CASE REPORT

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Suicide by sharp instruments: a case of harakiri

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Abstract A case of suicide by harakiri is described. The position of the subject, the absence of the shirt and the abdominal L-shaped cut agreed well with the formal procedure of harakiri. The characteristics of the stab wounds present on the right-hand side of the neck confirmed the assumption of self-infliction and excluded, from a legal point of view, murder by consent.

Key words Harakiri · Stab wounds · Self-infliction

Introduction

Harakiri (hara=belly; kiri=to cut) is a specific type of suicide where the abdomen is ripped open with a sword in a particular manner. The first case of harakiri was documented in 988 A.D. and was committed by a criminal after he had been arrested [9].

Harakiri is now rare even in Japan, where only 0.2% of all suicides are committed in this manner [8, 9]. In western countries it is extremely rare [3]. A mystical meaning is associated with the act. According to Japanese beliefs, the soul resides in the belly. For this reason harakiri is carried out according to an established ceremony.

The formal procedure is characterized by different steps [8]: the subject sits upright with his legs folded in the Japanese way and takes off his shirt. Then he wraps the blade of his sword in sheets of white paper or in fabric, leaving only a few centimeters free at the end. Then he runs the sword into the lower left abdomen and pulls it horizontally to the right (lower abdomen), and then upwards, thus producing an L-shaped cut.

The cut should sever the abdominal wall without damaging the internal organs. Harakiri is therefore very pain-

ful and there is usually a considerable delay before death occurs. For this reason it can occur that another person intervenes in order to shorten the agony by severing vital structures, such as neck arteries.

There can be several modifications and deviations from the typical pattern: cut wounds can also be present in the neck, in the chest wall and also at the wrist. Sometimes cut wounds are even found on the fingers, which can be interpreted as accidental, while multiple horizontal parallel cuts at the abdomen skin could be interpreted as hesitation marks [7].

Instruments other than short swords may also be used, such as razors and knives [2]. The European literature contains only descriptions of variant types of harakiri relative to the traditional procedure [1–6].

Case report

A 50-year-old Japanese man was found dead in his apartment in Rome. He was wearing nothing but his trousers and was sitting on the floor with his legs folded in the Japanese way and his trunk bent forward with his head touching the floor. There was a large pool of blood on the floor in front of the victim while the trunk showed only minor bloodstains. A knife of Japanese manufacture, with a 15-cm-long blade, was found near the right hand of the body.

Death was estimated to have occurred 2–3 days before. During external examination it was noted that there was only very faint hypostasis.

There were approximately six stab wounds, predominantly on the right-hand side of the neck, extending to about 3 cm left of the midline; some of them had run into each other and penetrated the subcutaneous tissue and the muscular layer. The cuts were gaping with dimensions of approximately 4×1.5 cm (except one with dimensions 9×4 cm; see Fig. 1) and had retracted edges; each had an obtuse angle upward and an acute angle downward. Four of these injuries were connected by superficial cuts involving predominantly the skin. The left subclavian artery was dissected next to the aortic arch.

In the abdomen, 7 cm above the transverse line at the level of the navel, there was a mainly horizontal cut injury with a portion of the intestine protruding from it (Fig. 2). This was 17 cm long with a vertical continuation 1-2 cm long, showing a blunt angle at the lower edge with bruising and superficial abrasions.

The internal organs showed signs of severe anemia; the lungs were slightly emphysematous; there were only small amounts of

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Fig. 1 The stab wounds have retracted borders, superior blunt angle and inferior acute angle. Some penetrate the subcutaneous tissue and muscular layer and four are connected by superficial cuts



Fig. 2 L-shaped lesion with a portion of the intestine protruding from it. A blunt angle with bruising and superficial abrasions is present at the lower edge of the vertical continuation

blood in the vessels; and the capsule of the spleen was contracted. There were no subserous cardiac hemorrhages. The walls of the intestine were undamaged. Toxicological findings excluded the presence of drugs or alcohol in the body.

Discussion

Various aspects of this case allowed it to be classified as a suicide by harakiri. In the house were found many books regarding ancient oriental religions and philosophy; the man was a teacher of Japanese martial arts; he was psychologically depressed because of the divorce from his wife and the departure of his son occurred a few days before his suicide. Furthermore the position of the subject, the absence of a shirt, and the abdominal L-shaped cut agree well with the known procedure of ceremonial harakiri.

The neck injuries could have been self-inflicted and can be interpreted as an attempt to avoid the pain caused by the abdominal wounds, which are known to be non-fatal in 50% of cases [9].

Theoretically, these wounds could also have been caused by another person aiming to shorten the agony. However, the neck injuries were situated in a confined and hidden area, which would be difficult to reach with the subject in the given position unless he exposed this area of the body. In addition, the neck injuries were roughly parallel with the superior blunt angle, which suggests that the injuries were inflicted with the edge of the blade oriented inferiorly.

These elements, together with the connecting superficial cuts, indicate self-inflicted stabs. It is likely that the victim inflicted the wounds quickly and repeatedly without completely extracting the blade for the subsequent stab. The course of the L-shaped lesion, with an obvious stab at the beginning of the vertical cut, also indicates self-infliction. Furthermore, other types of lesions (defense lesions, other types of violence) were absent, which also leads credence to the assumption of self-infliction.

All these aspects constitute an argument against a case of murder by consent, which must always be taken into account in cases of harakiri and which is of great importance for the evaluation by the legal authorities.

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