

CASE REPORT

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Death Investigation After the Destruction of Evidence

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ABSTRACT: Unavailable in the literature is any reference to an investigation of death after evidence has been destroyed. In this presentation two firearms and the bullet were melted after the death was certified as a suicide. A team of investigators conducted a psychological autopsy as well as shot patterns to determine the distance from the gun muzzle to the head to determine whether or not the wound was a contact type. The resolution of the case is discussed and the factor of local politics and case prominence in the media is reviewed.

KEYWORDS: criminalistics, forensic science, death investigation, evidence

Death investigators are frequently assigned or referred cases of death many years after their occurrence. These cases have various degrees of preserved evidence, often including autopsy reports, police investigation reports, coroners' investigations, and, occasionally, inquest transcripts. In past investigations, there have also been jury reports, civil-lawsuit transcripts, and, if the case had achieved notoriety, some media-coverage materials.

Initial police investigation efforts generally obtain physical evidence as well as witness statements, but these efforts are sometimes unsuccessful in terms of providing a successful resolution of the case. Under some circumstances, adjunct investigations conducted by experts can provide new focus and momentum to a stalled investigation.

In reference to adjunct investigations of death cases, a review of the literature has failed to reveal many examples in which the standard array of reports and evidence has not been available. Even more rare has been a type of case we recently investigated, in which evidence had been destroyed.

It is the purpose of this paper to describe the circumstances of a case in which the evidence had been destroyed and to illustrate how our analysis was conducted.

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The Death

A 52-year-old married white male was found in the master bedroom of his residence, in his bed, at approximately 10:30 A.M. on May 20, 1984. His body was located slightly to the right of center in a king-size bed. The decedent's face was somewhat in contact with the pillow, and resting in his hand was a nickel-plated Harrington and Richardson .32-caliber break-open revolver. The butt of the gun was slightly protruding into the right hand. The index finger of his right hand rested against the trigger guard but was not in contact with the trigger.

A bullet wound in the right temple was visible. Blood was seen trailing down the face in four separate streaks, with some smudging of blood on the right cheek. Blood had pooled on the sheet at the dependent surface of the face. In addition, brain tissue had oozed in a downward course parallel to the blood trail, confirming that the face had been in close contact with the pillow and that gravitational forces had been responsible for the blood and brain-tissue tracking.

A circular pattern of burnt gunpowder covered the anterior portion of the right ear and some of the right sideburn.

His left arm was extended perpendicular to his body, and his right knee was drawn up toward the abdomen.

The bed sheet and blanket were tucked neatly under his right arm, to a point near the right axilla, suggesting that the body position had not been altered from the time the bullet wound occurred.

The police reports revealed that at 10:25 A.M., a hysterical, screaming woman requested assistance via the police 911 emergency telephone system. Police responded and found the front door locked. The door was opened by the caller, who could only tell the officer, "Stairs, upstairs."

Another police unit arrived at 10:32 A.M., and the chief of police arrived at 10:35. A coroner's investigator arrived at 10:48 and then left about 20 minutes later, complaining of obstruction from entering the scene. He returned at 11:23 A.M., and a deputy coroner arrived at 11:28 A.M. The deputy coroner departed at 11:32, returned at 11:33, and then departed again at 11:42 A.M. The last person remaining at the scene was the chief of police, who departed at 12:31 P.M.

An examination of the decedent by the deputy coroner and police revealed lividity in a patchy pattern, with distribution consistent with the body lying on its left side.

The bullet was felt under the skin on the left side of the skull and showed a slight elevation of trajectory from the point of entry to the near-point of exit.

During the time of the initial investigation, the widow was hysterical and confused, stating that her husband had had a heart attack. She was taken to a local hospital.

Investigation of the scene revealed a tape recorder in the bottom drawer of the deceased's desk. This tape recorder had been used by the deceased to tape his wife's phone calls.

During the investigation police took custody of two guns found at the scene, the one from the deceased's hand and another from the bottom drawer of a chest of drawers. The other weapon was a blue 6.35-caliber Barretta with a magazine and eight rounds of ammunition.

An analysis of the firearm found in the deceased's hand revealed it to be a model produced by Harrington and Richardson about 1890. A spent cartridge with a firing-pin marking was seen in a shell casing in the 12 o'clock position. The next chamber in the cylinder was empty—a finding consistent with keeping the hammer on an empty chamber. Thus, if the gun were to be fired by pulling the trigger, the shell would then rotate to a live round. There were three live rounds left in the cylinder of the revolver.

At the scene, police and the medical examiner's personnel declared this to be a death

by suicide and determined that an autopsy was not necessary. The widow was not subjected to analysis for gunpowder residue.

In June 1984, a report regarding the revolver revealed that there were no fingerprints suitable for comparison. The metal-residue test on the decedent's right hand showed trace metal on finger number two, stipple marks on the top of finger one, high-velocity blood spatter on the backs of the fingers, and marks and stains on fingers four and five.

Although not widely accepted as a conclusive measure, the trace-metal detection tests showed positive on the palmar surfaces of fingers three, four, and five and on the tip of finger two, as well as the stipple marks.

Barium and antimony studies conducted in July 1984 showed the presence of these two chemicals on the back of the right hand and the left palm, and the findings were consistent with significant gunpowder residue.

Psychological Autopsy

The deceased was born in Chicago and was from a very poor family. He was a brilliant student, who was bored with high school and was unable to go to college initially because he lacked the money. He did eventually achieve a bachelor of science degree in finance from the University of Illinois, and he took graduate courses in economics. He also completed a correspondence course in economics. He was a compulsive reader, digesting all kinds of information, including not only business information but also trends in fashion and sports.

He was essentially a brilliant, well-educated man, a man of high energy who had truly risen from poverty to wealth and was still driven to succeed. According to psychological testing that was done by a prominent stock-brokerage firm, however, he had disdain for other people. He lacked a natural caring attitude toward others; he was not a team player. He was flamboyant in what he did, both in business and for entertainment.

Interestingly, after his father died; he prevailed upon his brother to let him have their father's Harrington and Richardson nickel-plated revolver. He had never been known to fire this gun or to clean it.

His income level after he became a stockbroker seesawed. Money was the most important value in his life. He would often say, "If there's no money, there's no life."

He was a "night-owl" type of person, who did not sleep much during the night, was hyperkinetic, and liked driving for long distances in the middle of the night.

In early 1984, his personality underwent a radical change, and he began drinking heavily and smoking again after having given it up for several years. He also began screaming at his wife about little things. He was having blackouts and was told by a doctor that he had to work out his problems. For reasons that are unclear, he had never been referred to a psychiatrist. He was suspicious about his wife's whereabouts and had taped her telephone calls. He had temper tantrums and began to indicate that he thought he was a spy and that he was so intelligent he was infallible. These episodes were followed by depression and social withdrawal.

The decedent had invested millions of dollars in the bond market and had lost almost \$500,000. He had borrowed \$100,000 against his own house, which he had also invested and had lost. And he had lost huge amounts invested for clients. His clients were putting pressure on him, and he was facing lawsuits due to these losses.

The Plot Thickens

After the death of her husband, the widow had expressed interest in having the firearms destroyed. She had always been phobic about firearms. The chief of police granted her

wish, and these firearms were melted by blowtorch in the city maintenance department. Along with the firearms, the death bullet was melted.

Many months later, because of political pressures within the police department, complaints were aired to the city council. The chief of police was criticized for what amounted to incompetence.

Because of allegations of incompetence regarding both the investigation and the way the chief of police ran the department, the chief was forced to resign. A new chief of police arrived from another state, where he had been chief of police of a larger community.

The deceased had three children from a previous marriage. Two of these children, a son and a daughter, questioned whether the death was a suicide or a homicide, and they pressed for a grand jury investigation. Among their reasons, they believed that because the widow had inherited some \$700,000 from a life-insurance policy, there existed a motive for homicide.

Questions were also raised about whether the chief had attempted to cover up the investigation of this death by deliberately preventing the coroner's investigator from entering the scene for some 20 minutes.

In the weeks following the death, a great deal of publicity was generated. Since then, newspapers have consistently printed stories about this "unsolved murder." Television programs such as "Geraldo," "Current Affair," and "Trial Watch" have presented accounts of this death as if it were a covered up murder.

The grand-jury report, dated December 14, 1989, concluded that the cause of death of the deceased was homicide. In support of their finding, the jurors enumerated their conclusions, including:

- (1) the firearm was one to two inches from the head, which it would never be in a suicide;
- (2) the position of the body would have made a self-inflicted gunshot awkward or impossible;
- (3) the deceased appeared to be in a sleeping position when shot;
- (4) the gun appeared placed in his right hand rather than held;
- (5) a police officer felt that the widow's grief was contrived;
- (6) after the death, the widow received \$700,000;
- (7) the widow had been beaten and abused by her husband;
- (8) the widow believed that her husband had had her followed;
- (9) there was no suicide note left; and
- (10) there were no fingerprints on the weapon.

At the grand-jury hearing, the widow stated that on the night prior to his death, her husband was very loving at dinner. His mood then changed to one of being quiet. After their children had gone to bed, he was in the office in their home, smoking and drinking, and he stated that he wanted to work out his problems by himself.

Later that evening, he became paranoid, running into their bedroom, screaming at her that she was a liar. He accused, "You're a whore, just like my mother, admit it. . . ." He then grabbed her and shoved her, cutting her lip with his thumbnail as he slammed her head against the headboard two times. He then apologized after he caught sight of the blood. He wanted to make love to her, but she was having her period. He wanted reassurance that she loved him; after he cried for a while, she fell asleep in his arms. Between two and three o'clock in the morning, he awoke, went into his office, and began smoking and drinking. When she also awoke and found him there, he said, "We're going to be OK now. You will never have to worry again, Baby. You go back to bed and I'll be back in a few minutes."

When she awoke about 7:00 A.M., he was sleeping beside her. She left the house at

about 7:30, took the children to Sunday school, purchased gasoline and had the car washed. She then did some shopping and talked with some neighbors, and then returned home to check on the coffeepot: her habit was to have a pot of coffee ready for him when he awoke. She went to check him and found him dead in their bed.

When she took the children to Sunday school, she had turned off the house alarm; their house rule was that if an adult was alone at home, the alarm was left off. She and the children left through the garage, thus leaving the front door still locked. When she returned, she came through the garage to the kitchen, and the front door again remained locked.

This case fundamentally never died in the media. Although the case had been closed, although the grand jury had issued no indictment, interest in and coverage of the death continued—because there were important questions that had been left unanswered.

The Solution

These authors, along with five other experts, were invited by the police department and the city council to analyze the evidence that was still preserved and to meet to discuss the cause of death. Each member was issued a set of death-scene photographs, the photographs of the revolver, the grand-jury transcripts and findings, a videotape of the television coverage, and a file of the newspaper coverage that had been generated about the death. In June 1992, some eight years after the death, the team assembled for a meeting in the community in which the death had occurred.

It was our view that this was a death from suicide. We concluded that the deceased suffered from a severe mental disorder known as *bipolar disorder, mixed type*, or *manic-depressive psychosis*. According to the DSM III-R [1], the decedent met the criteria for manic episode.

In the manic syndrome, there must be distinct periods of abnormality and persistently elevated, expansive, or irritable moods. This the deceased showed by behaviors including his violent physical and verbal assaults on his wife. After one assault, she had submitted photographs of her bruises to the chief of police.

During his mood experiences, the decedent displayed symptoms illustrating criteria necessary for such a diagnosis. He showed inflated self-esteem, or grandiosity, believing that he was working as a spy and that he was a much more prominent and successful stockbroker than he actually was. He had a decreased need for sleep and was characterized as a “night owl.” He was more talkative than usual and showed pressured speech. He showed flights of ideas and rapid cycling of moods, even within the few hours immediately prior to his death. He was easily distracted and could not sit still for more than a few minutes at a time. Some of these findings were evidenced in 1972, when he was tested by a psychologist retained by the brokerage firm for which he worked. The decedent would have an increase in goal-directed activity and would work tirelessly and endlessly; then, he would become so depressed that he withdrew. In another manifestation of his grandiose and flamboyant style, he took his family on an expensive cruise at a time when he could least afford it.

His mood disturbances were significantly severe to cause marked impairment in his occupational functioning and social activities. During his depression and subsequent withdrawal, he would stay behind locked doors for long periods of time. All of these criteria are consistent with a hypomanic episode.

In the major depressive phase of his condition, the decedent showed a depressed mood, loss of interest in pleasure, irritability, insomnia, diminished ability to concentrate, and psychomotor agitation as well as retardation. The fact that he had requested possession of his father’s revolver suggested a bond with the deceased father, a soft sign of possible

suicidal intent to join his father. In his depression, he also showed poor judgment investments made for clients.

We disagreed with *all* of the findings of the grand jury. We determined that the gunshot wound was a contact wound because soot was deposited in the ear and part of the sideburn area. Had the gun been held one to two inches away, it would have left a much broader pattern of soot deposit (Fig. 1). This point was validated by one of the members of our investigation team, a former FBI agent and an experienced director of a crime laboratory, who performed gunshot-residue tests to illustrate that the pattern was consistent with the firearm being held *one millimeter away*.

We demonstrated that such a position would not be awkward or inconceivable for a self-inflicted gunshot wound. The left hand could have been used to steady the barrel of the gun and hold it in place, which would account for the gunpowder residue on the palm of the left hand. Furthermore, gunpowder residue on the back of the right hand would have been unlikely had this been a homicide.

(Figure 2) The body was near the center of a king-size bed. It was determined that it would have been very difficult for anyone to lean over and shoot the decedent without putting a knee on the bed, thus probably awakening the decedent. In fact, the trajectory of the bullet, from the right temple to the left temple, was almost straight through, with only a slight elevation, which probably could not have been accomplished without straddling the person.

Many people, including those with whom the widow stayed immediately following the shooting, attested that her grief was legitimate and very painful.

The widow spent the majority of the inheritance on the debts incurred by the deceased and achieved little economic gain from his death.

News clippings revealed that the widow had felt that she had made a commitment to



FIG. 1—Deceased in center of bed, head down. Homicide wound impossible with body in this position.



FIG. 2—Contact wound powder deposits on right ear.

her marriage. In spite of the abuse that had taken place, she had previously determined to stick with her marriage because she loved her husband.

In reference to the lack of a suicide note, studies have shown that notes are left in only a small percentage of suicides [2].

Finally, the fact that there were no fingerprints on the weapon is not significant because experience has indicated that fingerprints are found in only about 12% of all cases.²

The presence of canolure observed on the projectile in a photograph taken while the bullet was being removed from the decedent ensures that the weapon used in this shooting was the .32-caliber revolver, not the Barretta pistol.

It was our collective opinion that the bluish discoloration on the thumb of the right hand of the deceased and on the cylinder of the revolver represented gunpowder residue. This finding provides additional photographic evidence that supports the conclusion that a self-inflicted gunshot wound was the cause of death.

All members of the team concurred that this was a death by suicide. We agreed that it would have been a proper procedure to have bagged the hands of the widow and to have tested her hands for gunpowder residue. However, this procedure is still not performed by most police departments when it is felt there is substantial evidence of suicide.

It also appeared that the chief had not specifically prevented the coroner's investigator from being admitted to the scene. The chief had left instructions with a police officer relatively new to the force not to admit anyone beyond his station at the front door. The officer was apparently unfamiliar with the fact that the coroner's investigator is always entitled to entry upon arrival.

²Personal communication, Irving C. Stone, Ph.D., Chief, Physical Evidence Section, Institute of Forensic Sciences, Dallas, Texas, at meeting in Greenwood Village, Colorado, November 20, 1992.

Finally, the decision to melt the weapons and the death bullet was not felt to be evidence of obstruction of justice. The timing of the procedure in this case appeared to be an error in judgment; such evidence, of course, is generally retained for as long as a question regarding the death exists.

Conclusion

This man died from a suicide. The media and local politicians created a great many questions—for a great many reasons—about the cause of this death. The ensuing confusion and conflict were exacerbated by the grand jury's declaration of homicide—and by its corroborative findings—primarily based on erroneous assumptions about the evidence of suicide and homicide. The grand jury had been misinformed for reasons that are not made clear in the records.

It is advisable for any law-enforcement investigative unit to have access to those who are trained and experienced in the field of psychological autopsy. The impact of psychological information as it relates to whether a decedent intended for his or her death to occur is a significant factor that can be examined through professional death analysis. It is vital that physical evidence also be carefully retained in case such questions do arise. This case illustrates the need to turn to experienced adjunctive death investigators for answers that cannot be obtained by traditional means.

References

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