

A Case Report

Cut Throat Injury

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Abstract

Cut throat injury is a common form of homicide in all over the world. Cut throat injuries are the types of incised wound from knives, razor blades, or any other object with a sharp cutting edge. Even stiff paper or broken glass may cause incised wound. Incised wound of the neck predominantly homicidal or suicidal and accidental is rare. In our region (South East Asia) Homicidal cut throat injury is common form of criminal violence but in western countries like United Kingdom; United States suicidal cut throat injury is more common. A case is being described where complete decapitation occurs where a male victim's body & head were recovered from different places. Individual autopsy of head & body were done at Sir Salimullah Medical College mortuary. Post-mortem opinion was ante-mortem homicidal cut throat injury. But scene visit & investigation confirmed that the victim was first killed by throttling then in order to conceal of his identity complete decapitation was done by extremists.

Key words : Homicide, Cut throat Injury

Introduction

In Bangladesh, victims of homicidal cut throat injury are common but most of cases are post-mortem cut injury in order to confirmation of death / concealment of body even cause of death of victim by the criminals or terrorists. Suicidal cut throat injury is also observed in some frustrated and psychiatric people. Complete beheadings are most commonly post-mortem in our country to concealment of identity of the victim. Suicidal and accidental decapitations are commonly seen in railway injury. Accidental cut throat injuries are seen in Road traffic accidents and industrial mishaps. Meticulous autopsy and complete information of victim is necessary in these cases.

Case history

Status of the victim:

First recovery – The body of a male victim about 30 years

of age without head on 10-11- 09. Second recovery-The head of a male victim aged about 30 years on 12-11-09.

GD of the 1st recovered dead body without head :

No. 368, PS-Dohar (Dated-10-11-09)

GD of the 2nd recovered only head of a dead body:

No. 459, PS-Dohar (Dated:12-11-09)

Case no. Both the body and the head: (06, Dated-10-11-09

Section: 302/201/34 penal code

PM no. Sir Salimullah Medical College Morgue. Mitford, Dhaka

Dead body without head (445/09, Dated: 11/11/09)

Only the head (447/09, Dated:13-11-09)

Inquest report

A male dead body without head, age approximately 30 years was found floating on the surface water of tunnel below the culvert near the road at the junction of Awliabadth and Imam Nagar. On primary investigation by police on inquest report suggest that on 10-11-09, a gang of unknown terrorists killed the victim by cut throat injury with sharp cutting weapon and detached the head from the body which was taken away to conceal the identity. Finally after two days, the missing head was recovered on 12-11-09, floating on the pond of Mr. Hayet Ali at Charkoshi village; Dist-Manikgong and it was identified by the victim's uncles. The identity of victim was Shabuj, Age-30 years, S/O-Late Nabab Ali, Vill-Goahail Bari, P.S. Shibaloy, Dist. Manikgong.

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Description of injury on inquest report**The body (10-11-09)**

Status : A dead body without head.

Age of the victim-approximate 30 years

Identity-Not established

Body complexion-fair

Body built-average

Both hands were semi flexed on each side.

Both legs were extended on the both side & whitish discolouration due to prolong immersion in water.

An old rounded mark was present on the left knee.

There were old scar marks present on the left thigh and below the knee joint.

The victim was circumcised indicates Muslim.

The head (12-11-09)

Status : Decapitated head

Identity: Established.

Condition-Partially decomposed, foul smelled.

Mouth- open

Both eyes were protruded

Peeled off skin

Whitish discolouration due to prolong immersion in water

History of the case

An unknown misfortunate male youth of thirty, who was killed, later identified as Sabuj, used to visit regularly to brothel (Prostitute area) of Douladia Ferry Ghat. In course of time he was introduced with two unknown persons and later they subsequently became intimate friends. The pecuniary condition of Sabuj was more or less good and he also owned a motor cycle. As such his so called friends became very much insatiable upon his motor cycle. In course of their relation; they invited him with an evil intension to visit Dohar area in order to embezzle the motor cycle. The young man named Sabuj respond to their invitation and went to Dohar along with his motor cycle. According to their pre-plan, dated on 10-11-09, he was firstly killed by throttling then in order to conceal the fact, they detached the head from the dead body and thrown it to a pond of Mr. Hazi Hayet Ali about five miles away from the scene of crime. After the incident, the police at first recovered the decapitated dead body dated on 10-11-09, float on the surface of water under the culvert of highway at Imamnagar, Awliabad. After then sent as unknown dead body for post-mortem examination to the Morgue of Forensic Medicine Department at Sir Salimullah Medical College, Dhaka on 11-11-09. Just after two days, dated on 12-11-09, the

police also recovered the decapitated head from the pond of Mr. Hazi Hayet Ali and in presence of his uncles the identity of the deceased was established. It was reveal that the victim was named Sabuj, Age-30 years, belongs to vill. Gohail bari, P.S. Shibaloy, Dist. Manikgonj.

Finally Police sent the decapitated head with his full identity to the Forensic Medicine Department at Sir Salimullah Medical College for post-mortem examination dated on 13-11-09.

Post-mortem Examination**The body**

a) External findings

Status : A male body without head

Body built-average

Cyanosis-absent

Rigor mortis-Present in both lower limbs.

Injury note

A cut throat wound with decapitation at the level of 5th cervical vertebra posteriorly, one and half inch above the Supra-Sternal notch anteriorly. No other external injury was present.

Internal findings

1. 1st cervical to 5th cervical vertebra absent.
2. All the muscles, vessels, nerves and other structures of the neck were severely cut.
3. Huge amount of ante-mortem clotted blood & liquid blood was found in and around the wound area.
4. Internal organs:
 - Ribs-Healthy
 - Pleura-healthy
 - Lungs-Healthy & pale
 - Heart -Healthy & empty.
 - Liver, spleen, kidneys-Healthy & empty.
 - Stomach & intestines-Healthy
 - Urinary bladder-Healthy & empty.
 - External & internal genitalia-Healthy.
 - No evidence of any other disease or deformity.

The head

a) External findings:

- 1) Status: Head & portion of neck.
- 2) Condition: Decomposed, swollen
- 3) Mouth-Partially opened.
- 4) Lips-Swollen
- 5) Eyes-bulged out
- 6) Skin-whitish discolouration & peeled off.
- 7) Injury note:

The head including portion of the neck was upto at the level of 5th cervical vertebra posteriorly, three and half inch below the chin anteriorly.

The skin was whitish in colour & peeled off.
No other external injury was found.

b) Internal findings :

- 1) Scalp: Decomposed.
- 2) Cervical vertebra: 1st to 4th cervical vertebra and a portion of 5th cervical vertebra were found.
- 3) All the structures including muscles, vessels, nerves and other structures of the neck were severely cut.
- 4) Ante mortem clotted blood was found in and around the wound
- 5) Skull: Intact.
- 6) Meninges: Decomposed.
- 7) Brain: Liquefied & decomposed.

Opinion on PM report

The cause of death was due to haemorrhage and shock resulting from above mentioned cut throat injury which was ante-mortem and homicidal in nature.



Figure : Decapitate body of the victim



Figure: Head of the victim.

1. Stomach and its contents and routine viscera's are preserved for chemical analysis for detection of poison but results shows negative.
2. Blood sample was collected for estimation of alcohol; the result was negative for alcohol.

Discussion

The medico-legal issues in this case could be discussed under the following headings:

1. Ante-mortem or post-mortem cut throat injury
2. Suicidal, homicidal or accidental
3. Problem in diagnosing ante-mortem injury
4. The causative weapon
5. Studies on cut throat injury

1. Ante-mortem or post mortem cut throat injury

Most of the cases are post-mortem cut throat injury. Ante-mortem cut throat injury is rare. As it requires greater force to cut someone's head by a single assailant. In case of death due to cut throat injury there may be clotted blood present in the respiratory tract, defense wound, signs of acute inflammation in the injured area may be diagnostic of ante-mortem cut throat injury. It is difficult to prove whether the death was due to cut throat injury or any other violence such as strangulation, throttling etc. then post mortem cut throat injury.

In this case, due to highly decomposed body moreover the head was thrown in to a pond so some parts of the head and neck were eaten by aquatic predators. So in post-mortem examination no sign of any other violence was found. But in the statement of the accused that he was first killed by throttling then decapitated his head from the body. Therefore it is established that it was post-mortem cut throat injury.

2. Suicidal, homicidal or accidental

In case of suicidal cut throat injury usual site is on the left side and front and partly on the right side of neck (in case of right handed person) and placed high up in the neck. The wounds are superficial with hesitation cut marks and of them more than one or two are severe. There are tailing of the wounds present. Defense cuts are absent. Carotid arteries usually spared because, before injuring, the victim stretches his/her upwards so these blood vessels shift behind the sternocleidomastoid muscle. The causative weapon is found at the scene of incident or grasping in the hand of the victim with Cadaveric spasm. There may be suicidal note present and any other foreign material of the assailant which may be the circumstantial evidence was absent. In this case, the head of the victim was decapitated from his body, so there was no question of suicidal cut throat wound arises.

In case of accidental cut throat injury, they usually occur in machinery factory or road traffic accident, by falling of broken glass and any other sharp metallic substance with force. In this case, no evidence of such injury or scene or

circumstances was found.

In case of homicidal cut throat injury, the injury found mostly on the sides of the neck and placed at a lower level. There may be one or more severe injuries found. Defense cuts or signs of struggle may be present on the victim's body especially on the grasping surface of the hands or back of the forearms. The deep structures of the neck are severely cut. The causative weapon are usually absent in the scene of crime. Considerable disturbance at the scene and even elsewhere is usually found.

In this case the victim was first killed by throttling and then decapitated his head from the body. So, no question arises that it is other than homicidal cut throat injury.

3. Problems in diagnosing ante-mortem injury

Most common causes of failure to determination of ante-mortem injury in advanced decomposed body due to obliteration of post-mortem findings. After homicide, body is cut in to pieces and thrown in different environment also create problems in determination of manner and cause of death. Delayed recovery and environmental factors, animal or aquatic predators play an important role in obliteration of post-mortem findings. Multiple injuries may create problem in diagnosing which injury was the actual cause of death. Homicide following mutilation of the dead body is also creating difficulty in determination the actual cause of death. On the other hand, lack of proper investigating system, pathological facility, inexperience of medico-legal expert play a vital role of diagnosing the cause and manner of death.

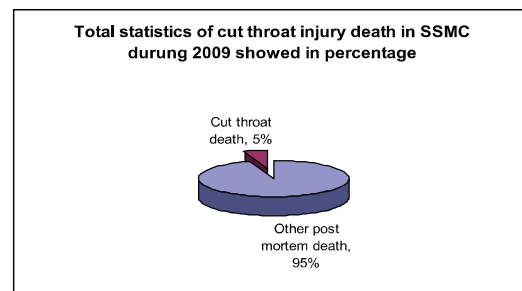
In this case, according to the statement of the accused, the victim was first killed by throttling then decapitated his head from the body and thrown in to pond distance to the scene of crime. The body was first recovered then after one day later the head was found floating on the surface of water in the pond. The skins and some parts of the head and neck were eaten by aquatic predators. So, the neck findings seems to obliterate and difficult to state the actual cause of death in post-mortem examination. In this case, the victim was decapitated so, no question arises that it is other than a homicide.

4. The causative weapon

It is difficult to establish the exact nature of weapon by observing the injury. Because complete beheadings require a heavy sharp cutting weapon with a considerable force. All the structures of the neck including cervical vertebra were severely cut. No weapon was recovered from the scene of crime.

5. Studies at SSMC (2009)

The post-mortem of SSMC comprises the Dhaka South; there are 13 police stations under it (2009). The 13 police stations are-Kotwali, South Keraniganj, Dhohar, Kamrangirchar, Kadamtoli, Shampur, Lalbag, Nababganj, Hazaribag, Sutrapur, Demra, Jatrabari and Bangshal. More than 3 million people reside there. In the year 2009, a total of 501 (Five hundred and one) post-mortem were held in SSMC Morgue. Of them there were 26 cases of death found from cut throat injury. This showed in diagram below :



Conclusion

Decapitation or beheadings is complete severance of head from the body. It is common in suicide by railway accident, incidental decapitation may occur in long drop hanging. It may be accidental in case of railways accident, industrial workers by falling on sharp machinery, sometimes in road traffic accident. Homicidal decapitation is uncommon rather cut throat injury. It is usually post-mortem decapitation. In some criminal abortion decapitation of fetus is common. It also happened in terrorist bomb attack. The AL-Quyeda, tale-ban militia in Afghanistan practices decapitation as ominous homicide. In ancient time, it was practiced as religious credence. Now a day's judicial decapitation is not practiced in the world but it is limited in some Arab countries as capital punishment.

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