

E66 An Unusual Suicide With Multiple Stab Wounds

Claudia Rosa, MD, S.C. Medicina Legale, ASL Città di Torino, Torino, Piedmont 10123, ITALY; Roberto Testi, MD, ASL Città di Torino, Torino 10145, ITALY; Silvia Boca, Viale Europa, Catanzaro, ITALY; Matteo A. Sacco, MD*, Chair of Legal Medicine, University of Catanzaro, Catanzaro 88100, ITALY; Carmen Scalise, MD*, University of Catanzaro, Catanzaro, ITALY; Angelica Zibetti, MD, Institute of Legal Medicine, University of Catanzaro, Catanzaro, Catanzaro, ITALY; Pietrantonio Ricci, PhD, University of Catanzaro, Catanzaro, ITALY; Isabella Aquila, MD, PhD*, Institute of Legal Medicine, Catanzaro 88100, ITALY

Learning Overview: After attending this presentation, attendees will understand the role of the differential diagnosis between homicide and suicide in cases of multiple stab wounds.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by demonstrating the importance of comparing the data at the crime scene with the analysis of the topography of the external and internal injuries found at autopsy.

Stab wounds are injuries produced on the tissues by pointed and/or cutting instruments. Statistically, the finding of stab wounds on a corpse, especially when they are multiple and located in different topographical areas, is attributable to a homicide. However, to avoid potential errors with important judicial repercussions, before providing a definitive judgment on the event, the coroner has the duty to assess the possibility of a self-injurious event through an accurate differential diagnosis. Described here is a rare case of suicide with a stab weapon in which numerous injuries were found. Only the careful comparison of the scientific evidence that emerged from the crime scene investigation, the autopsy, and the histopathological investigations allowed the reconstruction of the real manner of the event.

A male corpse was found inside the bathroom of a bakery located in the Municipality of Vauda Canavese (Turin, Italy). The coroner carried out an initial judicial inspection at the crime scene and described the presence of a sharp weapon (kitchen knife) in the left thoracic region, the presence of numerous puncture and cut injuries of various depths to the anterior region of the neck and in the left hemithorax. The judicial inspection coordinated by the Operations Department of the Scientific Investigations Section in aid of forensic doctors called by the judicial authority allowed the description of the state of the places with greater attention and verified that the blood stains were present only on the floor and on the walls of the bathroom, with particular attention to the portion of the bathroom where the corpse was found, in the absence of directed projections from/toward the entrance door of the room. The forensic pathologist performed an autopsy and described 22 oval puncture and cut injuries penetrating the skin and subcutaneous tissues externally in the anterior cervical region and about 20 stab and cutting wounds in the left precordial and axillary region. At the internal examination, with the knife removed, a non-penetrating wound in the chest was observed, nine continuous solutions from the tip and a cut through the left lung on the anterior and posterior side with abundant blood into the left pleural cavity. During the autopsy, fragments of various organs were taken for histological investigation. A urinary screening examination was carried out using the triage method for the main substances of abuse with a positive result for benzodiazepines. Second-level toxicological investigations conducted on blood confirmed the intake of benzodiazepines (diazepam) and its metabolites (nordiazepam, oxazepam, and temazepam). The data collected with the medicolegal technical investigation of specific competence, together with the circumstantial data, made it possible to conclude that the man died following a hemorrhagic shock from multiple tip and cutting injuries in the neck and in the precordial region resulting from an unusual suicide. The positivity for psychotropic drugs was probably attributable to the voluntary intake of drugs by the man in order to strengthen his intent.

The case reported demonstrates how important it is to make an accurate differential diagnosis before ruling out suicide. For this purpose, it is suggested to carefully evaluate the areas drawn. Usually, the suicide by swab weapon is carried out by drawing on the precordial region, the neck region, or the epigastric region, and the blows are inflicted with denudation of that skin area.

In homicide, however, it is much more frequent that the affected areas are random, due to the excitement of the event and the high probability of a fight before death. For this reason, it is essential to carefully investigate the presence of active and/or passive defense injuries attributable to an attempt to defend oneself by the victim. For this purpose, this study suggests investigating the presence of active defense wounds on the palms of the hands (in an attempt to block the blade), passive defense wounds on the back of the hands (in an attempt to defend against inflicted blows), and dodging wounds (caused by attempting to evade blows). The case reported demonstrates that the number of blows inflicted, even if numerous, is not sufficient to exclude suicide with certainty, because it is possible that the victim also self-inflicted multiple blows in an attempt to die, as in this case.

Forensic Sciences, Suicide, Stab Wounds