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Family homicide associated with the absence of psychiatric treatment during the COVID-19 pandemic: a case report

Homicídio familiar associado com ausência de tratamento psiquiátrico durante a pandemia de COVID-19: um relato de caso

Homicidio familiar asociado a ausencia de tratamiento psiquiátrico durante la pandemia de COVID-19: reporte de un caso

Lucas Francisco Campanha



ORCID - Lattes

Lisieux Elaine de Borba Telles - ORCID - Lattes

ABSTRACT:

Introduction: In 2020, due to the COVID-19 pandemic, several countries issued stay-at-home orders to prevent the spread of the virus. Soon after, a considerable increase in the rates of domestic violence could be observed, due to the confinement of aggressors and victims and greater coexistence between them. Case report: This is a case of familicide committed by a 27-year-old young man who, during a psychotic break, killed his father and a cousin. The aggressor had paranoid schizophrenia and, during the period of the COVID-19 pandemic, was without psychiatric care or use of psychotropic drugs, showing exacerbation of psychotic symptoms and criminal behavior. Discussion: It is noteworthy that the pandemic reduced access to mental health care and forced the mentally ill to live more with their family. This increased the vulnerability of this group and the risk of violence for themselves and others. The family of the seriously mentally ill person is usually the group most affected by violence in times of exacerbation of symptoms in the absence of treatment. Conclusion: In public health emergencies, it is important to have a strategy to prioritize psychiatric care for the seriously mentally ill, so that they are not left without support and at risk for themselves and others.

Keywords: domestic violence, homicide, COVID-19, psychotic disorders, quarantine.

RESUMO:

Introdução: Em 2020, devido à pandemia de COVID-19, vários países emitiram ordens de permanência em casa para evitar a propagação do vírus. Logo em seguida, pôde-se observar um aumento considerável nos índices de violência doméstica, em decorrência do confinamento de agressores e vítimas e maior convivência entre eles. Relato de caso: Trata-se de um caso de familicídio cometido por um jovem de 27 anos, que durante um surto psicótico matou o pai e um primo. O agressor era portador de esquizofrenia paranoide e, durante o período da pandemia de COVID-19, ficou sem atendimento psiquiátrico ou uso de psicofármacos apresentando exacerbação da sintomatologia psicótica e conduta delitiva. Discussão: Ressalta-se que a pandemia reduziu o acesso aos cuidados de saúde mental e obrigou o doente mental a conviver mais com a família. Isso aumentou a vulnerabilidade desse grupo e o risco de violência para si e para terceiros. A família do doente mental grave costuma ser o grupo mais atingido pela violência em momentos de agudização dos sintomas na ausência de tratamento. Conclusão: Nas emergências de saúde pública, é importante ter uma estratégia para priorizar o atendimento psiquiátrico ao doente mental grave, para que ele não figue sem apoio e em risco para si e para os outros.

Palavras-chave: violência doméstica, homicídio, COVID-19, transtornos psicóticos, quarentena.

RESUMEN:

Introducción: En 2020, debido a la pandemia de COVID-19, varios países emitieron órdenes de quedarse en casa para evitar la propagación del virus. Poco después se pudo observar un aumento considerable en los índices de violencia doméstica, debido al encierro de agresores y víctimas y una mayor convivencia entre ellos. Caso clínico: Se trata de un caso de familicidio cometido por un joven de 27 años que, durante un brote psicótico, mató a su padre y a un primo. El agresor padecía esquizofrenia paranoide y, durante el período de la pandemia por COVID-19, estuvo sin atención psiquiátrica ni uso de psicofármacos, presentando exacerbación de síntomas psicóticos y conducta delictiva. Discusión: Se destaca que la pandemia redujo el acceso a la atención en salud mental y obligó a los enfermos mentales a convivir más con su familia. Esto aumentó la vulnerabilidad de este grupo y el riesgo de violencia para ellos mismos y para otros. La familia del enfermo mental grave suele ser el grupo más afectado por la violencia en los momentos de exacerbación de los síntomas en ausencia de tratamiento. Conclusión: En emergencias de salud pública





es importante contar con una estrategia para priorizar la atención psiquiátrica a los enfermos mentales graves, para que no queden sin apoyo y en riesgo para sí mismos y para los demás.

Palabras clave: violencia doméstica, homicidio, COVID-19, trastornos psicóticos, cuarentena.

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Introduction

In 2020, as the COVID-19 pandemic wreaked havoc on the lives of many people, governments around the world began issuing stay-at-home orders to prevent the spread of the virus. Many health services prioritized care only for carriers of COVID-19. Even though these orders were sensible from an epidemiological point of view, it was perceived that the confinement was causing a significant increase in the rates of domestic violence, both by the general population, $[\underline{1}, \underline{2}]$ and by families with a person with severe mental illness, who, after confinement, suffered with in the absence of psychiatric treatment $[\underline{3}]$. A case report of one of the most serious forms of domestic violence will be described below: a family homicide that occurred during the pandemic.

Case report

This is the description of a case of family homicide (murder of the father and a cousin), committed by a 27-year-old young man. In December 2020, the young R.A.L, using a knife, struck blows against his cousin's neck and chest, causing injuries that resulted in his death.



On the same day, moments after committing this homicide, he struck a knife against his father's neck, causing the injury that resulted in his death. The homicides occurred sequentially and suddenly, without premeditation or attempt to conceal the criminal acts. Victims were attacked in their homes. The aggressor had paranoid schizophrenia, and, during the period of the COVID-19 pandemic, he was left without psychiatric care and without the use of psychotropic drugs.

Faced with doubts as to R.A.L's mental health at the time of the crime, the judge instituted the incident of mental health and he was submitted to an Expertise for the Assessment of Criminal Imputability. The report concluded that there was a mental illness (paranoid schizophrenia) with active psychotic symptoms at the time of the events and the presence of a causal link between the pathology and the crime. On the date of the crime, he showed disorganized behavior, magical thinking with persecutory delusions (he believed that his family was persecuting him) and auditory hallucinations. The patient lacked understanding and determination about his homicidal behavior.

Justice concluded that the patient was not responsible, and he was acquitted, receiving a Security Measure lasting three years, to be fulfilled in a hospitalization regime in a Forensic Psychiatric Hospital. R.A.L. was born in a city in the interior of the southern region into a family of humble origins and has always lived with his parents. He began psychotic symptoms in late adolescence becoming progressively more isolated and suspicious. He had no affective ties outside the family, and he never performed a work activity. During the pandemic, although had intense psychotic symptoms, he did not receive psychiatric care.

Discussion

The Medical Expertise for the Assessment of Criminal Imputability is characterized by a set of technical procedures with the aim of clarifying to justice the mental health of a person accused of having committed a crime. In this way, the expertise is a means of proof, and the expert, an assistant to the judge [4]. In Brazil, people can be classified as attributable, semi-attributable or non-attributable. Individuals considered attributable and guilty are subject to a penalty, those considered non-imputable are subject to a security measure, and those who are partially attributable may receive a reduced sentence or a security measure if they require special curative treatment [5].



The COVID-19 pandemic had a relevant impact on the mental health of patients with severe mental illnesses, including schizophrenia [$\underline{6}$]. The factors that contributed to the worsening of the mental health of these people are the lack of access to treatment ($\underline{7}$), the stress [$\underline{6}$, $\underline{8}$], and social isolation [$\underline{6}$].

The lack of access to treatment is a consequence of the isolation measures necessary to control the pandemic, which caused the temporary closure and/or reduction in the number of consultations for the mentally ill [7]. Stress is a result of both the isolation measures and the fear generated by the infection. [8]. Social isolation intensified the interaction between patients and their families, increasing domestic conflicts and their paranoid symptoms in relation to their parents and siblings; at the same time, it made it difficult for patients to have contact with other people who could observe their behavior changes and seek help.

Violence committed by the seriously mentally ill is only moderately higher than that committed by the general population. However, if they are left without the necessary assistance, the probability of occurrence increases significantly [3]. Risk factors for family violence in patients with severe mental illness are the following: young age, low educational level, low income, alcohol and/or drug use, psychotic symptoms, history of psychiatric hospitalization, non-adherence to treatment, history of violence, crime or imprisonment [9].

It is possible to notice that most of these factors are present in the case evaluated in this study. Furthermore, the pandemic has increased the levels of contact between family members and the mentally ill, and this may contribute to increasing the risk of violence to which these family members are exposed. [9, 10].

Unlike what happens in cases of violence committed by the general population, it is estimated that approximately half of all violence perpetrated by people with Serious Mental Illnesses occurs against members of their own family. Furthermore, family members are significantly more likely than strangers to suffer serious injury, including death, when victimized by this population [10].

When the victims of a family homicide are two or more members from different parts of the family, it is referred to as familicide [11]. This is a rare event, with an incidence of 1 to 2 cases per 10 million people [12].



The most common scenario is that of men who kill their wives and children. Cases where the child is the perpetrator are the rarest. A study [11] investigated cases of familicide in which the child was the perpetrator of the crime, between 1991 and 2010, in the United States. 14 cases were found. 13 of the perpetrators (92.9%) were male, 10 (71.4%) were white and the killer's age was between 12 and 43 years (25 on average).

Most of the victims were father, mother, brother, stepfather or stepmother. A firearm was used in 9 cases (64.3%), a knife in 3 cases (21.4%) and another object in 2 cases (14.2%). In 3 cases (21.4%), the aggressor showed signs of a mental disorder at the time of the incident.

Conclusion

During the pandemic, psychotic patients were especially vulnerable to the prolonged effects of social isolation, while there was greater interaction between them and their families and less access to health care, where the patient could be evaluated, medicated and helped [13, 14]. All these factors can aggravate a psychiatric condition, with risks for themselves and others, as in this case.

In public health emergencies, it is important to prioritize psychiatric care for the seriously mentally ill, so that they do not suffer without treatment and pose a risk to themselves and others.



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