been shown between obtained scores among different races [36]. No studies analyzed differences and similarities between similar cultures as the Italian and French.

The BGLHA questionnaire is an 11-item interview that assesses lifetime aggressive behaviors across two separate stages of life (adolescence and adulthood). It was administered to patients by directly asking about aggressive behaviors. Scores attributed to each item were decided in a standardised manner by asking how many times the evaluated aggressive behavior occurred. The scale was adapted for the Italian population just prior to the beginning of the present study. The alpha coefficient in the Italian sample was 0.812.

### 2.2. Statistical analyses

Characteristics of the population were described by using the median and the range for quantitative variables and proportions for categorical one. For continuous variables (age), the distributions were tested with the Shapiro–Wilk statistic and were skewed.

Chi-square tests and Mann–Whitney tests were used to compare the suicide attempter group with the comparison group (Table 1). Variables found to be associated were used as adjusted variables in analyses relating to the comparison between suicide attempters and psychiatric comparison group for childhood events and aggression, using univariate logistic regression (Table 2).

For the correlation studies, Spearman's correlation and partial correlation coefficients were used. For all tests, significance was set at  $p \leq 0.05$ .

Statistical analyses were performed using the SAS software, version 9.1 (SAS Institute, Cary, NC, USA).

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