

# How to stop death on the tracks

Researchers call for safety devices to reduce the growing number of suicides on London's Underground

In 1872, Count Leo Tolstoy attended an inquest on a young woman who had thrown herself under a train. The incident was the inspiration for the writing of *Anna Karenina*, whose fictional death occurred in the same manner.

It is difficult for us today to appreciate the impact this made when the book was published in 1878. Tolstoy's decision to end his heroine's life under the wheels of a train was a deliberate reference to the growing and brutal impact of industrialisation.

The first recorded case of suicide in front of an English train occurred in 1852. Since then numbers of railway suicides have steadily increased, reflecting the spread of the railways.

For many years suicide has been the commonest cause of death on British railways. Out of about 300 people who die on the railways every year, suicide is the official verdict in about half the cases.

This figure has been stable

ular concern for several reasons. Most people who risk their life by taking an overdose of tablets survive — only about half those who jump under trains do so.

Many suicidal attempts are impulsive. If someone can be prevented from, or alternatively survives, the suicide attempt, they do not usually immediately look for another, more successful, method. Therefore reducing the opportunity for suicide saves lives.

Those who survive a dramatic and dangerous attempt often take spiritual comfort from their survival — it can act as a return of hope.

Several contributors to *Social Science and Medicine* make practical suggestions for reducing the risk on the Underground. They suggest that more "suicide pits", the gap between the rail and the ground, are needed. These are standard in Hong Kong, where most jumpers fall safely under the rail.

It was also noted that most suicides occur just as a train



King's Cross: highest record of suicides

for some years, but over the last 20 years there has been a steady increase in a number of people attempting suicide on the London Underground. About 100 such attempts are now recorded annually. Alarmed at this increase, London Underground recently commissioned studies which are published in the February issue of *Social Science and Medicine*.

Sociologist Ian O'Donnell and epidemiologist Richard Farmer, working in the department of public health at Charing Cross Hospital, looked at the pattern of cases across the Underground. The station with most such incidents was King's Cross. However, if one takes into account the volume of passengers, the stations most vulnerable to suicide attempts were Mile End, Tooting Bec and Archway, closely followed by the Oval and Clapham North.

A glance at the location of London's psychiatric hospitals reveals why — all these stations are close to a psychiatric centre. This serves as a timely reminder of the facts of suicide — the vast majority of those who take their life do so as a result of mental illness.

Railway suicides do not account for many of the 5,000 suicides recorded annually in this country, but are of partic-

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enter the station at speed — a barrier at that strategic point might also save lives. Last weekend it was announced that, to reduce costs, the proposed London East-West Crosslink would no longer have these safety barriers installed.

In Vienna recently there was an epidemic of train suicides, following sensational media coverage. When the Austrian media agreed to restrict the reporting of suicide attempts on the Vienna subway, the number of incidents declined.

There is another, less obvious, victim in railway suicides — the driver of the train. Studies commissioned by both London and Stockholm Underground systems have documented the immediate psychological distress this causes the drivers, and the longer-term effects of emotional disorder and sickness.

Nearly half experienced psychiatric disorder, although most had recovered six months after the incident. Fortunately, it seems early, simple psychological support can reduce this distress.

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