

## Bite-Marks on Battered Children

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### **Bißverletzungen bei mißhandelten Kindern**

**Summary.** Instances of human bites are generally rare, although it does sometimes occur that people use their teeth as a means of attack or defence. When looking into cases of the ill-treatment of children we often find bite-marks in addition to other signs of abuse.

Eleven cases from the Institute of Forensic Medicine at Düsseldorf University are presented out of a total of 48 cases of ill-treatment of children followed by death in which human bite-marks as well as other haematomas on the victims could be proved. In all cases the cause of death was a subdural haematoma. All but three of the offenders were female, and all were young and subject to excess stress so that the act could eventually be regarded as the result of a disintegration of emotional status.

The combination of bite-marks with haematomas and other signs of ill-treatment support with sufficient certainty the conclusion that a criminal action of a third person is involved.

**Zusammenfassung.** Obwohl es immer wieder vorkommt, daß Menschen zum Angriff oder Verteidigung ihre Zähne als Waffe gebrauchen, werden Menschenbißspuren bei der Obduktion relativ selten beobachtet. Sie führen in der Regel nicht zum Tode, sondern stellen nur einen Begleitbefund dar, der Hinweise auf den Tatverlauf und den Täter zu geben geeignet ist. Manchmal werden Bißverletzungen im Verlaufe von Handlungen Geisteskranker oder zur Befriedigung des Geschlechtstriebes erzeugt. In der Regel sind Menschenbißspuren — gerade bei Mißhandlung von Kleinkindern — kombiniert mit anderen Zeichen der Gewalteinwirkung. Der Mensch beißt in die unbedeckten Körperstellen. Besonders gefährdet sind Nase, Ohrfläppchen, Finger. Beim Kind sind häufig die Extremitäten, besonders die Oberextremitäten, betroffen.

In den letzten Jahren haben wir im Institut für gerichtliche Medizin der Universität Düsseldorf mehrere einschlägige Fälle obduziert. Es handelt sich um 11 von insgesamt 48 Mißhandlungen mit Todesfolge, in denen Menschenbißspuren neben anderen Hämatomen bei den Opfern nachgewiesen werden können. Sie werden kurz dargestellt.

Die Todesursache war in 8 Fällen ein subdurales Hämatom. Einmal verblutete das drei Monate alte Kind (Fall 9) aus dem eingerissenen Mesenterium in den Bauchraum. Ein Kind erlitt eine Ruptur der rechten Herzkammer und starb infolge einer Herzbeutelamponade (Fall 11). In einem Fall war die Todesursache nicht eindeutig zu klären (Fall 8).

Bei den Tätern überwiegt, wie bei der Kindesmißhandlung überhaupt, die leibliche Mutter. Es handelte sich um 8 weibliche und 3 männliche Täter. Die Täterinnen waren meistens jung und überfordert, so daß die Tat letzten Endes als Lösung eines Affektstaus angesehen werden kann. Die Aggression galt eigentlich dem Erzeuger des Kindes und den mißlichen Umständen. Bei einem männlichen Täter handelte es sich um den Freund der Kindesmutter, der, selbst arbeitslos, das Kind während der Erwerbstätigkeit der Mutter beaufsichtigte. Er will das Kind beim „Balgen und Spielen“ gebissen haben. Ein Vater – ein Italiener – gab auf Vorhalt an, sein vor der Ehe gezeugtes Kind „aus Liebe“ gebissen zu haben. Sexuelle Motive mögen ebenso wie bei den Täterinnen mitgespielt haben. Ein anderer Vater will das Kind, als es drohte zu sterben, gebissen haben, um es wiederzubeleben.

Die Kombination von Bißspuren mit Hämatomen und Frakturen und anderen Zeichen der Gewalteinwirkung läßt mit der erforderlichen Sicherheit auf die strafwürdige Mitwirkung Dritter schließen.

**Key words.** Bißspuren, Kindesmißhandlung – bite-marks – Kindesmißhandlung, Bißspuren.

Human bite-marks are generally rare although it is a common occurrence for human beings to use their teeth as a weapon for attack or defence. The human being usually bites the unclothed parts of the body. The specially endangered parts are the nose, the lobe of the ear, the thumb or the remaining fingers. In the case of sexual murder, human bite-marks are observed on the skin of the breast and stomach regions, as well as in the region of the genital organs (Gorski, Houtrouw, Luntz, Strassmann). Offenders have been identified by means of bite-marks on parts of the corpse or on objects nearby (Zevenbergen, Berg, Buhtz, Euler, Furness, Klein, Schmidt, Selle, Simon, Sorup, Stroddart, Zerndt). Valuable hints regarding the offender have been given by the positions of the teeth, by gaps between the teeth, by the number of teeth, by irregularities of the teeth formation and other important pieces of information. To identify a bite-mark caused by a human being proved in itself a very important result of investigation. Also very important is the clarification whether these marks had been inflicted on a person while he was still alive or after his death.

We find in literature, too, striking descriptions of human bite-marks on children. Such marks are described when dealing with ill treatment and homicides of child victims. In one of the cases described by Caspers, the 40 year old mentally-disturbed offender had bitten through the throat and oesophagus of a child. Nix reports of a 25 year old woman who scratched, strangled and bit her 8 year old stepson.

The child murderer Griffith bit a little girl in the left buttock when she lay dying (Godwin). Walther describes a juvenile murderer who choked his victims – little boys – and bit them in the cheeks. In the case of a boy upon whom a paedophil rape had been committed, it was stated that there was a bite wound on this left cheek (v. Hentig).

A juvenile murderer bit his victims — other boys — on the nose (v. Hentig). It is said that in normal life it does occur, too, that mothers bite their babies on the nose. O'Donnel reports of a woman who was indicted of murder in seven cases with children. The last child was strangled and bitten. A father who indecently assaulted his children, two girls of ten and seven years of age, bit them on the breasts and buttocks (v. Hentig and Viernstein). Zerndt describes a murder and rape committed on a 5 year old boy, between whose navel and genitals a bite-mark was found in the skin of the lower abdomen. In his text-book, Prokop shows a picture of a battered child with bite-rings. Schweitzer has examined an 11 year old Italian boy who was bitten by his father for punishment purposes. In recent times three cases of bite-marks on abused children have been described by Sims, Grant and Cameron.

When children are ill-treated more or less clearly recognizable bite-rings are very often found, as a rule teeth-prints without severing of the skin.

A few cases observed in the Institute of Forensic Medicine of the University of Düsseldorf are listed, together with the most important dates, in Table 1. It deals with about 11 out of altogether 48 cases of ill treatment followed by death. Besides numerous haematomas in the region of the head, the torso and the extremities, other strongly impressed bite-marks were identified. A subdural haematoma was proved as the cause of death of 9 of these children. Bite-marks themselves are rarely fatal, often only when followed by an infection.

In seven cases the natural mother was the offender and in one case the foster-mother (case 5). In case 9, up to the present time both parents are being questioned as possible perpetrators, but at this stage a conviction has not been determined. In case 10 a friend of the child's mother was supposed to have affectionately bitten the child on the cheek. In case 8 the child's father pretended to have bitten the child in order to „shock“ it and set the heart and circulation activity in motion again, which was about to fail. The child was covered with bite-rings of different intensity. With the help of an autopsy a high degree of Otitis media, an intestinal catarrh, an anaemia and a brain Oedema were diagnosed. These symptoms are usually found in sudden death, because of „so called“ natural causes in very young children. Definitely a concussion of the brain as reason of the cerebral oedema could not be cancelled out because in the region of the head, too, we have been able to trace haematomas of a different kind and also bite-marks.

In case 1 the 2 year old boy showed among other injuries several bite-marks on the upper and lower extremities, in the skin of the buttocks and on the abdomen and back. The mother had beaten and bitten the child in a fit of rage and anger because the father had failed to marry her in spite of numerous promises. In case 2 the child was illegitimate and in the meantime the mother had married and become pregnant again. According to her statement she had repeatedly beaten, punched and bitten the child. The child in case 3 was in an unimaginably ill-used condition and suffering from malnutrition. It was covered all over with haematomas, scratch wounds and bite-marks. Besides that, the neck showed signs of strangulation. The child's mother had been convicted previously as a result of ill treatment of an illegitimate child of hers which she had beaten and bitten. The 2 year old boy in case 4 had several haematomas and a fracture of the skull base. A clearly recognizable bite-mark was evident next to the left nipple. When questioned, the child's mother stated that the one year old brother had bitten the elder brother. The 9 month old boy referred to in case 5 was covered all

Table 1.

Nr.	Sex	Age	bite-marks on	other findings	perpetrator
1	♂	2 yrs. (illeg.)	abdomen, legs, arms, feet	multiple hematomas on head, arms, legs, trunk, buttocks	mother, 30 y. 1 child
2	♂	14 m. (illeg.)	arms, legs, thigh	multiple hematomas fracture of the skull	mother, 20 y. pregnant again - 1 child
3	♂	3 yrs.	arms, legs	multiple hematomas on head, trunk etc. emaciation, incrustation, dirty	mother, 31 y. psychopathic 4 children
4	♂	2 yrs.	a single near the left nipple	fracture of the skull, hematomas, anemia	mother, 22 yrs. choleric 5 children
5	♂	9 m. (illeg.)	17 on legs, face, abdomen, chest	multiple hematomas on face, abdomen, extremities	forster-mother, 37 y.
6	♀	10 m.	arms, legs, thigh	nutritional state bad, dirty, multiple hematomas on cheeks, renal region, extremities	mother, 26 y. imbecile 2 children
7	♂	2 yrs. (illeg.)	arms, legs, buttocks	multiple hematomas, anemia, lesion of the tympanic membrane	mother, 22 y. 2 children
8	♂	20 m.	arms, legs, cheeks, head	otitis media, anemia	father, 28 y. 1 child
9	♀	3 m.	left dorsal thigh	fracture of ribs, mesentery ruptured	mother, 18 y. 1 child
10	♂	18 m.	left cheek	hematomas on right cheek, trunk, buttocks, lips	friend of the mother 2 children
11	♂	10 m. (illeg.)	right cheek	hematomas on face and head rupture of the right atrium	father, 36 y.

over with bite-rings, bite-marks and haematomas. Because of the type of bite-rings the foster-mother could be identified as the perpetrator. She had been in charge of the child for only three months. The child in case 6 was poorly fed and badly cared for. Among other injuries it had bite-marks on the legs and arms. After the usual protestations of innocence, the mother admitted having beaten, bitten and kicked the child. The boy in case 7, who was 2 years old, showed numerous haematomas and bite-marks on the arms and legs as well as on the buttocks. This was the second illegitimate child of a 22 year old woman who had ill-treated her first child as well. In the case of the 3 month old girl referred to in case 9 bite-marks over the back of the legs, besides numerous haematomas, fractures of ribs and bleedings in the abdominal area could be determined. It was the first child of a young couple who had married shortly before the birth of the child. The 18 month old boy in case 10 was the legitimate child of a mother who divorced her husband after 5 years of marriage and who is now obliged to earn her living. A friend had offered to take care of her children during her absence. The friend alleged that the boy had dropped from his arms, first falling onto the edge of the bed and then onto the floor. The boy showed numerous old and fresh haematomas in the area of the extremities, the torso, the buttocks, the lips and his left cheek. On questioning, the friend stated that he had bitten the child on the left cheek whilst playing and fooling about and that he had not had any malicious intentions. The 10 month old boy in case 11 was the illegitimate child of a 19 year old woman and an Italian who had married some month after the birth of the child. Because of the type of bite-ring the father could be identified as the perpetrator. On questioning he stated that he had bitten the child on the right cheek because of love.

The cases described above illustrate some common factors, in addition to the statements in medical literature, which refer essentially only to external appearances.

These factors are: The victims were predominantly boys. All cases have in common unsatisfactory economical conditions and perpetrators who, in addition, have come to know disappointments and strained relationship with their particular partner. The female offenders — relatively young and overworked — had no professional training. Some had only been to a special school for mentally retarded children. Some were known to be psychopaths.

The deed may be seen as a result of an accumulation of emotional strain, at all events at least in those cases in which the child's mother was the perpetrator in question. The helplessness of the child drove her to perform these acts, in order to finally hurt her partner. As yet there is no solution to the recent case No. 10. In case 8 the statements of the perpetrator could not be refuted.

Bite-marks in cases of ill-treatment and battered children, combined with other signs of acts of violence, disprove the attempts of exculpation by the suspected child-minders; they nearly always lead to criminal and punishable assistance from third person, especially when combined with haematomas and fractures as well as other signs resulting from acts of violence.

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*Received December 8, 1975*

*Accepted May 19, 1976*