

Medical Issues in Abuse/Neglect Cases: Strangulation and Suffocation

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This webinar is sponsored by the Adult Protective Services Program at the Illinois Department on Aging under a grant awarded by the Administration on Community Living.

Trained case workers at local provider agencies conduct investigations and provide support in resolving reports of abuse, neglect, financial exploitation, or self-neglect involving adults with disabilities (age 18 – 59) and other older adults (age 60+) living in community-based (non-institutional settings).



Disclaimer

 This presentation is provided for general information purposes only and does not constitute legal or professional advice.

• The views expressed in this presentation are those of the speaker and may not necessarily represent the policy interpretations and procedures issued by the Adult Protective Services Program at the Department on Aging.

Session Objectives

- Recognize that strangulation and suffocation occur in later life
- Describe common signs and symptoms of strangulation and suffocation
- Understand the serious risks associated with these types of assaults





WARNING

This presentation contains graphic images that may be disturbing to some viewers.

Strangulation and Suffocation: Overview

- Occurs across the life span
- Often overlooked when the victim is elderly or has one or more disabilities
- Potentially lethal form of assault unconsciousness may occur within seconds and death within minutes
- Related to intimate partner violence, sexual assault, and sexual assault-motivated homicides

Definition: Strangulation

- Strangulation is the application of external force to the neck closing blood vessels and air passages.
 - Deoxygenated blood in the brain is prevented from returning to the heart as oxygenated blood being pumped from the heart to the brain backs up. As pressure increases, arteries become obstructed as blood flow and oxygen are stopped. Brain cells begins to die from loss of oxygen.
- Methods:
 - Hanging
 - Ligature strangulation
 - Manual strangulation

Definition: Suffocation

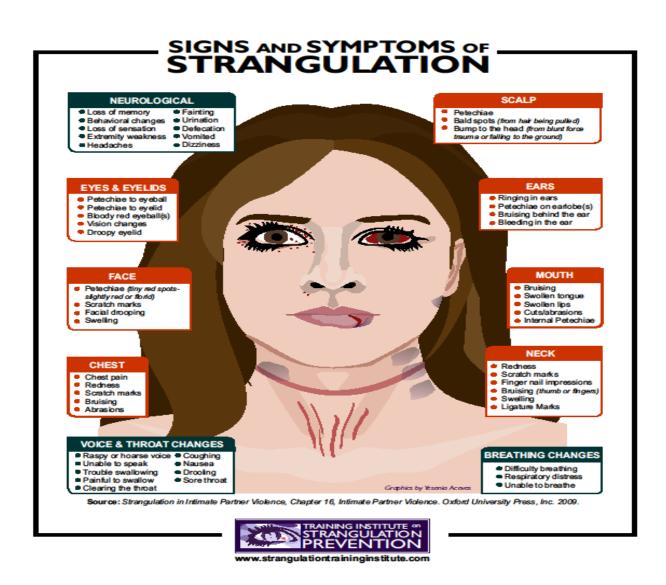
Suffocation is impeding the flow of oxygen into the nostrils and/or mouth.

• Methods:

- Covering the face with a hand or pillow
- Covering the victim's mouth and pinching nostrils to prevent breathing
- Forcing the victim's face down onto the floor or into a bed to prevent breathing
- Sitting or straddling a victim's chest or abdomen which prevents the chest wall from expanding to breathe
- Placing a plastic bag over the victim's head or duct tape across the victim's face
- Turning off medical equipment that assists a victim with breathing

Strangulation and Suffocation

https://www.alliancefor hope.com/wpcontent/uploads/2021/ 09/1.-Esperanza-Signs-Symptoms.pdf



Strangulation Injuries

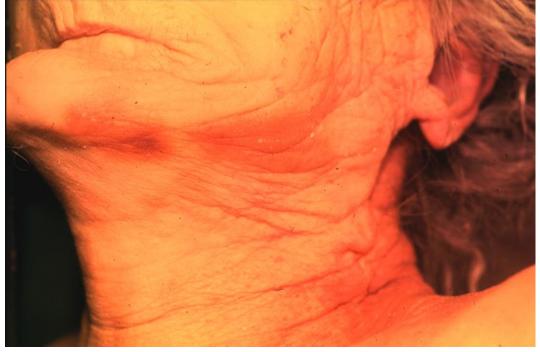
- Most victims have no external injuries, even if strangulation causes death.
 - The lack of external injuries often results in accounts being discredited.
- Symptoms --presence of symptoms are corroborative of strangulation
 - Hoarseness (aphonia)
 - Difficulty swallowing
 - Sore throat (odynophagia)
 - Dyspnea (labored breathing, such as after heavy exertion)
 - Shortness of breath (stridor)
- Victims may assume a sniffing position to assist with breathing.

Signs of Strangulation

- Patterned abrasions or contusions from fingernails, finger pads, ligatures, or fabric
- Hand marks on the perpetrator and/or the victim victims may inflict marks on themselves while trying to break free
- Neck swelling
- Redness in the eyes
- Ligature marks if a ligature is used

Victims may suffer carotid dissections and strokes that can be fatal if not medically treated. Help-seeking varies. Most older victims never seek assistance and those who do often delay before taking any action. Responders should encourage victims to promptly seek medical care.





Petechiae

- Petechiae (tiny red dots) result when blood backs up in the veins as a victim struggles to breathe.
- Key finding associated with serious abuse.
- May appear on the head, face, forehead, eyes, ears, neck, and conjunctive and buccal mucosa.

Strangulation:

Petechiae are found above the location where the pressure was applied, including the face, ears, scalp, eyes, and neck.

• At autopsy, petechiae may be found on the undersurface of the scalp and internal organs even when there were no external injuries.

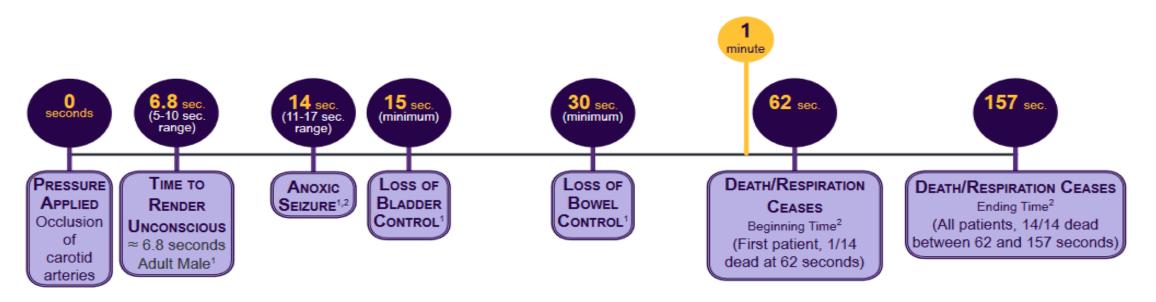
Suffocation:

Petechiae may be generalized throughout the body, including the conjunctiva of the eyes; the skin on the face, top of the feet, and over the front abdominal wall; and within the internal organs and the surfaces of organs in the chest and abdomen.



PHYSIOLOGICAL CONSEQUENCES OF STRANGULATION Occlusion of Arterial Blood Flow: Seconds to Minutes Timeline

Created by: Ruth Carter; Bill Smock, MD; Gael Strack, JD; Yesenia Aceves, BA; Marisol Martinez, MA; and Ashley Peck



REFERENCES AND RESOURCES

- 1 Acute Arrest of Cerebral Circulation in Man, Lieutenant Ralph Rossen (MC), U.S.N.R.; Herman Kabat, M.D., PH.D. Bethesda, MD. and John P. Anderson Red Wing, Minn.; Archives of Neurology and Psychiatry, 1944, Volume 50, #5.
- **2** Anny Sauvagneau, MD, MSc; Romano LaHarpe, MD; David King, MD; Graeme Dowling, MD; Sam Andrews, MD; Sean Kelly, MD; Corinne Ambrosi, MD; Jean-Pierre Guay, PhD; and Vernon J. Geberth, MS; MPS for the Working Group on Human Asphyxia, Forensic Med Pathol 2011;32: 104 107.
- 3 Training Institute on Strangulation Prevention: <u>strangulationtraininginstitute.com</u>



strangulationtraininginstitute.com



What to Document for Strangulation and Suffocation

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- Victim's statement
- Any history of domestic violence or elder abuse
- Medical records all signs and symptoms and any other injuries
- Photos of injuries over time
- Information about any prior incidents 911 calls
- Signs of struggle at the scene
- Objects that caused patterned injuries
- If victim experiences voice changes, audio tape victim speaking

Summary

Non-fatal strangulation is an important risk factor for major assault and attempted or completed homicide.

Treat allegations seriously – older victims are at increased risk for death.

Seek prompt medical attention and have medical personnel evaluate for carotid dissection.

Additional Resources

- Strangulation/Suffocation Supplemental Investigative Worksheet
 http://www.familyjusticecenter.org/wp-content/uploads/2021/07/Strangulation-Suffocation-Supplemental-Investigative-Worksheet.pdf
- Strangulation Assessment Card https://www.allianceforhope.com/wp-content/uploads/2021/09/2.-Strangulation-Assessment-Card-v10.12.18.pdf
- Investigation and Prosecution of Strangulation Cases https://www.allianceforhope.com/wp-content/uploads/2021/09/0.-California-Strangulation-Manual-2020.pdf

Other Presentations

Segments on:

- Abuse, Neglect, and Exploitation of Older Adults and Adults with Disabilities
- Tips for Interviewing Older Adults and Adults with Disabilities: Overview
- Tips for Interviewing Older Adults and Adults with Disabilities: Rapport Building
- Medical Issues in Abuse/Neglect Cases: Bruising and Medications
- Medical Issues in Abuse/Neglect Case: Pressure Ulcers
- Capacity and consent
- Powers of Attorney
- Abuse Investigation Case Study



For More Information

To report abuse, call:

1-866-800-1409, Adult Protective Services Hotline (24-Hour)

Additional Resources:

- https://www2.illinois.gov/aging/ProtectionAdvocacy/Pages/abuse.aspx
- https://www2.illinois.gov/aging/Engage/Pages/default.aspx



Thank you for the work you do to investigate allegations of abuse to protect older adults and adults with disabilities!