

CASE REPORT

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Autoerotic Deaths in the Literature from 1954 to 2004: A Review

ABSTRACT: Autoerotic death by hanging or ligature is a method of autoeroticism well known by forensic pathologists. In order to analyze autoerotic deaths of nonclassic hanging or ligature type, this paper reviews all published cases of autoerotic deaths from 1954 to 2004, with the exclusion of homicide cases or cases in which the autoerotic activity was not solitary. These articles were obtained through a systematic Medline database search. A total of 408 cases of such deaths has been reported in 57 articles. For each case, the following characteristics are presented here: sex, age, race, method of autoerotic activity, cause of death, and location where the body was found. Autoerotic death practitioners were predominantly Caucasian males. Victims were aged from 9 to 77 years and were mainly found in various indoor locations. Most cases were asphyxia by hanging, ligature, plastic bags, chemical substances, or a mixture of these. Still, atypical methods of autoerotic activity leading to death accounted for about 10.3% of cases in the literature and are classified here into five broad categories: electrocution (3.7%), overdressing/body wrapping (1.5%), foreign body insertion (1.2%), atypical asphyxia method (2.9%), and miscellaneous (1.0%). All these atypical methods are further discussed individually.

KEYWORDS: forensic science, autoerotic death, autoerotic asphyxia, review

Autoerotic deaths have been defined as accidental deaths occurring during individual, usually solitary, sexual activity in which a device, apparatus, or prop used to enhance the sexual stimulation of the deceased in some way caused unintended death (1). Although autoerotic fatalities are not so uncommon, accounting for about 500–1000 deaths per year in the United States alone (2), the majority of them are sexual asphyxia by hanging or ligature while the nonasphyxia type is rare. As the latter is unusual, each forensic pathologist encounters just a few such cases during his career. In addition, multiple-case analyses rarely present more than a hundred cases each, of which only very few are of nonclassic type (3–8). Thus, to obtain enough cases to be able to analyze autoerotic deaths of nonclassic hanging or ligature type, here we review all the reported cases in the last 50 years.

Method

The Medline database was used to search for articles that mentioned cases of autoerotic death. The terms used for the search were: asphyxiophilia, autoerotic accident, auto-erotic accident, autoerotic asphyxia, auto-erotic asphyxia, autoerotic asphyxiation, auto-erotic asphyxiation, autoerotic death, auto-erotic death, autoerotic fatalities, auto-erotic fatalities, autoerotic fatality, auto-erotic fatality, autoerotic practice, auto-erotic practice, autoeroticism, auto-eroticism, hypoxiphilia, lethal paraphiliac syndrome, masturbation and death, and sexual asphyxia (Table 1). All published studies from 1954 to 2004 were reviewed, and the papers kept for this study were the one reporting case(s) of autoerotic

death, with the exclusion of homicide cases or cases in which the autoerotic activity was not solitary. Articles in languages other than English or French were excluded. In addition, three other papers were included in the review. One old article that the authors were aware of was also included in the analysis, although the keywords did not bring it up (9). The other two were published in January 2005 and were also included even though they did not belong to the 1954–2004 period (10,11).

When two studies revised cases from the same region a with period overlap, the study covering the larger period was selected. When a single case was reported in more than one paper, only the most detailed account was retained. For this reason, the total number of cases presented in original articles can differ from the total number of cases presented in Tables 2 and 3 for each article included in this review.

Results

A total of 57 studies fulfilled the previously described criteria. These studies reported between 1 and 117 cases of autoerotic deaths each, with a total of 408 cases for the 57 articles (1,3–58). Two independent judges recorded the following aspects for each case: sex, age, race, method of autoerotic activity, cause of death, and location where the body was found (indoors/outdoors, emplacement). When individualized information on each case was available, these cases are separately listed in Table 2, while studies that regrouped multiple cases without as much individualized detailed information are listed in Table 3.

Sex, Age, and Race

There was a male predominance, with 390 male victims for 18 females ones (21:7 male:female ratio). The victims reported were

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TABLE 1—Keywords and result of the literature research.

Keywords	Total Number of Articles in Medline (1954–2004)	Number of Articles Meeting the Criteria for Meta-Analysis
Asphyxiophilia	8	3
Autoerotic accident	42	20
Auto-erotic accident	9	4
Autoerotic asphyxia	51	29
Auto-erotic asphyxia	10	5
Autoerotic asphyxiation	49	29
Auto-erotic asphyxiation	9	5
Autoerotic death	73	42
Auto-erotic death	13	6
Autoerotic fatalities	11	8
Auto-erotic fatalities	0	0
Autoerotic fatality	3	1
Auto-erotic fatality	0	0
Autoerotic practice	20	12
Auto-erotic practice	3	2
Autoeroticism	16	3
Auto-eroticism	2	0
Hypoxiphilia	0	0
Lethal paraphiliac syndrome	2	2
Masturbation and death	61	20
Sexual asphyxia	74	26

aged from 9 to 77 years. Of the 408 cases, 334 were Caucasian, seven were Black, five were Asian and two others (native or mixed). For the remaining 60 cases, there was no race specification.

Method of Autoerotic Activity

The most frequently encountered method of autoerotic activity was asphyxia by hanging or ligature. In the 92 cases presenting individualized detailed information (Table 2), the methods of autoerotic activity were hanging (33 cases) or ligature (7), plastic bag and/or gas or chemical substance (26), electrocution (8), overdressing/body wrapping (6), foreign body insertion (rectum, penis, or mouth) (5), inverted or abdominal suspension (2), asphyxia by immersion (1), and others (4).

In the 316 other cases (Table 3) from multiple-case studies without individual information, most cases were asphyxia by hanging, ligature, plastic bags, chemical substances, or a mixture of these. Still, methods used in 16 other cases were different from the above: seven cases of electrocution, five chest compression, two inverted suspension, one smothering with a pillow, and one drowning. Unfortunately, those cases were often only mentioned without any further details.

Cause of Death

Altogether, asphyxia was the main cause of death in the vast majority of cases.

In the 92 cases with individualized information, asphyxia was the cause of death in 74, including 40 strangulation asphyxia by hanging or ligature, 17 chemical asphyxia, 13 rebreathing with plastic bag or body wrapping, two positional asphyxia, one choking, and one drowning. Death from electrocution, accounting for eight deaths, was the next most-reported cause of death. Rarely seen were deaths by hyperthermia (one case), hemorrhage (1), heart disease (3), head-down position (1), fatal air embolism (1), and intracranial injury from gunshot wound (1). In two cases, death was considered delayed, caused by complications of the initial autoerotic activity: one peritonitis and one bronchopneumonia with acute pyelonephritis. In the multicase studies without

individualized information, the main cause of death was also asphyxia, accounting for 305 cases out of 316. Most of those asphyxia were strangulation by hanging or ligature, chemical asphyxia, rebreathing asphyxia, or a combination of these. Nevertheless, nine cases were different forms of asphyxial deaths, including positional asphyxia by inverted suspension (two cases) or chest compression (5), asphyxia by drowning (1), and asphyxia by smothering (1). Apart from asphyxia, other causes of death were from electrocution (seven cases), subarachnoid hemorrhage because of rupture of aneurysm (2), acute left heart failure (1), and hypothermia (1).

Location Where the Body Was Found

Most of the time (187 cases), the victim's body was found indoors. Less commonly (17 cases), the body of the victim was discovered in an outdoor location, like a wooded area or a children's playground. There were also 201 cases for which no location data were available. In addition, it should be mentioned that three cases were intentionally excluded from location analysis. In two of these cases, death was delayed from the initial autoerotic activity (20,47); therefore, the location where the victim's body was found is nonrelevant. Likely, in one case, the body was not found in the autoerotic activity location because the victim ran to his neighbor's door in order to get help (28).

Further analysis of the indoors cases revealed the following sublocations: the bedroom (53 cases), the bathroom (19), the basement (13), at work (4), the living room (3), a motor vehicle (3), the garage (3), the kitchen (2), and several miscellaneous locations (e.g., cellar, jail cell, hotel room) (22 cases). In 14 cases, no data were given for the precise indoor location. Finally, the authors considered that the sublocations given for 51 cases were too imprecise for the purpose of this current study. For example, 14 bodies were reported to have been found in an apartment or home while in 27 cases, the location was referred to as "in the bedroom or living room" without further distinction. Therefore, the actual number of cases where the body was found in the bedroom and in the living room is superior to the one presented.

Discussion

As expected, this 50-year review revealed that the majority of cases of autoerotic activity are asphyxia by hanging or ligature. Plastic bags and gas or chemical substances were also frequent methods. Although these first conclusions came as no surprise, the present study also clearly reveals that unusual autoerotic activity is not so rarely found in the literature after all. Indeed, 10.3% (42 cases out of 408) of all published cases consisted of atypical autoerotic methods. These atypical methods can be classified into five broad categories: electrocution (3.7%), overdressing/body wrapping (1.5%), foreign body insertion (1.2%), atypical asphyxia methods (2.9%), and miscellaneous (1.0%). It is important to notice that this proposed classification is solely based on the method used during the autoerotic activity and does not refer to the cause of death.

Electrocution

Throughout the literature, 15 cases of autoerotic electrocution have been reported.

Sivaloganathan (55) was the first to describe a case of electrocution in which a 36-year-old man applied wires, connected to television speaker terminals to one end and to his scrotum and in his anal orifice to the other end. One of the wires had broken off

TABLE 2—*Characteristics of detailed cases**.

Reference	Number of Cases	Sex	Age	Race	Method	Cause of Death	I/O	Emplacement
11	8	♂	37	C	Plastic bag	Asphyxia (rebreathing)	I	Bedroom
			17	C	Butane	Chemical asphyxia (butane)	I	Home
			55	C	Plastic bag+N ₂ O	Chemical asphyxia (N ₂ O)	I	Kitchen
			39	C	Electrocution	Death from electrocution	I	Back room of a synagogue
			26	C	Coprophilia	Ischemic heart disease	I	Bathroom
			53	C	Plastic bag+gas mask+diving wetsuit	Asphyxia (rebreathing)	I	Bedroom
			31	C	Plastic bag	Asphyxia (rebreathing)	I	Motel room
			27	C	Russian Roulette	Intracranial injury from gunshot wound	I	Bedroom
12	1	♂	22	ND	Hanging	Asphyxia	I	Bedroom
13	1	♂	18	C	Electrocution	Death from electrocution	I	Bedroom
14	1	♂	35	ND	Hanging	Asphyxia	I	Bed compartment in a cab of a truck parked on the roadside
15	4	♀	17	ND	Plastic bag	Asphyxia (rebreathing)	I	Bedroom
		♀	28	ND	Plastic bag+ether	Chemical asphyxia (ether)	I	Bedroom
		♀	28	ND	Ligature at the neck related to the ankles	Asphyxia	I	Bedroom
		♀	48	ND	Hanging	Asphyxia	I	Basement doorway (near stairway)
16	1	♂	28	ND	Plastic tube connected to intravenous catheter	Chemical asphyxia (ketamine) and rebreathing (gag)	I	Bedroom
					Urethral catheter inserted in the penis			
17	1	♂	18	C	Stifneck and rubber ball as a gag	Asphyxia	I	Bedroom
18	1	♂	50	A	Hanging	Asphyxia (rebreathing)	I	Bedroom
19	1	♂	21	ND	Plastic bag	Asphyxia	I	Bedroom
20	3	♂	46	ND	Hanging	Asphyxia	I	Living room
					Overdressing: seven pairs of stockings/panthyhose	Hyperthermia	O	In a bushland
		♂	40	ND	Perforation of the bladder by a lead pencil inserted into the penis	Peritonitis	N/A	N/A delayed death
		♂	56	ND	Anal insertion of a shoe horn	Hemorrhage because of laceration of the anal canal	I	Bedroom
21	1	♀	31	C	Ligature strangulation: dog leash around the neck and related to the bed	Asphyxia	I	Bedroom
22	2	♂	21	ND	Plastic bag+aerosol glue spray	Chemical asphyxia (aerosol glue)	ND	ND
		♂	35	ND	Plastic bag+diving wetsuit	Asphyxia (rebreathing)	ND	ND
23	2	♂	36	ND	Hanging	Asphyxia	I	Bedroom
		♂	33	ND	Hanging	Asphyxia	I	Bedroom
24	1	♂	26	C	Plastic bag+tetrachloroethylene	Chemical asphyxia (tetrachloroethylene)	I	In a van in a parking lot (at work)
25	1	♂	27	ND	Electrocution	Death from electrocution	I	Bedroom
26	3	♂	22	C	Propane	Chemical asphyxia (propane)	I	Bedroom
		♂	42	C	Propane	Chemical asphyxia (propane)	I	Basement
		♂	62	C	Propane	Chemical asphyxia (propane)	I	Bedroom
		♂	62	C	Propane	Chemical asphyxia (propane)	I	Kitchen
27	1	♂	ND	ND	Hanging	Asphyxia	I	Bedroom (closet)
28	4	♂	48	ND	Hanging	Asphyxia	I	Cellar
		♂	32	ND	Electrocution	Death from electrocution	I	Bedroom
		♂	29	ND	Zucchini inserted into the larynx	Asphyxia by choking	N/A	N/A
		♂	77	ND	Electrical appliances (vacuum cleaner+hair dryer)	Arteriosclerotic and hypertensive heart disease	I	Bathroom
29	5	♀	22	ND	Hanging with control of pressure at the left wrist	Asphyxia	I	Basement
		♀	45	ND	Ligature strangulation with control of pressure at the left wrist	Asphyxia	I	Bedroom
		♀	21	ND	Hanging	Asphyxia	I	Bedroom
		♀	23	ND	Ligature around the neck, controlling pressure with ankles	Asphyxia	ND	ND
		♀	20	ND	Ligature around the neck	Asphyxia	ND	ND
30	1		ND	ND	Body covered with a plastic sack suspended with ropes+tennis balls to compress genitals	Death because of head-down position	I	ND
31	2	♂	42	A	Hanging: rope attached to the shovel of a tractor	Asphyxia by hanging+CO intoxication	O	In the field
		♂	62	C	Suspended head-down by power hydraulic	Positional asphyxia by thorax compression	O	In the field
32	1	♂	30	C	Hanging+face and body covered with duct tape+tube for breathing	Asphyxia	I	Basement

TABLE 2—Continued.

Reference	Number of Cases	Sex	Age	Race	Method	Cause of Death	I/O	Emplacement
33	5	♂	30	C	Can of dichlorodifluoromethane directed at the mouth	Chemical asphyxia (dichlorodifluoromethane)	O	Wooded area
		♂	38	C	Compounds of 1-1-1-trichloroethane (i.e., liquid paper)	Chemical asphyxia (1-1-1-trichloroethane)	I	Bedroom
		♂	31	C	Sock saturated with 1-1-1-trichloroethane solvent	Chemical asphyxia (1-1-1-trichloroethane)	I	Living room
		♂	31	C	Plastic bag+nitrous oxide metal tank	Chemical asphyxia (NO)	I	Bedroom
		♂	35	C	Isobutyl nitrite	Chemical asphyxia (isobutyl nitrite)	I	Bedroom
34	2	♂	24	C	Hanging	Asphyxia	I	ND
		♂	23	C	Hanging	Asphyxia	I	Bathroom
35	1	♂	27	C	Hanging	Asphyxia	I	Bedroom (closet)
1	1	♂	48	C	Hanging	Asphyxia	I	Bathroom
36	1	♂	25	C	Hanging-controlled pressure with left wrist+gag	Asphyxia	I	Bedroom
37	1	♀	40	C	Intravaginal insertion of a foreign body (carrot)	Fatal air embolism	I	Bedroom
38	1	♀	19	C	Ligature rope around the neck, controlling pressure with ankles	Asphyxia	I	Bedroom
39	1	♂	25	ND	Multiples layers of women's clothing+plastic bag	Asphyxia (rebreathing)	I	Bedroom
40	1	♂	57	C	Masturbation with a vacuum cleaner	Cardiac atherosclerotic disease	I	Trailer home, against a dining room table
41	1	♂	59	ND	Anesthetic face mask+machine with gas mixture (95% nitrous oxide 5% oxygen)	Chemical asphyxia (NO)	I	Apartment
42	1	♂	38	C	Hanging	Asphyxia	I	Garage

*References are listed by numbers. C, Caucasian; B, Black; A, Asian; ND, no data; N/A, nonapplicable; I, indoors; O, outdoors.

and the victim was killed by a current generated when he looked inside the back of the television set to see what was wrong.

In the same year, Cairns and Rainer (54) reported two cases of electrocution: a case of a 26-year-old man found dead with electrical wires beneath his clothing and one case of a 58-year-old man who manipulated a ceiling light dimmer switch to control the intensity of the electrical wires he had applied around his nipples and anus.

Cooke, Cadden, and Margolius (28) presented two cases of autoerotic deaths by electrocution. The first case consisted of a 32-year-old man who connected a metal chain wrapped around his penis to an electric cord. In the second case, death was not attributed to electrocution, but the method of autoerotic activity was related to masturbation with electrical appliances in a 77-year-old man. Hypertensive heart disease was the cause of death (28).

In another report, a 27-year-old man, found dead in his bed, had anally inserted a self-made electrode connected to a tampon-like object, and died from electrocution while trying to apply a second electrode to the penis (25).

In 2003, Schott et al. reported a case of accidental death from electrocution in a context of autoeroticism. An 18-year-old man was dressed with female clothes, with a brassiere showing metal washers related to electric wires with wet clothes under each brassiere cup. Death was ruled secondary to low-voltage electrocution (13).

More recently, in 2005, Shields et al. (11) described two cases of electrocution among 11 cases of autoerotic death. One case was originally described by Schott et al. in 2003 (see above). The other case was that of a 39-year-old man discovered in the back room of a synagogue with an inflatable catheter inserted into his anorectum. The latter was connected to a rheostat attached to a 220-V plug. Autopsy revealed areas of erythema of the rectal mucosa and electrical burns to the left hand. Death was attributed to low-voltage electrocution.

In multiple-case analyses, articles by Hazelwood, Burgess, and Groth in 1981 and by Behrendt and Modvig in 1995 each report, respectively, five and two electrocution cases (4,7).

Overdressing/Body Wrapping

In the last 50 years, overdressing or body wrapping has been the method used in six cases.

In 1960, Johnstone, Hunt, and Ward described two cases of men wrapped from head to toe in a plastic bag (9).

A very unusual case was later reported by Minyard. He described a 34-year-old nude man wrapped in plastic material at work, with a snorkel apparatus for breathing. The apparatus fell from his mouth and the victim died from asphyxia (46).

A similar unusual case, reported 2 years later by Eriksson, Gezelius, and Bring, described a 60-year-old man wrapped in 14 blankets that had been sewn together. The victim's penis was in a plastic bag. The victim died from asphyxia with combined hyperthermia (44).

In 1993, Madea described a case of autoerotic death that presented itself like a head-down position, but was actually a case of plastic body wrapping. In fact, the 56-year-old man covered his body with a plastic sack knotted to a board and was standing on top of chairs when a mishap with one of the chairs brought him in the head-down position (30).

At last, Byard, Eitzen, and James also reported a case of hyperthermia caused by overdressing: a 46-year-old man dressed with seven pairs of stockings (pantyhose) (20).

Foreign Body Insertion

Death secondary to a foreign body insertion (rectum, penis, or mouth) was seen in five cases.

A 23-year-old man died from bladder complications, stone, and acute pyelonephritis, because of the insertion of a plastic tube into

TABLE 3—*Characteristics of nondetailed cases*.*

Reference	Number of Cases	Sex	Age Range	Race	Method	Cause of Death	I/O	Emplacement
10	16	♂	14–59	16 C	Twelve hanging; four ligature strangulation	Asphyxia	15 I	Five bedroom; four basement; two home ND; two cabin; one garage; one front hall
3	16	♂	16–76	16 ND	16 ND	Seven asphyxia by strangulation; four asphyxia by rebreathing; two subarachnoid hemorrhage because of rupture of aneurysm; one acute left heart failure; one hypothermia; one asphyxia by drowning	1 O 14 I	ND Eleven apartment; one car; one jail cell; one hotel room
4	46	♂	10–71	C	Twenty hanging; 14 plastic bag; six anesthesiophilia; two electrophilia; two invert suspension; two strangulation	Forty-four asphyxia; two death from electrocution	80% I	One frozen canal; one parking lot 58% bedroom or living room; 14% bathroom; 8% adjacent room
5	117	♂	10–56	113 C; 1 B; 1 other; 2 ND	Ninty-three hanging; seven plastic bag+gas or solvent; six ligature strangulation; five plastic bag; three hanging+plastic bag; one chest compression; one gas or volatile solvent; one ligature strangulation+plastic bag	One hundred and seventeen asphyxia	4% O 16% other 117 ND	ND ND 117 ND
6	8	♂	15–59	5 C; 2 A; 1 other	Six hanging; one plastic bag; one smothering (pillow)	Asphyxia	7 I	One public location; ND for the rest
7	70	♂	9–77	63 C; 3 B	Forty-four hanging; six neck compression; 12 airway obstruction; five electrocution; four chest compression; two oxygen exclusion with gas or chemical replacement [†]	Sixty-five asphyxia; five death from electrocution	1 ND 70 ND	1 ND 70 ND
		♀		3 C; 1 B				

*References are listed by numbers. C, Caucasian; B, Black; A, Asian; ND, no data; I, indoors, O, outdoors.

[†]In this article, the total number of presented cases is 70, although the total number of mentioned autoerotic activity method equals to 73. This disparity is probably explained by a combination of methods in some cases. Unfortunately, it is not mentioned in the article.

the bladder (47). This was the first reported case in the last 50 years of fatal foreign insertion.

The case of a 40-year-old woman who inserted a carrot into her vagina was reported next. The insertion caused air embolism, leading to death (37).

In the article by Cooke, Cadden, and Margolius, a case of choking on a zucchini was described. In fact, the autopsy of a 29-year-old man showed a rubber band around the base of the penis and a zucchini in the larynx and oropharynx (28).

An article by Byard, Eitzen, and James reported two cases of foreign body insertion. In the first case, a 40-year-old man died of peritonitis because of perforation of the bladder by a lead pencil. The second case is one of a 56-year-old man who anally inserted a shoe horn. The insertion caused anal laceration (20).

It is worth mentioning that the method in all of the delayed deaths (i.e., because of complications of the initial auto-

erotic activity) consisted of a foreign body insertion. In other categories of autoerotic activity, such delayed deaths were not reported.

Atypical Asphyxia Method

The atypical asphyxia method, as opposed to classic ones (i.e., asphyxia by hanging, ligature, plastic bag, and/or gas or chemical substances), included the following subtypes: chest compression (1.2%), inverted suspension/abdominal ligature (1.0%), immersion/drowning (0.5%), and smothering (0.2%). A total of 12 such cases were reported.

Chest Compression—This unusual autoerotic method was mentioned in two multiple-case analyses (5,7), for a total of five chest compression cases. No details were given as to the specific method of chest compression.

Inverted or Abdominal Suspension—In only four cases was suspension in an inverted wanted position or by high abdominal ligature reported.

First in 1984, Thibault et al. described a nude 27-year-old man suspended in a storage room at work. Sexual asphyxia involving high abdominal ligature was the cause of death (49).

Then in 1993, a case of a 62-year-old man, found dead in a barn, was reported. The man was nude except for woman's shoes. He was suspended in an inverted position to an hydraulic tractor, when something went wrong and was then pinned to the ground, resulting in positional asphyxia (31).

Finally, in their 46 case analyses Behrendt and Modvig (4) briefly mention two cases of inverted suspension.

Immersion/Drowning

Autoerotic cases by immersion or resulting in drowning are very unusual. Two such cases were found in the literature review.

In 1984, Sivanogalathan reported an unusual autoerotic death of a man using submersion as an asphyxia method. The body was found in a river, dressed like a woman, a large stone tied to the right ankle (48).

In 2003, an analysis of 16 autoerotic deaths included one drowning case. No further details concerning the specific method used in this drowning case for autoerotic activity were given in the article (3).

Smothering—Death because of smothering usually occurs in the context of homicide, suicide, and very rarely accident (59). In 1990, a study of eight autoerotic deaths revealed one case of smothering (6). It was reported that the individual smothered himself with a pillow, without any further details.

Miscellaneous

Finally, there was four cases that did not fit into the previous categories.

There was one case described by Imami and Kemal (40) in which a 57-year-old man masturbated with a vacuum cleaner on a dining table and died of a heart attack of atherosclerotic disease. Another one is the case of a 25-year-old man who used the heat of a table lamp between his thighs to enhance sexual pleasure. Unfortunately, the victim died from electrocution, although the initial autoerotic method was not related to any electric current (53).

In 2005, two cases reported by Shields et al. did not fit into the previous categories. The first was a case of coprophilia where a 26-year-old man was found nude in his bathroom, covered with fecal material. Sexual accessories were found near the victim and death was attributed to ischaemic heart disease with myocardial fibrosis (11). The second case implied Russian Roulette. Indeed, a 27-year-old man was found in his bed with a gunshot wound to the right side of the head. Evidence of masturbation before the gunshot led the investigators conclude an autoerotic practice of Russian Roulette.

Conclusion

In the literature of the last 50 years, reported victims of autoerotic fatalities were generally using hanging, ligature, rebreathing in plastic bags with gas, or chemical substances to cause asphyxia, in order to enhance sexual pleasure. However, atypical methods of autoerotic activity leading to death have also been reported, accounting for about 10.3% of cases in the literature. These atypical methods can be classified into five broad categories: electrocution, overdressing/body wrapping, foreign body insertion, atypical asphyxia method, and miscellaneous.

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