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Sexual Asphyxia in the Female

For many years an interpretation of the strange group of fatalities due to sexual asphyxia has been the cause of investigative difficulty for the police investigator, as well as for the forensic pathologist. We are aware that from a medical standpoint this phenomenon is termed "sexual asphyxia." The police community has long referred to these situations, particularly when the deceased is suspended by the neck, as "masochistic hangings." It should be understood, however, that asphyxia may also be a mode of death in other sexual cases, such as with the use of ropes, belts, plastic bags, and other varied accouterments.

The police investigator has in many instances seen considerable variation and detail in these cases. Therefore, critical to the investigative procedure is an ability to recognize the many bizarre aspects of this condition. The investigator must be able to discern those peculiarities which accompany masochistic behavior, such as fetishistic, ritualistic, or symbolic influences. These factors, accompanied by the fantasy usually present in these cases, enable the investigator to portray more adequately those facts which the physician, coroner, or pathologist will use to supplement his findings.

Typically in these cases we find a man or a boy bound and hanged in an unusual fashion, utilizing ropes, cords, wire, handcuffs, leg irons, or other devices of this type. Generally they will be partially or fully dressed in feminine garments, obvious transvestite behavior.

This behavior is many times accompanied by the inflicting of pain on various parts of the body with clamps, earrings, or clothespins. A very effective manner of inflicting pain is seen in many aspects of infibulation. This may also involve the use of clamps, cord, needles, chain, rattraps, fishhooks, and the like.

The scene of discovery is many times an attic, closet, basement, bathroom, or bedroom where a door might be locked. If the fatality should occur out of doors, the body is usually found hanged in a wooded area or in an abandoned or little-used shed or barn. In all of these cases there is a seemingly critical need on the part of the participant to avoid any intrusion or interruption during the hanging process.

Death in these cases many times comes as a surprise to those who know the victim, since generally there is no known psychiatric history or sexual disorder. This statement should be clarified somewhat by saying that there was no previous report or indication of psychiatric or sexual disorder.

The author, however, has seen literally dozens of cases involving various types of sexual disorders where those disorders were known to family, friends, or associates but

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were never reported to the police or to proper medical authorities. Nonetheless, the police ultimately are confronted with injuries or deaths, should they occur. For this reason, it is important that the police be continually aware of the ever-present danger of bodily harm inherent in these cases.

Considerable material has been written concerning the finding of male bodies under circumstances involving bondage, transvestism, and other bizarre trappings. In the police community there is an awareness that in these cases suspicion of murder has been aroused due to the binding of the body, a suspicion which may be more acute when the deceased has tied his hands in front of him and then "walked through" them so that they are firmly, and apparently inaccessibly, tied behind his back. Careful examination must be made to demonstrate that the ligatures could have been self-applied. Sometimes it will be found that the binding ligatures and those around the neck are interconnected, so that by pulling on a "key" point, or by moving the body in a particular way, the asphyxiating ligature can be tightened or released.

Much more often such cases are incorrectly considered as suicides when certain features, such as a door locked from the inside, appear to effectively rule out the possibility of murder. Such an incorrect interpretation is more likely when a lack of understanding of the true nature of this phenomenon does not allow a proper interpretation, although all the normal pointers to suicide are absent, including other self-inflicted injuries, notes, and the like.

These cases should always be considered as accidental deaths. However, they are not generally viewed in this way. Even when such findings are made, they are made for the wrong reasons, the common "explanation" being that the death occurred while the victim was experimenting with ropes, which means nothing. The fact that investigators do not appreciate the true significance of these deaths is often revealed by their description of the death as "inexplicable" or occurring while practicing the tying of knots for escapology or even for rock climbing. In fact, these deaths result from a search for sexual stimulation, which some deviates can obtain from such practices, in an attempt to obtain or to enhance orgasm. Apparently there is rarely a conscious intention by the deceased to take his life, although Litman and Swearingen did report one case [1].

The annals of forensic literature make almost no reference to accidental asphyxiation or strangulation during abnormal or aberrant sexual activity by the female. Camps [2] states that these cases "seem to occur exclusively in males," with a wide age range involved. Resnick [3] believes this activity is reportedly found only in males due to castration concerns. He points out that the exciting feelings which are associated with neck binding will lead to erection and this may or may not be associated with masturbation. As the behavior becomes more elaborate, bondage and fetishism may be added. Furthermore, he states, "The absolute absence of females reinforces the theoretical position that this syndrome is related to phallic anxiety concerns. Females do engage in other behaviors that enhance sexual sensations but without neck specificity."

However, a case involving the sex-related death of a 19-year-old girl from accidental strangulation was reported by Henry [4]. Therein he related that sexual asphyxial deaths in the male are not too uncommon and all have certain aspects in common. He opined, however, that such deaths in the female must be extremely rare in that he had been unable to find a "single report" in the literature. He found that the death of the female in this reported case was due to the accidental malfunctioning of a part of the victim's costume, which resulted in an unintentional strangulation.

Litman and Swearingen [1] have estimated that there are about fifty sexual asphyxia deaths in the United States per year. It would be interesting to know how many such

deaths occur which are not reported as due to sexual asphyxia but are judged as suicides. Furthermore, law enforcement agencies have at times investigated these cases from the standpoint of foul play.

For years we have seen and read of this type of perversion. The police see these cases time after time, yet there remains a lack of understanding in many cases. This is not due to the lack of cases. This paper reports a new dimension of this phenomenon in the form of an actual suspension involving a female which has clear-cut masochistic overtones accompanied by masturbatory activity and possible infibulation.

Case Report

This case occurred in a midwestern city in November 1972 and involved a woman 35 years of age, a divorcee with a nine-year-old daughter. The mother was found deceased by the daughter in the morning after the child arose from a night's sleep in an adjoining room.

The child had gone to bed at 10:00 p.m. the night before and upon awakening noticed a strange humming noise coming from her mother's room. After entering the room she found her mother hanging deceased in a small closet off the bedroom.

The victim was found completely nude lying on a small shelved space at the rear of the closet. Her feet were against the wall and her body was extended in a prone position, head downward, thus placing her legs and thighs in a horizontal position, resting on the shelved area from her feet to her waist. There was a folded quilt placed on the front portion of the shelf that was immediately under her abdomen and upper thighs. Behind the quilt and towards the rear of the shelf area was a broken cardboard box containing numerous books and other personal or family items. Her lower legs and feet were lying on these boxes, causing them to be at a slight upward angle from her waist.

It was estimated that the victim had been dead 10 to 12 h, as there was evidence of scattered postmortem lividity on the body. She died of strangulation. An electric vibrator connected to an extension cord was found running. The vibrator was positioned between her thighs with the hard rubber massaging head in contact with the victim's vulva. There was a string-type clothespin on the nipple of her right breast, compressing the nipple, and another clothespin of the same type was found immediately below her left breast.

In front of the shelved area, on the floor of the closet, was a laundry basket containing dirty clothes and another quilt was folded and placed on top of the dirty clothes. The victim's hands were resting on this folded quilt in an arms down position. The palms were facing upward. Over the place where the body was lying on this shelved area was a small narrow shelf 66 in. above the floor. This was attached to the wall by two steel brackets and the one closest to the shelved area had a nylon hose tied around it which formed a long loop. The victim had placed her head in the loop and placed a hand towel between her neck and the nylon hose. Her face was turned toward the wall and lying against it (see Fig. 1).

The investigating officer made several observations based on the body's position and condition at the time of discovery which are important:

1. Because of the position of the second clothespin on top of the quilt and due to the depressed or flattened nipple on the left breast, it appeared that this second clothespin had fallen off and dropped into the basket.

2. It was felt that the hand towel beneath the nylon stocking served as a padding to prevent damage to the neck. The padding in the form of the quilt on the shelved area in the closet was placed there in order that the deceased would be more comfortable.



FIG. 1—*Suspended victim in closet of residence.*

3. The victim placed herself in this position, placed clothespins on her nipples to cause discomfort, and used the electric vibrator for additional sexual gratification. The victim intended to support part of her weight with her arms, as in a push-up, but passed out. This relaxed her arms and the full weight of her body then came to rest on the nylon stocking around her neck, causing the strangulation.

Summary

The author has reported what appears to be a clearly defined masochistic hanging in the female. This is supported by many of the usual characteristics inherent in most male hangings.

Although it was not the function of the police, a background study of the victim by a medical authority unfortunately was not made, which is so often the case in deaths due to sexual asphyxia.

References

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