



STRANGULATION

Strangulation is not choking. Choking is an internal obstruction of an airway while strangulation is a form of asphyxia and the closure of the blood vessels and air passages in the neck as a result of external pressures on the neck. Unless quoting, investigators should document this act of violence as strangulation and not choking.

Strangulation can result in unconsciousness, critical injury, or death, and less pressure than it takes to pull the trigger of a handgun can cause unconsciousness.

Strangulation Includes

- Hanging (most often associated with suicide).
- Ligature (use of an object such as a phone cord, rope, or clothing).
- Manual (use of the hands).

Signs and Symptoms of Strangulation Include

- Neck pain or swelling.
- Sore throat.
- Hoarse or raspy voice.
- Voice loss.
- Difficulty swallowing.
- Scratch marks.
- Scrapes.
- Claw marks (often defensive wounds from the victim on the suspect).
- Chin abrasions.
- Thumbprint bruises.
- Bruises behind the ears.
- Red, linear marks, often three.
- Petechiae (red dots on the eye).
- Rope or cord burns.
- Loss of bodily functions.

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- Fainting or unconsciousness.
- Nausea or vomiting.
- Lung damage.
- Behavioral changes.

Investigators should ask every victim of elder abuse if the victim was strangled. If the victim says no, investigators should ask if the offender put his hands or any objects around the victim's neck.

In elder abuse cases, investigators should consider that the abuser may use medical equipment or restraints to prevent the older adult victim from wandering or to strangle the older victim.

Other Questions Investigators Should Ask Strangulation Victims

- How did the offender strangle the victim (with one hand, two hands, an object such as a phone cord or article of clothing)?
- Was the offender wearing jewelry?
- For how long did the offender strangle the victim?
- How much force did the offender use?
- Did the offender say anything while strangling the victim and if so, what?
- What was the offender's facial expression?
- Did the offender shake or whip the victim back and forth?
- Has the offender done this before?
- Did the victim lose consciousness or control of bodily functions?
- What specific symptoms is the victim experiencing?

In addition to these questions, investigators should photograph any visible injuries, look for other injuries, take follow-up photographs, and *always* dispatch EMS because of the potential of unnoticeable, internal injuries that could be fatal. Because of underlying brain damage caused by the lack of oxygen during strangulation, victims have died weeks later.

Sometimes victims may not realize the severity of their injuries, be reluctant to seek medical attention, or trivialize the violence they have experienced. As a result, investigators' and victims' minimization of what has occurred can prove harmful and fatal.