

H37 Excited Delirium Unassociated With Police Involvement

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Learning Overview: The goal of this presentation is to educate attendees about excited delirium syndrome and present examples of excited delirium where police have not been involved.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by enhancing the ability of attendees to understand the diagnosis of excited delirium syndrome.

In the wake of several high-profile deaths associated with police involvement, several articles have been published in the lay press questioning the existence of the diagnosis of excited delirium syndrome.¹⁻⁵ These articles imply that the diagnosis has been used in lieu of associating a death with police involvement. In other words, as a way of covering up a death that has been caused by "excessive force" on the part of police officers. It is also implied by these articles that in the absence of police involvement, the diagnosis of excited delirium syndrome does not exist. The purpose of this presentation is to present several cases of excited delirium without police involvement that have presented to the Erie County Medical Examiner's Office over the past five years.

Although rare overall, in forensic pathology, it is not uncommon to see deaths that are related to premortem or perimortem behavior consistent with the clinical diagnosis of excited delirium syndrome.⁶ Often the decedent's behavior is associated with an underlying natural disease or an intoxication that has caused the decedent to exhibit bizarre or psychotic behavior.^{7,8} While in the classic clinical definition of excited delirium syndrome, no definitive cause of death is identified, per research, deaths have been ascribed to unnatural causes, such as injuries that the decedent has sustained, the decedent's underlying natural disease in the setting of an agitated state, or the direct effect of the disease or intoxicant on the decedent's body. In certain cases, the decedent's bizarre behavior has been witnessed by one or several individuals, while in other cases the only clue to the decedent's premortem or perimortem behavior is the state of their surroundings.

A review of files identified four deaths associated with decedent behavior consistent with the clinical diagnosis of excited delirium syndrome. In two of these cases, the decedent was witnessed by multiple people to exhibit psychotic behavior in the premortem and/or perimortem period. In the other two cases, the decedent was discovered with injuries or in surroundings that demonstrated that the decedent was exhibiting psychotic behavior before their death, such as destroying furniture or punching walls. The decedents were pronounced dead in the hospital in the two former cases where their behavior was witnessed, and the decedents were discovered dead at the scene in the latter two cases. Of note, in one of the cases where the decedent was discovered dead, there was a history of previous incidents of psychotic behavior. In two of the cases, the psychotic behavior was associated with an acute viral encephalitis, one case was associated with dementia pugilistica, and one case was associated with an acute cocaine intoxication.

Excited delirium syndrome is a condition characterized by psychomotor agitation and confusion, often associated with psychotic behavior and death.⁸ Further investigation often reveals that the person in question has an underlying natural disease or an acute drug intoxication that may explain their behavior. Although in some well-publicized instances there has been police involvement due to the behavior of the persons involved, this is not invariably the case. The purpose of this presentation is to document cases where decedents have exhibited symptoms consistent with the diagnosis of excited delirium syndrome and deaths have occurred in the absence of police involvement.

Reference(s):

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Excited Delirium, Law Enforcement, Psychosis