

CASE REPORT

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Homicide Attempt with a Japanese Samurai Sword*

ABSTRACT: The use of Japanese swords for homicidal attempts is rare. A Japanese samurai sword is a sharp and cutting object. When faced with the use of this weapon, one must distinguish between stabs and incised wounds. Incised wounds can rarely lead to death, but because of the size of the weapon, stabs usually cause much more serious injuries. Stabs also imply a penetrating movement, whereas incised wounds can be the consequence of protective circular blows. Therefore, it is important to distinguish clinically between these two kinds of wounds. We report a case where the perpetrator argued he had given a circular blow, unfortunately hitting the victim. The pieces of evidence are discussed.

KEYWORDS: forensic science, Japanese sword, homicide, evidence

There are very few reports on injuries caused by the use of a samurai sword in the literature (1). Samurai swords are mainly decorative elements either bought in a decoration store or brought back from a journey, especially in Asia, and they are usually not sharpened. We report the case of a young man injured by a sword which his assailant had brought back from a journey in the French Caribbean and had sharpened after his return to France.

Case Report

A 30-year-old man and a 27-year-old man struggled in the parking area of a shopping center near Strasbourg in January 2001. The elder man pushed the other who fell to the ground. Seeing the younger man getting up and running to his car, the elder managed to get back to his car and start his engine. As the elder man raised his head he saw his assailant running towards him with a samurai sword held with both hands. The elder man heard two blows on his car and felt pain on the right side of his chest. The victim managed to escape and to drive to the nearest hospital. He was admitted into the emergency unit of the Hospital of Strasbourg presenting with a right 2.5-cm long low thoracic wound caused by a sharp force. He underwent a CT-scan examination which showed a right haemo-pneumothorax, a wound of the liver and blood in the peritoneal cavity.

The victim underwent a rapid laparoscopic exploration of his abdominal cavity. A 2 to 3-cm long diaphragmatic wound and a 4-cm long clotted penetrating wound of the liver, obviously at the origin

of the bleeding, were seen. The right haemo-pneumothorax was treated with a drainage tube, whereas the wound of the liver was clotted, and thus needed no additional treatment.

We were asked by the public prosecutor to examine the victim and to try to sort out what could have happened. The victim was examined in the hospital. Skin examination showed a thin 2.4 cm long right latero-thoracic stab wound located between the 6th and 7th ribs (Fig. 1).

The victim explained that he had been attacked while sitting in his car in the parking area of a shopping center by another man armed with a Japanese sword with whom he had already quarreled a few months earlier. According to his statement, the perpetrator gave a first blow on the windscreen of the car, a second blow on the front right passenger's car window, and finally a third penetrating blow which passed through the space formerly filled by glass after the glass was broken by the second blow. The final blow hit the victim on the right side of his chest.

The assailant was quickly identified and arrested by the police. He gave another version arguing that he had only given two circular blows and that the second blow, which had been given on the front right passenger's window, had unfortunately hit the victim.

The public prosecutor gave us the opportunity to examine the sword and the victim's clothes. The sword was a sharp, pointed tip, 76-cm long, 2 to 3-cm wide copy of a Japanese sword as used by samurais, bought by the assailant during a trip in the French Caribbean and sharpened by himself (Figs. 2 and 3). The entire blade was stained with blood. Blood samples were taken for DNA typing which matched the victim's DNA. The clothes worn by the victim were an anorak, a sweater, and a polo shirt. On each of these clothes, a 2 to 3-cm long slit could be seen. This gave evidence for a penetrating movement of the sword and was inconsistent with a circular blow. Also, the CT-Scan showed a deep 4-cm long wound of the liver giving another argument for a penetrating wound.

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FIG. 1—Picture showing the latero-thoracic 2.5 cm long stab wound of the victim (black arrow). Below is a stitched surgical incision.



FIG. 2—Picture showing the sword and its sheath.

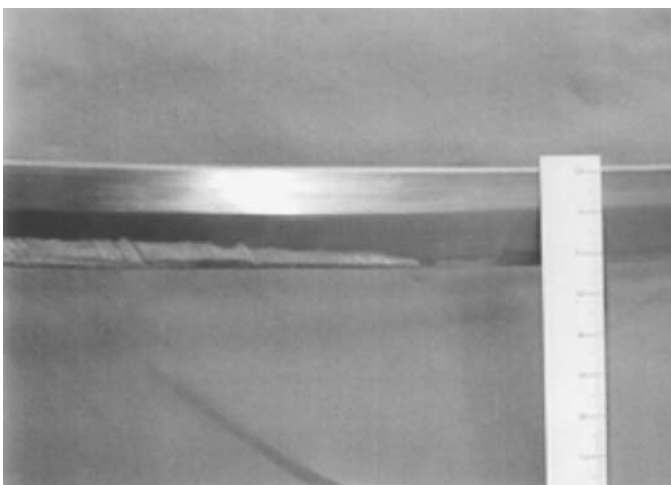


FIG. 3—Picture showing the “self-sharpened” sword.



FIG. 4—Picture showing the impact found on the front upper part of the right front passenger door of the victim’s car.

Finally a reconstruction was made, during which the car could be examined. Two impacts were seen on the right front door near the window, which were consistent with a blow given from up to down and front to back confirming the second blow described by the victim (Fig. 4). A witness of the attack showed clearly a final penetrating movement of the sword in the car and confirmed the victim’s version of the attack.

Discussion and Conclusion

Sharp injuries are the leading cause of homicide in France where there exists a strict gun control law such as in the United Kingdom, Canada, or Sweden (2–4). The weapons used are usually kitchen utility knives or daggers. Nevertheless, other weapons can be used such as a bayonet, broken glass, scissors, razor blades, an axe or a screwdriver (3,4).

The use of samurai swords is very uncommon, especially in France. In our case, the sword had been bought in a souvenir shop in the Caribbean and sharpened by the perpetrator. He alleged its use as a self-defense weapon and carried it in the trunk of his car.

Swords of this type can create either stabs or incised wounds. Stabs are created by a penetrating movement of the sword into the victim’s body. Incised wounds are usually created by circular movements of the sword hitting the victim with the edge of the blade and can therefore be sometimes explained by the perpetrator as wounds created while trying to protect himself. Incised wounds can rarely lead to death, except when the blow is given towards the neck area or with maximum strength, but incised wounds may cause serious injuries to the arms and legs (1). Because of the size and sharpness of the weapon, stabs usually create much more serious injuries and may lead to death by internal hemorrhage.

For these reasons, stabs must be distinguished from incised wounds to give sufficient argument to the court for a possible homicide attempt. In this case, close examination of all the evidence (the sword, the clothes of the victim, the size of the skin injury, the aspect of the thoracic and abdominal CT-Scan) could confirm the victim’s statement of a penetrating movement leading

to a stab wound thus leading to a qualification of homicide attempt. Our findings were inconsistent with an accidental circular blow unfortunately hitting the victim.

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