Case Report

DYADIC DEATHS (HOMICIDE- SUICIDE): THREE CASE REPORTS

*Pankaj Suresh Ghormade, M.B.B.S., **Manish Baburao Shrigiriwar, MD

* Corresponding Author, Resident, Department of Forensic Medicine, Indira Gandhi Government Medical College, Nagpur 440017, Maharashtra **Professor and Head, Department of Forensic Medicine, Government Medical College, Yeotmal 445001, Maharashtra.

Abstract:
Homicide suicide (dyadic) deaths though rare, have got important social impact. Here, three cases of dyadic deaths with perpetrator as husband in two cases and boy friend in one case are reported. In one of the case, victim was daughter along with wife. Suicide note by perpetrator was found in two cases. Factors like profile of perpetrator and relationship between perpetrator and victim, circumstances of killing, method of killing, site of offence, are important in such cases and various studies and case reports are based on these factors. In two cases, financial burden and in one case jealousy was the reason for killing.

Key words: Method of killing, pattern of injuries, perpetrator, dyadic death.

Introduction:
Dyadic deaths (homicide – suicide) is defined as a dramatic violent event in which an individual kills another and subsequently commits suicide immediately or after certain period of time that may range from hours to 1 week. There is however no standardized operational definition.

Currently there is no classification system validated for this phenomenon, but Mazruk et al, have suggested a system of classification based on type of relationship between perpetrator and victim and sub classified it on motivation of crime. Thus dyadic deaths are classified as spousal/consortial, familial, and extra-familial type with different sub classification based on motive of crime.

The Hanzlick–Koponen typology has the following special classifications, which can be divided into two broad categories: single victim and multiple victim events. And according to this, single victim events (dyadic deaths) include homicide - suicide or suicide pacts. The most common type of dyadic deaths involve killing of intimate partners and perpetrators are male in most of cases.

Dyadic deaths are relatively rare when compared to separate incidences of homicide or suicide worldwide and related to demographic profiles of population. In India, National Crime Records Bureau hasn’t given information regarding incidences of dyadic deaths. But, such deaths are not infrequent in society as evident from various case reports and media news. These cases has got great social impact on after survivors of victim and perpetrators, and as well as on society.

Here we are presenting three cases reports of dyadic deaths, two of them occurred within a span of one month leading to social impact.

Case Reports:
Case 1 – On the scene of crime at home, husband, wife and daughter aged 13 years were lying over floor in pool of blood and bedroom door was locked from in. When family members
entered the room, husband was alive in unconscious condition and kitchen knife stained with blood present by his side while both wife and daughter were dead. Suicide note was not found at scene. And dead bodies of the wife and daughter brought sent for medicolegal postmortem at our institute.

On external examination of wife, about sixty three stab wounds present over the different body parts that includes abdomen, chest, back, both forearms and thighs. In addition to stab, incised wounds were also present over both hands suggestive of defense wounds. Stab wounds over heart, lungs and intestines were responsible for her cause of death.

On external examination of daughter, about 37 stab wounds present over body parts mostly over abdomen, left side of chest and upper part of back on left side. On internal examination, stab injuries to left lung, liver, small intestines and spleen were responsible for her death. No defense wounds were seen over body parts of his daughter.

Interestingly, husband was operated for 21 perforations of small intestine due to multiple stab injuries over abdomen at places. There were no other injuries over his body. While recovering in hospital, he confessed to the police regarding killing of his wife and daughter by kitchen knife, because of financial burden. He died later in our institution due to sepsis associated with perforation peritonitis.

Case 2

In house of her father, daughter was lying dead in prone position over bed and her husband was found in complete hanging position to ceiling fan with duppatta in late morning hours. Door was locked from inside and no one was present in home. Crime scene was intact and suicide note or any suspicious material was not found. History regarding recent quarrel between husband and wife, few days prior to incidence due to unemployment was given by her father. The couple was married since 5 years, without having any child.

Both the dead bodies were sent for medicolegal postmortem at our institute. On examination of husband, his hands were tied by duppatta with only simple knot in manner suggestive of self tying. Blood stains were present over it. Ligature material was odhani with slipping knot and salivary stains were also present at right angle of mouth and over shirt. Glove and stocking type of postmortem lividity and cyanosis was present. Ligature mark was of typical hanging and there were no other external injuries over other body parts and below ligature mark. Internal findings were suggestive of asphyxia as a mode of death in this case due to hanging.

On examination of his wife –

Face was congested with bilateral conjunctival & Petechial haemmoraghes over face. Blood stains were present in the nostrils and cyanosis was present. Lividity was present anteriorly over chest and fixed. No ligature material was present around neck but, single continuous ligature mark below the level of thyroid cartilage was present. Multiple obliquely placed scratch abrasions of size varying from 0.6cm to 0.3 cm were present over front of neck on both the sides. No other injuries were found on body part. Internal findings of neck, shows presence of hematoma beneath neck muscles on both the sides. Superior horn of thyroid cartilage was fractured on right side. Internal examination of other organs was suggestive of findings of asphyxia and cause of death was strangulation. As no ligature material for strangling was seen at the scene, husband might have used the duppatta for this and after killing her, he tied his hands with the same duppatta as blood stains on it was proved to be of his wife after chemical analysis. Chemical analysis of viscera in both cases does not reveal any poison.
Case 3-

An unmarried, 19 years old girl was found dead over terrace of her house in the morning on day of her engagement with presence of deep injury over neck. On her postmortem examination, only single horizontally placed chop wound was present over neck extending on both the sides from midline and it cuts trachea, esophagus and cervical vertebra. Pattern of injury was suggestive of homicidal cut throat and her family members were inconclusive regarding motive of murder. But while searching for his tenant aged 23 years, father of girl found him in completely hanged position to ceiling fan with the nylon rope in other room of the same house and front door was locked from outside.

On postmortem examination, blood stains were present on clothes and anteriorly over both legs. External findings over neck with internal findings, confirmed cause of death as hanging. Chemical analysis confirmed blood stains over body of boy were that of victim. After investigations, it was revealed that the offender living as tenant and developed love relations with daughter of his landlord and they had affair since 2 years without knowledge of their respective family members. As girl was not willing for marriage provoked him to kill her brutally.

Discussion:

Dyadic death episodes are reported from various parts of India and mostly seen in low socio-economic, less educated or illiterate families and included single victim or multiple victim events. Demographic characteristic of perpetrator and victim are more or less same as observed in various reports. Most episodes occurred at home and perpetrator is known to victim. Extra familial incidents are rare. In all three cases described here, offenders were male, from low socio-economic class, living in semi-urban areas and less educated. 1st case, was a case of familicide in which daughter was killed by perpetrator in addition to wife. Whereas, remaining two cases are of consortial and spousal killing.

In developed countries, use of firearms is common method of homicide in dyadic deaths. Other weapons associated with this includes knives, blunt objects, and, other methods of homicide have included strangling/asphyxiation, poisoning and physical assault or vehicular accidents. However, in India, dyadic deaths by using firearms are rare and in addition to other methods, drowning was also mentioned as common method of killing particularly for homicide of children’s.

Sharp weapons were used for killing in 1st and 3rd case and pattern of injuries suggests extremely brutal homicides in 1st case with multiple stab injuries over body of both victims. Such brutal murders only due to financial distress by family head in homicide – suicide pacts are not mentioned in literature.

When comparing homicide incidents to dyadic deaths, research has suggested that the perpetrator is more likely to die by suicide when motive is related to possessiveness/jealousy, sickness or stress and these incidents are more likely to be premeditated than a homicide alone. Bossarte et al, observed, shooting (80.4%), Sharp weapons (11%), Hanging (6%), Poisoning (4%), fall (3%), Burns (1%), and vehicular accidents as method of suicide in perpetrators. Here perpetrators died by suicidal hanging in 2 cases and stabbing in 1st case.

Causative factors are multidimensional for such episodes as seen by Milroy CM, in his studies of 52 cases of homicide-suicide pacts, and established breakdown in a relationship
Mental illness (21%). Physical ill health (11%) and financial stress (10%) as important reasons for homicide - suicide.

Graser identified a number of precipitating factors in perpetrators of familicide, including marital and financial problems, unemployment, depression and social isolation, alcohol abuse, physical and mental illness and, particularly in murder – suicide type of family murder, stated that victim precipitation in the form of behavior of spouse often provides a “trigger” for the family murder. The personalities of perpetrators and their victims, the prevailing circumstances, and the manner in which latter are defined, interact, possibly ending in tragedy.

Jealousy, conflict over extramarital, sexual, love affairs, threat of separation or actual separation from intimate partner is important factors seen in spousal or consortal homicide.

In Indian scenario financial distress is mentioned as predominant factor for familicide. Also, financial burden and marital disharmony are the principle reasons for suicide in India. And, such suicidal tendencies are now commonly seen in farmers of country due to agrarian crisis & unemployed youths making them vulnerable population.

While considering social disparity, the gap in consumption spending between poor and rich is more in urban India and disparity now increases to 9.8 times in 2011. Hence, rising financial distress in families precipitates such episodes.

Similar factor of financial distress was confessed as reason of familicide by perpetrator in 1st case whereas; frustration due to unemployment in young married couple was the reason in 2nd case as documented by their suicide note. And as observed in many studies that, conflict or jealousy in broken relationship as important cause for spousal/intimate partner homicide is in seen in 3rd case. In all three cases previous history of mental illness, suicidal tendencies, addiction and violent behavior was not seen in perpetrators and chemical analysis of viscera was negative for any substance abuse.

Of three cases described here, 1st two occurred within a span of 1 month leading to great impact on society as observed in Media reports and in particular, brutal killing of one’s own child only for financial reasons has got deeper social impact.

Table: Observation table of three cases

<table>
<thead>
<tr>
<th>Case no</th>
<th>Perpetrator</th>
<th>Relationship of victim with Perpetrator</th>
<th>Cause of death</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Husband(39yrs)</td>
<td>Wife (34 yrs) Daughter (13yrs)</td>
<td>Multiple stab injuries</td>
</tr>
<tr>
<td>I</td>
<td>Husband(25yrs)</td>
<td>Wife (21yrs)</td>
<td>-</td>
</tr>
<tr>
<td>III</td>
<td>Boyfriend(22yrs)</td>
<td>Lover(19yrs)</td>
<td>-</td>
</tr>
</tbody>
</table>

Conclusions:

But what exactly are the precipitating factors in previously normal individuals that lead to homicide – suicide episodes still remains unanswered? Because, in India there is no national surveillance system for such cases and investigating agencies are never been able to discover the facts due to death of an offender.

Hence, to prevent such episodes, it is necessary to focus on vulnerable population with multidisciplinary approach. Clinical management of after survivals should be done and it is
absolutely essential to establish national surveillance system for such episodes to know exact circumstances of each case.

References:


Case Photographs:

Case 1 Victim wife - Multiple stab wounds over anterior body parts
Case 1 Victim daughter with multiple stab wounds

Case 1 Accused husband

Case 1 Accused Husband operated at IGGMC, Nagpur
Case 2. Victim wife with strangulation ligature mark

Case 2- Perpetrator husband