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FROM DYING OF PLEASURE TO THE PLEASURE OF DYING: TWO CASES OF ACCIDENTAL ASPHYPTIC DEATHS, DURING AUTOEROTIC PRACTICES

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ABSTRACT

Electronic Autoerotic asphyxia falls on the masochistic spectrum and, where it persists for more than six months and causes clinically significant distress or impairment in functioning, it can be considered a sexual masochism disorder with asphyxophilia (DSM-5). It can be implemented through various strategies such as hanging, confinement with objects applied over the head, chest compression, use of gas or volatile solvents to reach the level of oxygen depletion up to near loss of consciousness necessary to promote arousal sexual. Autoerotic asphyxia has been associated with high lethality in US cases, however in Italy the phenomenon is little studied, especially from a forensic pathological point of view. Restrictions applied to contain the Covid-19 pandemic, including social distancing and lockdown phases, have been linked to changes in sexual habits and behavior. The authors report two cases of male individuals who died from confinement asphyxia, obtained through the use of plastic bags well adhered to the head, apparently during autoerotic practices. The death occurred due to suffocation due to the concentration of a gas inserted and concentrated in the plastic bag, the purpose of which was to deplete the inhaled air and thus the circulation of oxygen. This artifice was ideally functional to the erective stimulus and sexual pleasure, obtainable through sensory clouding. The first hypothesis formulated by the judicial police officers present on the spot was that of suicide. Only the subsequent medico-legal investigation in association with ancillary investigations made it possible to reconstruct the dynamics of the events, providing a scientific explanation for cases of particular interpretative complexity.

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1. Introduction

The advent of the Covid-19 pandemic has had a significant impact in terms of mental well-being and an increase in psychopathological symptoms [1, 2]. An influence of restrictions imposed on the sexual sphere has also been reported, including a reduction in the frequency of sexual intercourse [3, 4]. Although the data are limited, it is possible to hypothesize that the pandemic has led, among other things, to the manifestation in a subpopulation of individuals of responses to stress and to the alteration of normal sexual habits through the greater use of autoerotic practices, as well those of an unconventional nature [5, 6].

The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) [7] introduced a controversial distinction between paraphilia and paraphilic disorder by emphasizing, in the case of disorders, the manifestation of discomfort or impairment in the individual, or the actual occurrence or the risk of causing harm to oneself or others, in satisfying the paraphilia itself [8]. Sometimes the paraphilic conduits are hidden and therefore constitute a phenomenon that is sometimes difficult to identify except after the occurrence of extreme consequences such as, above all, the death of the subject or subjects involved. In particular, autoerotic asphyxia falls within the masochistic spectrum and where it persists for more than six months and causes clinically significant distress or impairment of functioning in the main individual areas, it can be considered a sexual masochism disorder, with asphyxiophilia (DSM-5)[7-9].

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It is a more common practice among men and most cases occur by hanging, confinement with plastic bags, inhaling chemicals. The victims are between the ages of 9 and 77 and are found mainly in domestic settings [10, 11]. In particular, autoerotic asphyxia falls within the masochistic spectrum and where it persists for more than six months and causes clinically significant distress or impairment of functioning in the main individual areas, it can be considered a sexual masochism disorder, with asphyxiophilia (DSM-5)[7, 8].

Autoerotic asphyxia has been associated with high lethality in US cases, however in Italy the phenomenon is little studied, especially from a forensic pathological point of view [12, 13]. The authors report two cases of male individuals who died from confinement asphyxia, obtained through the use of plastic bags well adhered to the head while performing autoerotic practices.

2. Material and methods

2.1. Case n. 1

50-year-old male, widower and with a remote medical history of alcohol and cannabis abuse, who died in April 2020. Following a request for intervention by the Police, by his younger daughter, worried about the prolonged stay of the father locked from inside in the bathroom of his home, the subject was found sitting on the bidet, with his head inside a plastic bag and his trousers lowered to the knees. A metal cylinder was also found at the foot of the same. This cylinder, with the unsafe dispenser, had the wording "helium - balloon" on the label. The little girl reported having celebrated her birthday the previous day and that the helium cylinder had been used to inflate balloons.

The thanatological parameters, detected during the inspection, were compatible with a death that occurred in the immediacy of the discovery (pale hypostasis; rigidity in formation; absence of putrefactive green spot; rectal temperature equal to $36.3\,^{\circ}$ C, ambient temperature $21\,^{\circ}$ C).

The cadaveric inspection, carried out about 12 hours after the discovery of the body, revealed the presence of ribbon-like reddish color abrasions, with longitudinal course and almost parallel to each other in correspondence of the anterior and lateral cervical region, generic signs of cardio insufficiency - terminal respiration such as abundant hypostasis of vinous red color and congestion of the conjunctivae which, together with the cyanosis of the nail beds of both upper limbs, were indicative of polyvisceral blood stasis.

The external examination of the body also allowed to exclude the presence of injuries attributable to traumatic action of third parties, except for abrasions in the cervical region, therefore attributable to scratch marks (Figure 1).

These elements were related to self-inflicted injuries in an attempt to loosen the grip of the plastic bag on the neck. The subsequent forensic autopsy revealed diffuse encephalic and pulmonary edema.

The histo-pathological investigations that followed confirmed the existence of polivisceral stasis as well as encephalic and pulmonary edema. The findings made on the spot, analyzed at the same time as the historical and circumstantial data, made it possible to dispel the initial suspicion of suicide. In addition to the data obtained from the inspection survey, the collection of information from the closest family members was fundamental, especially from the cohabiting daughter.

The latter told us that for a few months her father had been spending a lot of time alone in the bathroom. She described a father present, affectionate and with plans for the future, so much so that he had already organized the summer holidays. The parents also told us that for about a couple of years he had stabilized at work and had managed to finish paying the mortgage payments.

The results of the medico-legal investigations were conclusive to define death as a mechanical asphyxiation from confinement of an accidental nature during the performance of an autoerotic practice: the inspection showed an orderly and organized housing condition; his body was found with his pants down and his genitals uncovered, no previous suicide attempts were reported, the psychiatric history was negative for morbid conditions; the bathroom door was closed from the inside; finger marks were found on the neck. The only relevant data, reported by family members, was the growing difficulty in establishing relationships with the other sex after the end of the previous relationship.



Figure 1. Abrasions in the cervical region

2.2. Case n. 2

47-year-old male subject, who died in November 2020. Upon the arrival of the Police, alerted by his parents, the man, a law teacher, was found a corpse lying in his bed, naked from the waist down and covered by a sheet. On the bedside table was a laptop turned on and connected to a pornographic site. Near the bed an empty gas cylinder was found bearing the words "nitrogen" whose outlet valve was open and in turn connected to the end of a black plastic tube.

At the opposite end of said tube, a plastic packaging bag was fixed by means of scotch tape. The same was "twisted" to the proximal part of the tube. A cardboard box containing the technical specifications of the gas cylinder and the transport document dated two days earlier were also found under the bed (Figure 2).



Figure 2. Empty gas cylinder of "nitrogen" with a plastic packaging bag

The cadaveric inspection revealed the presence of abundant hypostases with petechial aspects, labial and sub-nail cyanosis and spermatorhea. There were no traumatic injuries attributable to the violent action of third parties. Subsequent sectoral investigations revealed the existence of polyvisceral congestion, cerebral and pulmonary edema as well as the presence of sub-pleural and sub-pericardial petechial formations. The forensic examinations were supported by toxicological investigations that were negative for the use of common substances of abuse.

The circumstantial elements collected during the inspection: victim found naked from the waist down, PC turned on connected to a pornographic site and web history full of pornographic sites with links to pages of self-eroticism and masochism, finding on the spot of numerous invoices for the purchase of cylinders of nitrogen, "twisted" packaging bag to the proximal part of the tube evocative of an attempt by the victim to free the head from confinement, made it possible to recognize as more probable the accidental nature of the death event, which occurred in this case during the carrying out autoerotic practices.

Ultimately, given the total absence of external injuries and in accordance with the historical and circumstantial data, they were decisive for excluding the suicidal hypothesis, having to end in death by mechanical asphyxiation from accidental confinement.

3. Discussion

During Both cases reported can be included in the context of paraphilia: death occurred due to accidental suffocation using a plastic bag to concentrate the gas in order to deplete the inspired air of oxygen and therefore the circle. This artifice was ideally functional to the erective stimulus and sexual pleasure, obtainable through sensory clouding.

The differential diagnosis with the other death modalities (homicide and suicide) was possible through the survey of some specific elements and in association with all the other cadaveric and circumstantial data [14-16]. Both the cases described presented evidence of attempts made by the subjects to survive e.g., excoriation on the neck at the edge of the bag. Negative toxicological investigations allowed the exclusion of any attempts to sedate the victim of a possible homicide, simulating a suicide. Altogether, these elements allowed to formulate the diagnosis of accidental death in a context of sexual pleasure [17].

In this regard, it is important to specify how the DSM-5 makes an important distinction between paraphilias and paraphilic disorders. Paraphilias have been defined as intense and persistent sexual interest other than that related to genital stimulation or sexual foreplay with phenotypically normal, physically mature and consenting human partners [8]. This choice, the result of a broad debate on the definition of sexual norms and behaviors preliminary to the latest edition of the DSM-5, has allowed us to frame the paraphilia in a deviant behavior, but not attributable to a mental disorder [8]. The presence of fantasies, behaviors or sexual preferences that do not adhere to cultural standards or stereotypes, therefore, does not in itself constitute a psychiatric pathology, according to this tendentially destignatizing approach.

Paraphilic disorders, on the other hand, are characterized by two possibilities, one of a strictly clinical nature, namely the manifestation of discomfort or alteration of individual functioning, the other of greater medico-legal interest linked to the possible harm caused to oneself or others.

The mechanisms underlying the possible passage from a paraphilia to a paraphilic disorder have not been well defined to date. A recent study conducted on 221 subjects who declared themselves used to masochistic / sadistic sexual practices revealed, as main motivators: the use of interpersonal power, experiencing physical pain and the induction of an altered mental state [18]. This last aspect has been hypothesized as a possible psychological motivator in cases of autoerotic asphyxia, also in consideration of the pathophysiological mechanisms. Asphyxia mechanisms and consequent hypoxia can also decrease the degree of consciousness and determine an enhancement of voluptuous sensations increasing the perception of orgasmic pleasure. Although the death rate associated with autoerotic asphyxia has been estimated to range from 250 to 1000 deaths per year in the United States, data on this phenomenon are very scarce in Italy. Episodes of death caused by autoerotic asphyxia, in fact, seem to be underestimated because they can often be confused with cases of suicide, particularly in the Italian context where the victims' family members try to mask the autoerotic behaviors of their loved one [8, 19, 20]. Further, an important element is represented by the fact that both deaths occurred in the context of "compulsory" social isolation, a direct consequence of the pandemic situation, which therefore encouraged the search for forms of pleasure - with particular reference to the sexual meaning of the term - which, in turn, has favored an increase in deaths linked to practices which, due to their "peculiarities", require execution in a private context, such as, for example, one's home [14, 21, 22].

The Covid-19 pandemic, could have increased the use of such practices in a subgroup of vulnerable population, including those people suffering from mental disorders who have temporarily experienced a reduction or interruption of the continuity of care [23, 24]. Prolonged isolation might have emphasized problematic and stressful socio-family contexts and in some cases favoring maladaptive coping strategies, including sexual ones [25]

5. Conclusions

In the cases we report here the initial hypothesis formulated by the judicial police officers was suicide. The subsequent medico-legal investigation allowed to conclude for accidental deaths during autoerotic asphyxia. There were signs of an attempted survival of the subjects and no circumstantial elements that would suggest the action of a murderer including negative toxicology. From the consultation of the literature data on suicide during an autoerotic practice, no relevant case studies emerge. Both occurred in pandemic times, where prolonged isolation might have favored maladaptive coping strategies, including sexual ones.

In conclusion, from the integration of the historical-circumstantial data and from the international bibliography, we can affirm that, in the two cases reported above, beyond all reasonable doubt, death by asphyxiation occurred accidentally during the practice of autoerotic asphyxia without suicidal intent.

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