

Transdermal Fentanyl Death Pact

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The authors report no conflict of interest.

Keywords: fentanyl; transdermal patch; opioid; death pact; double suicide; dyadic suicide

CASE SUMMARY

We report the case of a double suicide in an elderly couple, which occurred during COVID-19 lockdown. According to the son, this was a premeditated death pact, which was carefully planned. The parents had stockpiled fentanyl patches, which were prescribed for nonspecific neck pain management of the 76-year-old woman.

In May 2020, 2 months after COVID-19 lockdown, an elderly couple was found dead in their apartment. Their bodies were located in separate beds and in separate bedrooms. No foul play was suspected by the police.

Typed and signed end-of-life directives were present, for both the male and the female, indicating their “death pact.”

According to the son, his parents apparently had premeditated plans to end their lives with dignity in Switzerland. COVID-19 lockdown restrictions, however, were enforced in March 2020. Their deaths occurred 2 months later, in May 2020.

Because this was deemed an unnatural death, medicolegal autopsies were arranged in accordance with the national regulations. The medicolegal autopsies were performed the following day.

Examination of the 76-year-old elderly White woman showed 15 fentanyl 75 ug/h (12.6 mg) transdermal patches, neatly secured with adhesive plasters to the upper anterior chest region and upper abdominal region.

Examination of the 79-year-old elderly White man showed 10 fentanyl 75 ug/h (12.6 mg) transdermal patches neatly adhered to the anterior thorax and left cubital fossa region.

Please refer to Figures 1 to 4.

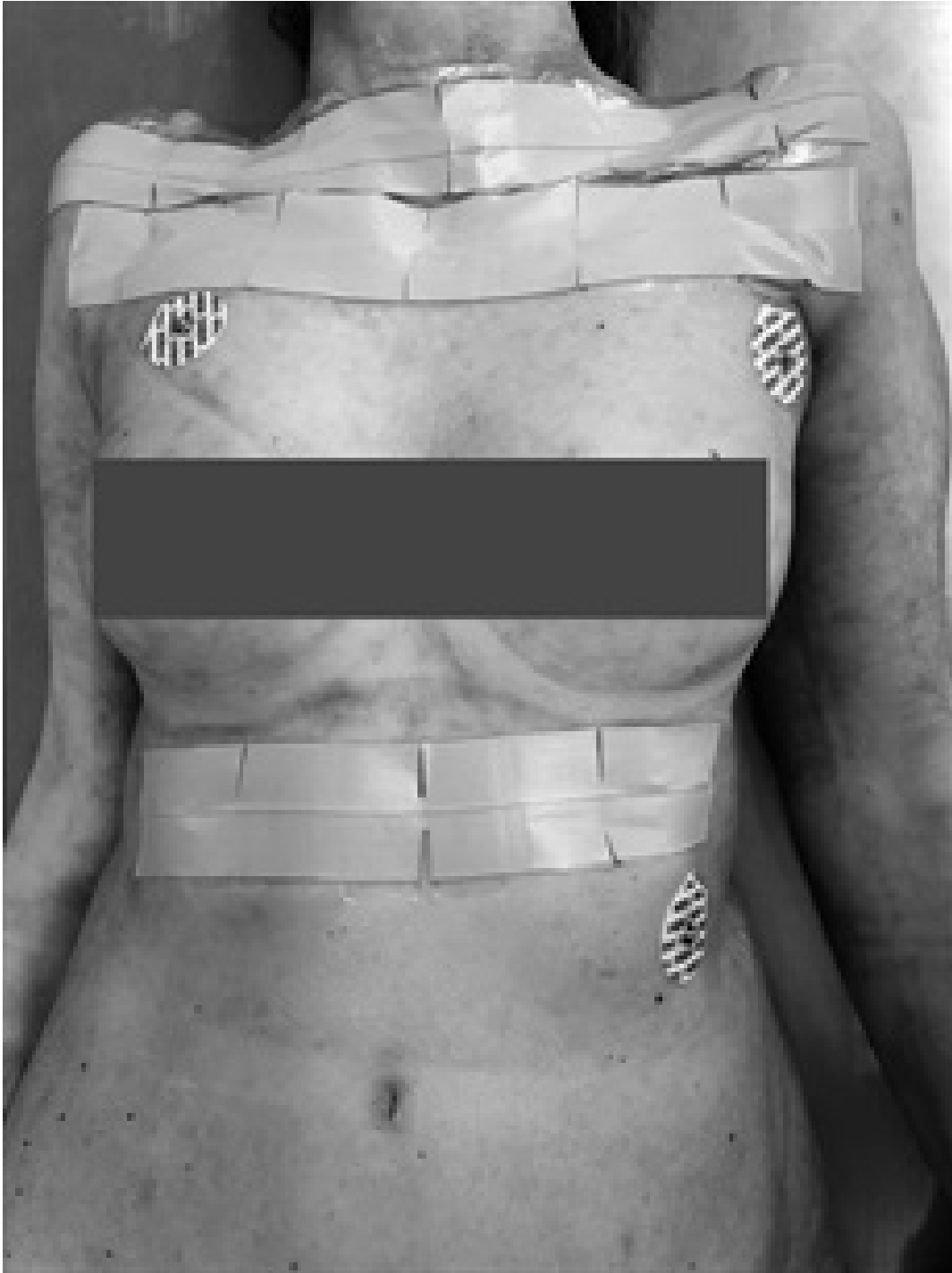


FIGURE 1: An elderly White woman with approximately 15 fentanyl 75 ug/h (12.6 mg) transdermal patches neatly secured with adhesive plasters to the upper anterior chest region and upper abdominal region.



FIGURE 2: An elderly White woman with approximately 15 fentanyl 75 ug/h (12.6 mg) transdermal patches neatly secured with adhesive plasters to the upper anterior chest region.



FIGURE 3: An elderly White man with fentanyl 75 ug/h (12.6 mg) transdermal patches neatly adhered and left antecubital fossa region.



FIGURE 4: An elderly White man with 10 fentanyl 75 ug/h (12.6 mg) transdermal patches neatly adhered to the anterior thorax.

No other external injuries to the bodies could be identified.

Both bodies showed nonspecific internal findings. The lungs of the woman were relatively heavy and edematous (L: 594 g, R: 828 g). The lungs of the man were also relatively heavy

and edematous (L: 592 g, R: 480 g). Histology showed background emphysematous changes within the lungs of both bodies.

Both had fecal impaction (constipation) of the large intestines. The male had mild-to-moderate atherosclerotic changes of the large arteries. The female had signs of previous cholecystectomy.

DISCUSSION

Suicide pacts are a rare phenomenon with only a few cases described in the literature.¹ Approximately 0.6% to 2.5% of all suicides occur as a pact.¹⁻³ Usually, they involve 2 or more individuals who end their lives at the same time.²

Most suicide pacts occur between married couples and those with a love relationship or friendship.³⁻⁶ Oftentimes, there is a history of a mental disorder or a chronic medical illness in 1 or both of the partners,^{2,3,6-8} combined with the anxiety of dying alone.⁸

As seen in this case, most suicide pacts occur in individuals older than 50 years,^{4,5} with the mean age being significantly greater than that of single suicides.³

Suicide notes, typical of the ones found on the death scene, play an important role in helping differentiate between suicide pact or homicide suicide (dyadic deaths).^{1,2,4} In addition, there should be no signs suggesting violence or coercion during external examination and autopsy.⁴

Methods of suicide that cause immediate and relatively painless death are preferred.¹

Transdermal patches are typically used in the long-term management of chronic pain or for cancer patients. Fentanyl is a strong analgesic with a potency approximately 100 times stronger than morphine.⁹⁻¹¹

The couple committed suicide during a strict COVID-19 lockdown. Several articles have reported on the impact of the COVID-19 pandemic on mental health and suicide rates. Social isolation, fear of contagion, economic distress, and the uncertainty of the future have placed people at greater risk for developing mental disorders or exacerbating preexisting psychiatric instability or suicidality.¹²⁻¹⁵

ACKNOWLEDGMENTS

The authors thank the next-of-kin for providing consent. The authors also thank the South African Police Services and the Director of Public Prosecutions for their assistance. The authors would also like to thank the Research Ethics Committee, Faculty of Health Sciences, University of Pretoria, Ethics Reference No.: 73/2021.

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