STRANGULATION

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Strangulation is a form of death where constriction of the neck by a ligature or any material without suspension of the body.

- 1. Ligature strangulation
- 2. Manual strangulation by hands (throttling)
- 3. Garrotting (ligature strangulation by approaching the victim from behind)
- 4. Mugging (compression of neck by elbow, foot or wrist)
- 5. Bansdola (compression of necks by using stick)
- 6. Accidental strangulation

Cause of death in strangulation:

Combination of asphyxia and venous congestion is the usual cause of death. Vagal shock may occur in case of manual strangulation. Cerebral ischemia and injury to cervical vertebrae is sometimes seen.

POSTMORTEM FINDINGS

• External Findings

Ligature mark is normally horizontal, situated below the thyroid cartilage and encircles the neck completely and reaches the occipital region. Multiple ligature marks are suggestive of homicidal strangulation. If the victim is dragged by the ligature, the ligature mark may be oblique and upwards. Ligature marks may be faint or absent if soft fabric is used and released quickly after death. Fingertip bruises, nail scratches, abrasions over the neck indicate possibility for homicide. Presence of ligature material on the neck indicates strangulation. A transparent adhesive tape can be used to lift and collect the ligature material from the body.

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Scratch abrasion may be present under the ligature mark, which indicates the victim had struggled to remove the ligature. Fingernail scrapings of the victim may show skin fragments and blood. In manual strangulation, multiple fingertip bruises may be present over the neck, along with the windpipe, depending on whether one or both hands are used by the assailant. Various sized contusions of fingertip around the neck muscles more towards the nape of neck are homicidal. If two sticks are used for strangulation, there will be horizontal marks on the front and nape of the neck. Severe internal damages or injuries are also scene in these cases.

Internal Findings

Neck structures are examined after the examination of the cranial and thoracic cavities. Laceration of the carotid artery and internal coats with extravasation of blood into their walls. Fracture of cornu of hyoid bones and superior cornu of thyroid cartilages is mostly observed in adults above 40 years of age. Frothy blood will be present in the upper respiratory tract and will be congested. The lungs will be congested with petechial and exude dark fluid blood is on the cut session. The right side of the neck will be filled with dark blood and the left side will be empty. The brain and the abdominal organs will be congested.

MEDICO LEGAL QUESTIONS RELATED TO STRANGULATION

- 1. Whether death occurred by strangulation?
- 2. Whether the strangulation was suicidal, homicidal or accidental?

WHETHER THE DEATH WAS DUE TO STRANGULATION?

The injury caused by neck structure, ligature material present, number of ligature marks etc. indicates the possibility for strangulation. Presence of ligature mark is not a conclusive proof of death by strangulation, as skin fold and necklines may also look like ligature mark.

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WHETHER STRANGULATION WAS SUICIDAL, ACCIDENTAL OR HOMICIDAL?

Suicidal throttling is not possible as the victim cannot pressure himself for duration needed to cause death by compression of neck. A ligature tied around the neck and twisted by a stick below the mandible, may cause suicidal death by the ligature. In homicidal strangulation, the ligature may be tied with one turn and one or more knots may be present. When there are multiple turns present, each turn will be tighter than the previous one. Evidence of struggle, injuries, violence, intoxication or the hands and feet may be tied. Accidental strangulation may occur in case of the neck tie or dupatta caught inside a machine or vehicles. Tightening of the umbilical cord around the neck may cause death of infants in utero or childbirth stage.

REFERENCES

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