

Case Report

Self-Aggression at the Neck Level. A Dangerous Act at the Crossroads of Forensic Medicine and Psychiatry. About A Clinical Case

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Abstract

In forensic medicine, the neck is a specific area par excellence, the site of a multitude of violence, most often fatal. Cervical self-aggression is a dangerous act of self-destruction with serious consequences.

The self-mutilator, is a person with mental difficulties and should receive adequate psychiatric care.

The diagnosis of self-mutilation is first medico-legal, entitled within the framework of a medico-judicial procedure, well defined but incomplete, it will only be when the forensic doctor directs the self-mutilator for specialized care in psychiatry.

My objective in this work is to show through a clinical case the interest of medico-legal and psychiatric cooperation in the management of self-aggressive violence, for the interest of the patient and in the service of health public.

INTRODUCTION

Self-harm is an act of self-destruction that involves inflicting injury on the body.

It is an act of violence, which can have a psychiatric origin and which affects both sexes, according to a British study, a previous history of self-mutilation was, found in 7.5% of women on reception to a London prison [1].

Cervical self-aggression is a dangerous gesture of self-destruction through its particular site "the neck" which is a vital, aereo-digestive crossroads and serious because of its serious and even fatal consequences.

A self-harmer who inflicts deep wounds on his neck should be the subject of a medical investigation followed by adequate psychiatric care.

In our forensic medicine department at the University Hospital Tlemcen, this type of injury is encountered in consultation, the neck was targeted in 1.4% of consultants with cervical injuries "N=728" during 2 years of study [2].

In our clinical case, we show the approach, which made it possible to direct a person in danger towards complete care; it is only the fruit of a close collaboration between legal medicine

and psychiatry in the service of well-being of the patient and the promotion of public health.

Definitions

Self-harm: Self-harm is defined as the act of someone hurting themselves intentionally (on purpose). Most people who self-harm aren't attempting suicide. Self-harm can be a way to express or control distressing thoughts or feelings [3].

Attempted suicide: Attempted suicide an act of self-harm that is intended to result in death but does not. A suicide attempt may or may not result in injury [4].

Injuries caused by self-harm are self-inflicted injuries characterized by their shape, they are linear, close together and parallel to each other, all directed in one direction, more or less deep, inflicted by a sharp instrument (Figure 1,2), predominating at the accessible regions of the body where the perpetrator would choose to attempt to end his life.

Objectives of the work

My objective in this communication is to show through a clinical case the interest of medico-legal and psychiatric cooperation in the care of a person victim of self-aggression.

METHOD AND MATERIALS

Clinical Case “Self-inflicted injuries”

A 33-year-old man came to our consultation, accompanied by a member of the national gendarmerie, with a request for medico-legal examination and assessment of total incapacity for work.

During questioning, the consultant told us that he had been the victim of intentional assault and battery two days ago by an identified person, kept in police custody and initially accused of an attempted throat slitting.

RESULTS AND DISCUSSION

The clinical examination shows the existence of three wounds of the same nature

“Linear with clear edges with a more and less sinuous path”, located on the same horizontal level spreading over the regions (anterior and lateral) of the neck (Figures 1-4).

The diagnosis of self-harm injuries was made a medico-legal report, was drawn up and submitted to the requesting authority.

A letter for specialist psychiatric advice has, been drawn up.



Figure 1 Previous self-harm, Photo forensic medicine service Tlemcen University Hospital, Algeria



Figure 2 Left self-injury “zone III and II”, Photo forensic medicine department CHU Tlemcen, Algeria



Figure 3 Left self-injury “zone III and II”, Photo forensic medicine department CHU Tlemcen, Algeria

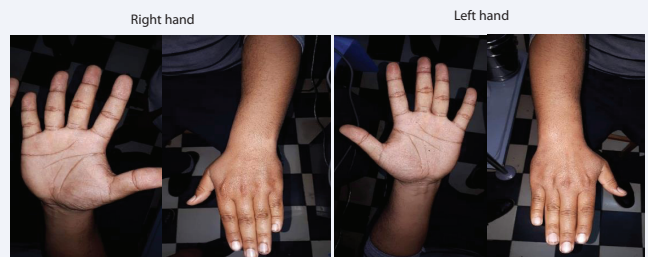


Figure 4 The upper limbs did not have defense lesions, Photo forensic medicine department CHU Tlemcen

CONCLUSION

The clinical case presented shows our attitude to a medico-legal problem that of self-aggression, which is an act inflicted on oneself with the aim of indicting an innocent person and consequently, distorting the truth.

Our mission as an expert forensic doctor is to describe the injuries, develop a medico-legal diagnosis and establish a total incapacity for work with serious criminal consequences for the person accused of being the alleged author of intentional injuries, described in the penal code. Algerian, in accordance with amended article 264 [5].

Our behavior in the face of an act of self-aggression provoked reflection in the face of a person suffering from a mental health problem, the fact that the self-mutilation, was at the level of the neck and what could be the source of serious damage, even vital.

A specialist opinion in neuropsychiatry was strongly, recommended as part of comprehensive and multidisciplinary care for a sick person.

Self-inflicted injuries are at the crossroads of two specialties, forensic medicine and neuropsychiatry, which work together and complement each other in the service of public health.

RECOMMENDATIONS

The diagnosis of self-mutilation is firstly medico-legal, made

within the framework of a well-defined but incomplete medico-judicial procedure; care will only be complete when the forensic doctor refers the perpetrator of the self-aggression for specialized treatment in neuropsychiatry.

REFERENCES

1. Wilkins J, Coid J. Self-Mutilation in Female Remanded Prisoners: I. An Indicator of Severe Psychopathology. *CBMH*. 1991; 1: 247-267.
2. The neck in forensic medicine, for a diagnostic methodology, prospective and descriptive study at the forensic medicine department of the Tlemcen University Hospital, Algeria. (forensic medicine department, Tlemcen University Hospital, Tlemcen, Algeria, 2021).
3. Self-Harm. Health direct Australia, « Self-Harm », text/html (Health direct Australia, 1 août 2023).
4. Suicidal Behavior -Mental Health Disorders. MSD Manual Consumer Versio.
5. <https://www.joradp.dz/trv/fpenal.pdf>.