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Two cases of auto-erotic asphyxiation experienced in the department of legal medicine.

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Due casi di asfissia autoerotica osservati presso il Dipartimento di Medicina Legale

Riassunto

L' asfissia autoerotica consiste nell' intenzionale riduzione dell' apporto di ossigeno al cervello al fine di ottenere una maggior soddisfazione sessuale. Questa pratica sessuale è comunemente scoperta quando la morte consegue a questa pratica, poiché questi soggetti raramente richiedono l' intervento del Medico o del sistema giudiziario. Riferiamo della nostra esperienza in due casi giunti all' osservazione del nostro Istituto.

I dati dell' esame autopsico evidenziarono una congestione poliviscerale.

Questo tipo di comportamento sessuale dovrebbe essere costantemente considerato nella diagnosi differenziale con attività parasuicidiarie che involgono l' asfissia.

Parole chiave: asfissia autoerotica. Impiccamento.

Abstract

Auto-erotic asphyxiation is the intentional restriction of oxygen to the brain for sexual arousal. This sexual practice is normally only discovered when death results from the act because these individuals rarely seek medical or forensic advice. We experienced two auto-erotic asphyxiation cases. Autopsic findings showed congestion of almost all organs. This type of sexual behavior should always be considered in a differential diagnosis with parasuicidal activity involving asphyxia. Both cases are reported.

Key words: Auto-erotic asphyxiation, uncontrollable urges, hanging

Introduction

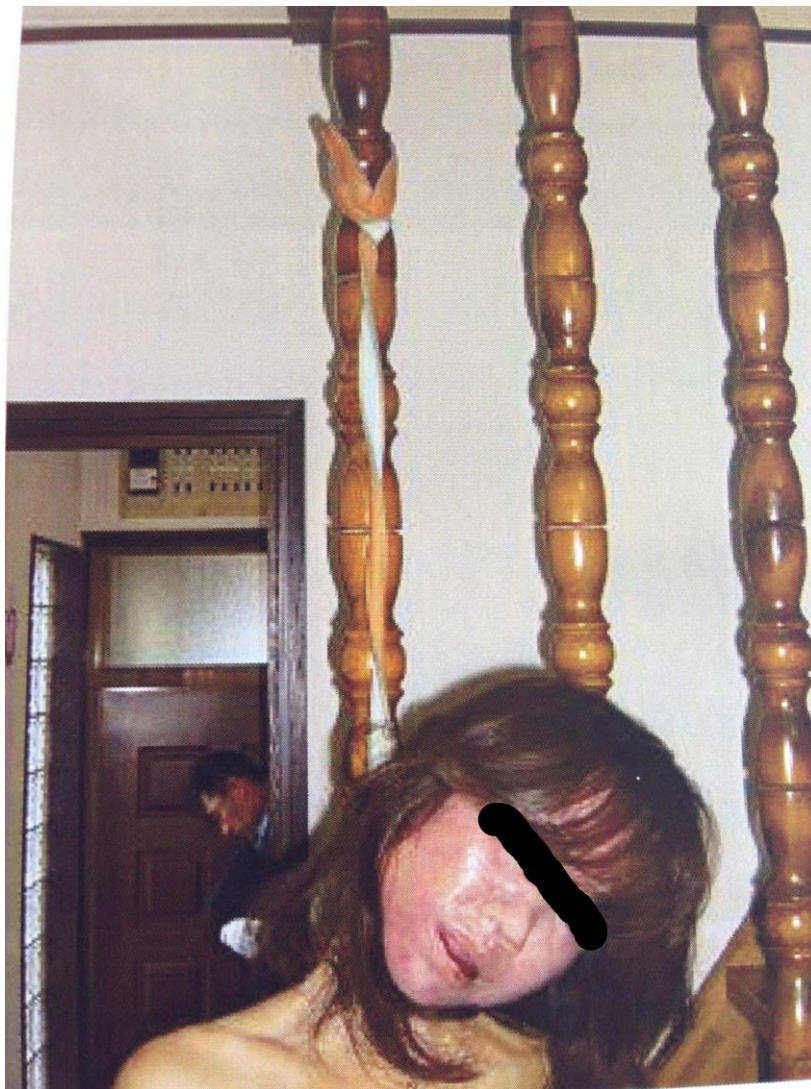
The erotic interest in asphyxiation is classified as a paraphilia in the Diagnostic and Statistical Manual of the American Psychiatric Association.

In "*The Relativity of Deviance*" John Curra described the physiopathology of erotic asphyxia: "The carotid arteries (on either side of the neck) carry oxygen-rich blood from the heart to the brain. When these are compressed, as in strangulation or hanging, the sudden loss of oxygen to the brain and the accumulation of carbon dioxide can increase feelings of giddiness, lightheadness, and pleasure, all of which will heighten masturbatory sensations." [1]

Novelist George Shuman describes the effect as such: "When the brain is deprived of oxygen, it induces a lucid, semi-hallucinogenic state called hypoxia. Combined with orgasm, the rush is said to be no less powerful than cocaine, and highly addictive." [2] In some fatality cases, the body of the asphyxiophilic individual is discovered naked or with genitalia in hand or exposed, with pornographic material or sex toys present, or with evidence of having orgasmed prior to death. [3] Bodies found at the scene of an accidental death often show evidence of other paraphilic activities, [4] such as fetishistic cross-dressing and masochism. [5]

Case Reports

A 45-year-old lady was found naked with a noose around her neck, made with a leather belt tied to the stairs railing . (Figure.1) She had been known to get uncontrollable sexual urges and was prone to paroxistic masturbation.



A 24-year-old man was found with a dog collar around his neck. He was wearing a school uniform and red-and-white cap. (Figure.2) The dog collar was fixed in the clothespole. He had disguised himself as a child.



They had no previous medical history of note. Autopsic findings showed congestion of almost all organs in both cases.

We concluded that their death could not be classified as suicide and was accidental, due to auto-erotic asphyxiation, in a context of a Sexual Masochistic Disorder with Asphyxiophilia as classified in the 5th edition of the “Diagnostic and Statistical Manual of Mental Disorders” [14].

Discussion

Auto-erotic asphyxiation involves the deliberate induction of cerebral hypoxia in order to produce or enhance sexual excitement [6]. Methods for inducing asphyxia include: neck constriction by ligature, noose or sling; plastic bag over the head; inhalation of anaesthetic agents; auto-erotic drowning; chest compression and use of abdominal ligature [7]. The most frequent method used involves ligatures applied to the neck [8]. The historical aspects and accounts of this phenomenon in the literature, anthropology and science have been well described [9-12]. The prevalence of the practice of auto-erotic asphyxiation in the general population is unknown. This kind of behavior is normally only discovered when death results from the act, because these individuals rarely seek forensic advice [13]. Data from England, Australia and Canada indicate that 1-2 deaths per million population are detected and reported each year [14]. As cases are often misdiagnosed as suicides or homicides, there may be considerable underreporting [6]. Auto-erotic asphyxiation should be considered as a differential diagnosis for parasuicidal behavior involving 'hanging'. The subjective experiences accompanying the early stages of hypoxia appear to be sexually stimulating to some individuals [10]. Resnik describes how asphyxiation causes a cerebral hypoxia or relative hypercapnia that induces a 'euphorising reinforcement' of the individual's fantasy [15]. Eber and Wetli hypothesize that the deviant behavior may be motivated by archaic, grandiose and exhibitionist strivings with sadomasochistic features serving as a defence against loss of self cohesion. [16]

Conclusion

Knowledge of this condition including its various presentations is important, as auto-erotic asphyxiation should always be borne in mind as a differential diagnosis with parasuicidal activity particularly when asphyxiation is involved.

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