

BOOK REVIEWS

Autoerotic deaths – practical forensic and investigative perspectives Anny Sauvageau and Vernon J. Geberth, Boca Raton, CRC Press, 2013, 164 pp \$89.95 by (hardcover), ISBN 13-978-1-4398-3712-2

This remarkable book combines the expertise of the medical profession with that of law enforcement, resulting in a text that is the most up to date and complete analysis of autoerotic deaths. Anny Sauvageau, MD, is Chief Medical Examiner in Alberta, Canada and a well-known world expert on asphyxia. She has a founder designation in forensic pathology from the Royal College of Physicians and Surgeons of Canada, is the author of more than 75 papers in peer-reviewed forensic journals and a much sought after international speaker. She has also founded the Working Group on Human Asphyxia and is cofounder of the International Network for Forensic Research.

Vernon J. Geberth is a retired lieutenant commander of the New York City Police Department with over 40 years of law enforcement experience. He is a seasoned homicide detective who holds dual master's degrees in forensic psychology and criminal justice. He is a graduate of the FBI national Academy and a Fellow in the American Academy of Forensic Sciences. His textbooks on homicide investigation and sex-related homicide investigation are well known internationally and the 'bible' of investigative analysis for police departments in many countries. He has set the standard for homicide investigation and crime scene analysis in the United States, teaches throughout the country and is highly respected for his ethical stance and concern for the victims of crime.

Autoerotic deaths – practical forensic and investigative perspectives is clearly written, concise and free of confusing jargon. It is the most current complete analysis of autoerotic deaths, supplemented with color photographs, and some drawings that are instructive and complement the text. These photographs are taken from actual case files and associated with individual case histories. Thus, this text goes beyond mere description and provides actual case analysis allowing the reader to grasp the significance of what might ordinarily appear to be a minor detail or might be confusing even to the experienced pathologist or homicide detective. The authors also cite numerous references provided after each chapter and give credit to many who investigate this phenomenon, including those who might disagree with their analysis of some aspect an autoerotic death. Definitions of terms are provided that clarify past confusion in the literature, and the authors support their terminology with a cogent analysis of accept facts both from the literature and the actual investigations.

The book is divided into seven chapters, the first providing a historical context, including the first reported autoerotic case in the United States in 1947 and the groundbreaking work of Hazelwood and his colleagues who published the first book to present a comprehensive view of the topic in 1983. The initial thinking of autoerotic deaths as hanging or ligature strangulation was expanded to other types of autoerotic deaths such

as by chemical substances, electrocution, body wrapping, overdressing, drowning, asphyxia by an abdominal ligature and death from foreign body insertion. The authors discuss and illustrate these cases in detail, including the awareness concerning the danger of exposing such phenomenon in the media and the need for forensic experts to be cautious in diffusing this practice to the general population.

The turning point in defining the modern conception of autoerotic deaths came in 1991, along with the understanding that deaths from natural causes during unusual or bizarre autoerotic practice are not autoerotic deaths. Another important landmark in understanding autoerotic deaths occurred in 2006 with the classification of autoerotic death as typical, such as with hangings or plastic bags, and atypical as by electrocution, body wrapping, foreign body insertion, and so on. The most comprehensive book on autoerotic deaths to date has been *Autoerotic fatalities* published in 1983 by Hazelwood et al¹. Sauvageau and Geberth have filled this gap with the present volume, a collaboration and fusion of science and practical investigation.

Chapter Two deals with definitions and practices in approaching autoerotic deaths, taking note that natural death occurring during masturbation should not be called autoerotic death. The authors note: 'The manner of death in autoerotic death should always be accidental, and death should be directly linked to the use of an apparatus for sexual stimulation.' The best definition for autoerotic death is the following: 'Autoerotic deaths are accidental deaths that occur during solitary sexual activity in which some type of apparatus that was used to enhance the sexual stimulation of the deceased caused unintentional death.' By definition, autoerotic deaths are always accidental deaths with no exception, as the intent of the autoerotic practitioner is not to die. With regard to classification and terminology it is important to note that some autoerotic deaths, such as electrocution, are not related to asphyxia. The incidence of such deaths is variable and estimated to be 700 to 1400 per year, about 0.5 cases per million per year. The authors note the golden triangle of forensic investigation: a complete analysis of the crime scene, the examination of the body, and the history (past medical history, psychiatric, sexual, etc). These issues are discussed in detail, including those of sexual partners, the decedent's personal computer, and so on. Noted are the three sources of sexual pleasure: stimulation of the genital organs, lack of oxygen in the central nervous system, and the creation of an atmosphere of fear and anguish in the context of masochism. Lack of oxygen to the brain can create intense sexual pleasure and evidence of masturbation during the autoerotic event is not mandatory, nor does the presence of semen necessarily indicate prior masturbation, considering that post-mortem masturbation can occur.

Chapter Three deals with death scene characteristics in great detail, including 15 scene characteristics in different combinations, such as cross-dressing, exposure of the genitals, foreign body insertion, and so on. Direct stimulation of the genitals being only one of the possible sources of sexual pleasure. Evidence of repetitive behavior is important. The text and photographic depictions in this chapter are outstanding. Of the 15 compiled characteristics, the most common feature in autoerotic fatality was exposure of the genitals, followed by pornography, with the most common combination of three features being exposed genitals, nudity and pornography in 19% of the cases. The forensic expert thus 'should not expect the presence of a long list of classic scene features in most cases.' Autoerotic methods are discussed in detail in three different groups: hangings, plastic bag and chemical substances and atypical methods.

Chapter Four describes typical methods of autoerotic deaths, with hanging by far the most common method of autoerotic activity leading to death. The terms of strangulation, hanging, ligature strangulation and manual strangulation are carefully defined with appropriate examples and case reports. For example, hanging occurs as a form of strangulation when the gravitational weight of the body causes constriction of a band on the neck, and it is associated the three possible mechanisms, closure of the blood vessels with lack of oxygen to the brain, compression of the airways, and vagal stimulation by pressure on the baroreceptors in the carotid sinuses and the carotid body. Examination of the body, as for example the presence of petechiae, cyanosis, neck furrow, protrusion of the tongue, fractures of neck structures, types of bruises, etc, are discussed along with a careful examination of the scene itself. This is helpful in differentiating a potential homicide from an autoerotic death. The agonic sequence of loss of consciousness, convulsions, decerebrate rigidity, deep rhythmic abdominal movements, decorticate rigidity, loss of muscle tone and loss of muscle movement is noted with time sequence and other issues such as ischemic habituation on the agonal responses of autoerotic practitioners.

Chapter Five deals with typical methods of autoerotic deaths and includes a very important series of definitions of terms such as suffocation, smothering, choking, confined space entrapment and a vitiated atmosphere. Specific autopsy findings and pathophysiological responses are discussed in detail, along with accompanying photographs. The section on inhalants such as hydrocarbons and propane is quite thorough and enlightening.

Chapter Six deals with atypical methods of autoerotic death, such as overdressing, electrocution, body wrapping, and so on, as they account for about 5% to 10% of the cases. The methods of death associated with these cases are discussed, providing a clear understanding of the physiologic processes involved, for example the presence of air embolism in heart cavities in the case of foreign body insertion. Definitions for a proposed unified classification in the context of asphyxia in the forensic setting are described. Case histories in these instances are noteworthy and accompanied by photographs. Many are most unusual. Once again the authors emphasize that deaths from natural causes occurring during solitary sexual activity should not be classified as autoerotic deaths.

'The typical victim of an autoerotic accident is a white adult male.' Chapter Seven covers the four types of atypical victims: the female victim, the non-white victim, the teenage victim and the elderly victim. The first documented case of a female autoerotic death was a case reported by Henry in 1971 in the *Medico-legal bulletin*. Specific features of male and female cases of autoerotic deaths are noted in detail, along with case reports. While the usual victim of an autoerotic death is a male in his 30s, teenager and elderly victims are discussed along with the 'choking game' or strangulation game, which is a non-sexual activity and requires differentiation from autoerotic activity. With regard to these issues it is important to determine cause for a family that might blame themselves for a suicide of a teenager, when in reality the death is a result of autoerotic activity. The scenes of female and teenager victims are not as rich with forensic clues and are easier to misinterpret, and there may be signs of eroticized repetitive hangings. The autoerotic death of an 87 year old male is discussed in detail, along with photographs of the victim.

This outstanding book is destined to become a classic in the study and investigation of autoerotic death. This is due to the thoroughness of the authors in searching the literature and to their long experience with death investigation, as

well as the meticulous collaboration of the medical/forensic pathology profession and the law enforcement/homicide investigation profession. Both authors are internally recognized in their respective fields of study and the result is a unique combination of knowledge and experience from both professions. This book is a model for professional death investigations involving autoerotic deaths and is the first of its kind in over 30 years. The work presented is based on solid scientific research and case experience from the field demonstrated by case examples. The additional resource information noted throughout the book is a major source of further study and discussion, thus complementing this complete analysis of autoerotic deaths with both theory and application. I highly recommend this comprehensive text as a resource for the study of autoerotic deaths for anyone involved in death investigation.

Reference

1. Hazelwood R, Dietz PE, Wolbert Burgess A. *Autoerotic Deaths*. New York: Lexington Books; 1983.

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