

Two Unusual Cases of Complete Suicidal Hanging

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Abstract— Hanging is mostly considered as suicidal. Literature pertaining to forensic medicine is very rich for various methods of unequivocal and atypical suicidal hanging. This abstract describes such two cases. Presence of a noose around the neck with a knot is the rule rather than the exception in a case of suicidal hanging. A 45 year old male had managed to self- suspend from a ceiling fan by using a broad string of cloth. Without much support the dead body had perfectly been completely hanging for few hours before the dead body was recovered. One of the “classical signs” of asphyxial type of death is the presence of petechial haemorrhages though petechiae are not commonly seen in cases of complete hanging. The other case is regarding a 22-year-old married lady committing of suicide after narrating her story in a suicidal letter. It is very uncommon to see copious petechial haemorrhages in palpebral conjunctivae and bulbar conjunctivae along with scleral ecchymosis. When a forensic pathologist sees petechiae and ecchymosis in a case of hanging shrewd medico-legal investigation is justified to exclude a possible case of homicide. Contrary to the belief that the incidence of having petechial haemorrhages and congestion of face is more in partial hanging, rarely there are cases of undoubted complete hanging with florid petechial haemorrhages. An inexperienced pathologist may be misled and get confused with such rare findings resulting in unnecessary lengthy investigations even up to the extent of arresting of an innocent.

Keywords— *suicidal complete hanging, petechial haemorrhages in asphyxial deaths, knot and noose*

Introduction

Hanging is the commonest method of suicide in the hospital where the author serves as per the personal experience. But the literature says self- poisoning is as the commonest method when it is considered island wide (2020). Deaths due to hanging at times creates many problematic situations in the hands of forensic pathologists. Examination of the scene is mandatory in a certain percentage of deaths due to suspected hanging. The reason is the mark that is seen around the neck is the only thing that can be noticed in most of the undoubted suicidal hanging. In such cases no internal injuries to soft tissues or to the underlying bones or cartilaginous are observed. The so called asphyxial features are also not evident in almost all suicidal hanging cases when it is in “complete” in type. The author believes that hanging is a kind of death where bizarre patterns are noticed. The following two cases provide the atypical findings in suicidal hanging.

Case Reports

A 45 year-old married male had self-suspended from a ceiling fan while his mother had been to the next-door. His wife had gone abroad to serve as a domestic servant as the victim was a heavy alcoholic. The wife was requested to come home repeatedly by the husband though she was insensitive to it. When mother returned home after few hours she had noticed that her son was hanging from the ceiling fan but with very unusual manner. Without much support the dead body had perfectly been completely hanging for few hours. There had not been a knot or a noose to

keep him hanging though a broader loop of wide cloth had been used instead to get the desired action done. There were no classical features of asphyxia but there was a faint ligature mark intermittently at the upper neck. No other suspicious circumstances were there to suspect any criminal act. The cause of death was concluded as hanging and the manner of death as a suicide.

book indicating that the husband was threatening and made frightened her resulting in severe depression. She had been assaulted with fist blows over the past few weeks as well. The scene was visited. The dead body had been taken for the hospital by the time of visiting the scene. It was a case of complete hanging according to the measurements and with the scene observations. It was a case of self - hanging with bruises on her body and full blown classical asphyxial features. The author was made think equivocally along with congested face (Singh 2011). The neck only contained a broad ligature mark as a parchment lesion on her upper to mid-neck. Her face was fully congested with bilateral petechial haemorrhages on the copious petechial haemorrhages in palpebral conjunctivae and bulbar conjunctivae along with scleral echymosis. Blood was tested for common poisons and it was unremarkable. No other fatal injuries were noted. The cause of death was concluded as hanging and the circumstances as suicidal.

Discussion

It was amazing to see in the literature about atypical hanging cases where the deceased were using apparently insufficient methods to commit suicide. Very similarly the case one under discussion is also the same. It was just a broad cloth loop and it had been sufficient to keep hanging the body for few hours.

Typical asphyxial features are secondary to venous obstruction of the vessels of the head. When the pressure that is enough to compress

In the case two, the young recently married girl had self - suspended from a rafter by using one of her sarees. She had had an ongoing arguments with the husband for premarital relationship and the husband was accusing of her for many indecent acts. The depressed wife had written her story on an exercise

venous system but not the arterial system the typical asphyxial features are overwhelming. The pressure needed for venous obstruction is around 2 kg and to constrict the arterial system it is calculated as 10-35 kg. So the pressure applied to her neck most probably could have been more than two kilograms and less than 10-35 kg. But with the total weight applying on to the noose, is it possible to be the pressure applied such low? The time period needed to cause petechial haemorrhages were said to be very minimal (Živković V, 2018). However, forensic literature had revealed such cases. The reasons were mentioned as the duration of suspension, weight of the body (BMI), the position of the noose, type of the noose etc and the contributing variables are believed yet to be studied ((Živković V, 2018), (Clément R). However, it had been indicated the fact that presence of full blown asphyxial features in a case of undoubted complete hanging is to be further studied. There are very limited literature to prove the fact that the petechial haemorrhages are commoner to see in partial hanging but not in complete hanging (Sundal JA, 2020). Since there were lot of healing contusions in different stages of healing and the other conflicts in the family it could have been a case of homicide as in antemortem hanging. However, with the complete musculoskeletal dissection it revealed that no such injuries and was concluded as a case of atypical complete hanging. The manner was concluded as suicidal.

Conclusion

Deaths due to hanging are one of commonest cases where a forensic pathologist has to engage with. However, there are many atypical features in postmortems and the way that victims had attempted hanging even in suicidal hanging cases. So further researches are required to understand the pathophysiology of hanging as it may be helpful to unravel many mechanisms along with the updated knowledge of the field.

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Author Biography

Recent researches had not been performed regarding the mechanisms of asphyxia and such aspects are encouraged as explained in this paper.

