



Pathology & Biology Section – 2005

G59 The Dangers of Dumpster Diving: Deaths Associated With Garbage Collection in the Tidewater Region of Virginia

Leah L. Bush, MD, Office of the Chief Medical Examiner, Tidewater District, Commonwealth of Virginia, 830 Southampton Avenue, Suite 100, Norfolk, VA 23510-1046; and Wendy M. Gunther, MD, Office of the Chief Medical Examiner, Tidewater District, 830 Southampton Avenue, Suite 100, Norfolk, VA 23510-1046*

After attending this presentation, attendees will be able to recognize characteristics of crush and asphyxial injury inflicted by garbage collection machinery on persons within dumpsters. Pertinent considerations in such deaths of the contribution of toxicology, natural disease, and history, and the effect on diagnosis of antemortem from frequently seen decomposition artifact will be reviewed. Public policy consequences of such deaths will also be briefly reviewed.

This presentation will impact the forensic community and/or humanity by reviewing an unusual but recurring situation in which homeless persons or others are crushed to death in garbage dumpsters. The presentation reviews, autopsy findings, mechanism of death, and role of artifacts of decomposition in determining cause of death.

Four cases accumulated over an 11 year period illustrate an infrequent, but recurring, danger for poor or homeless persons, who die during garbage collection.

In 1993, the fully clothed body of a 51-year-old man was found by employees of a sewage and trash processing plant when a garbage truck dumped out the trash collected from a dumpster in Norfolk, Virginia. At initial examination on scene, a gaping laceration was evident in the lower abdomen, with exposed bladder wall. At autopsy, diffuse changes of decomposition did not obscure extensive crush injury, including cervical spine, femur, and iliosacral fractures, fragmentation of the liver, diaphragmatic rent with traumatic herniation of the stomach into the chest, and a ruptured ileocecal junction. These injuries were consistent with death during trash compaction.

The decedent proved to be a homeless man with a history of heavy alcohol intake, last seen by his family two to three days before his body was found. Although investigation never proved what he was doing in the dumpster, it was possible that he was either looking for recyclable items, or may have fallen asleep there. Toxicology showed ethanol at 0.15 mg %.

In October of 1994, the body of a 48-year-old woman was found in the Hampton, Virginia landfill. At external examination, there were multiple abrasions and contusions, with areas of confluent contusion; the face was suffused, with dark purple contusions of the lips, and surrounding both orbits. At autopsy, there was severe crush injury, with fracture, dislocation, and transection of the cervical spine at both C1 and C7, and bilateral rib fractures with flail chest. There was also a healed myocardial infarct. She proved to be a vagrant from the neighboring city of Virginia Beach, with a history of diabetes and psychiatric problems, who was known to go through trash depots looking for salvageable materials. Toxicology showed a high but not lethal level of carbamazepine, with butalbital and oxazepam. It appeared that she might have climbed into a dumpster, collapsed from the toxic effects of her drugs or from a cardiac event, was later picked up by the trash-compacting truck, and was then crushed.

In November of 1994, the body of a 37-year-old man was found after a non-compacting trash truck dumped out its load at a sewage and trash processing plant. He did not have any crush injuries. Autopsy showed diffuse bilateral scleral and conjunctival hemorrhages, purple suffusion of the face, marked edema of the face and lips, epiglottal petechiae, contusions of the neck structure, and further contusions of the chest and back. Death was ascribed to traumatic asphyxia, which he would have sustained when tons of trash were placed over his body. Toxicology showed numerous toluene derivatives. Although investigation did not show how he entered the dumpster, he may have been seeking a place to inhale glue vapors, and could have been overcome by the drug.

In 2004, the crushed and decomposing body of a 60-year-old homeless man was found at a dump site near housing debris. Autopsy was able to show, despite extensive decomposition, that crush injuries had occurred antemortem. He had been known to sleep in an abandoned house that was demolished six days previously. Public reaction to the death caused re-evaluation of housing demolition policies.

This discussion will review the mechanism of death, immediate and underlying causes of death, contribution of natural disease and toxicology, and obstacles to determination of cause produced by decomposition, for persons dying in trash compactors. Review of these cases may heighten awareness of the dangers encountered by homeless persons foraging in dumpsters.

Garbage Dumpsters, Crush Injury, Traumatic Asphyxia