DEATHS IN CUSTODY: The UK Experience

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Custodial deaths in the UK have typically occurred in 3 settings:

(i) During the initial arrest of a suspect who may be exhibiting violent or aggressive behaviour.
(ii) During transportation to a police station, usually in the back of a cellular van
(iii) Within the custody suite, usually when officers are attempting to search the detainee.

It has been our experience that neck compression (choke-holds, ‘carotid sleeper’ holds) has been uncommon but positional/postural asphyxia associated with compression of the chest and/or abdomen has been implicated in most of the recent deaths.

The so-called ‘signs of asphyxia’ such as petechial haemorrhages are usually absent in such cases and it is therefore crucial that the pathologist has, prior to the autopsy, as much information as possible regarding the circumstances of the death. Access to CCTV and body-worn cam footage should be viewed as well as information regarding the use of handcuffs, leg restraints, use of CS (pepper) spray and TASER deployment.

In many cases the suspect has demonstrated signs of Acute Behavioural Disturbance, previously referred to as ‘Excited delirium’ often as a result of the use of stimulant drugs such as MDMA and cocaine.

Underlying natural disease may, in some cases, contribute to the fatal outcome and such conditions as coronary artery disease, hypertension and obesity may need to be considered. In view of this a full autopsy, including appropriate histology, must be carried out.

Finally, it should be remembered that restraint-related deaths are usually complex, often with many factors contributing to the fatal outcome.