

# Overkill with Scissors: A Case Report

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## Abstract

**Introduction:** "overkilling" in Forensic Medicine refers to a specific type of homicide which is characterised by excessive amount or severity of wounds or injury. Further, stabbing is the predominant form of homicidal violence globally, resulting in both physical impairment and death.

**Case presentation:** We present a case of a 28-year-old woman who was stabbed multiple times by her husband, who had used a shawl as a ligature material and a single pair of tailoring scissors as the weapon. On external examination a total of 48 injuries were inflicted on the body- with multiple scratch abrasions and a pressure abrasion over the neck. Vital injuries were noted to hit the right lung, diaphragm, liver, kidneys, abdominal aorta, ureter, mesentery, ascending colon. The stomach contents exhibited a kerosene smell, that was later confirmed to be organophosphorus compound.

**Conclusion:** A complete autopsy is vital to determine the cause, mechanism, and manner of death and to reconstruct the events before death.

**Keywords:** Overkill; Stab wound; Scissors; Autopsy; Intimate Partner Homicide

## Introduction

Generally, stab wounds are often inflicted using knives, forks, knitting needles, screw drivers, broken bottles/glasses, pencils, picks or similar device with pointed end capable of penetrating the skin.<sup>1</sup> A stab wound is characterized by an injury where the wound is deeper than the length or the width on the surface on the skin. Where the depth is usually equal to or less than the length of the blade that was used in producing it.<sup>2</sup>

In our case a single pair of tailoring scissors were used as the weapon to inflict multiple stab wounds of varying depths and consequently varying widths. The skin wound made by closed scissors is typically shaped like a flat 'Z' or the usual impressionist sign for a flash of lightning. The offset of the two blades gives this shallow zig-zag pattern, which is unmistakable when present.<sup>3</sup> It is well noted that scissors tend to produce linear wounds when the blades are closed but with paired perforation wounds on opening.<sup>4</sup>

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Single stab wounds are not uncommon, and in some cases may even be accidental. However, multiple stab wounds are almost always homicidal until proven otherwise. Further when we consider overkill homicides; the term "overkilling" in Forensic Medicine refers to a specific type of homicide which is characterised by excessive amount or severity of wounds or injury. "Overkill is the infliction of wounds above and beyond what is required to kill the victim".<sup>6</sup>

### Case

A 28-year-old woman was reported to have been assaulted by her husband of 5 years, due to suspicions of her being unfaithful with multiple paramours of hers from her past. The neighbours claim to have heard loud arguing, which turned into yells for help from the victim. The neighbours were unable to intervene as the house was locked from inside, however- they reported to the police that they had seen the husband repeatedly stabbing the wife through the window. A call to the police resulted in immediate arrest and containment of the scene.

The weapons used in this case were a pair of tailoring scissors and a shawl, which were both easily available as the husband was a tailor who worked out of the home at times. The weapons were seized immediately by the police at the scene of the incident.

The case was brought for an autopsy under section 302 of the Indian Penal Code.

#### At autopsy:

External examination showed the deceased was 152cm in height, moderately built and nourished, and light brown in complexion. Clothes on the body were a green colour chudidhar top, green colour leggings, one white colour slip and pink colour underwear. The chudidhar top and slip were torn in multiple places that matched with the injuries on the body, all articles of clothing were soaked in blood.

There was postmortem staining that was faint and fixed over the back of the body. Rigor mortis had set in all over the body. The nailbeds showed pallor and faint bluish discolouration. There was dried blood stains present over the face, neck, chest, upper limbs including hands, and both plantar and dorsal aspect of feet.

A total of 48 injuries were inflicted on the body with multiple scratch abrasions over the neck, and a pressure abrasion due to the use of a shawl as a ligature for strangulation. The right side of the neck showed three parallel scratch abrasions measuring 1cm x 0.2cm, 1cm x 0.2cm, and 0.8cm x 0.1cm. The left side of the neck showed two parallel linear scratch abrasions measuring 2.5cm x 0.2cm and 2.5cm x 0.1cm.

The neck also had a pressure abrasion measuring 18cm x 3.5cm present over the front and sides of neck, situated over the thyroid cartilage level, 3cm below either angle of mandible, and 3.5cm below the chin.

There were 30 stab wounds, 12 puncture wounds (4 paired, 8 unpaired), and 3 incised wounds present over the thorax and abdomen. Out of the 30 stab wounds 26 were found to be fatal. The stab wounds were shaped in a zig-zag fashion (Z-shaped).

On examination of the torso there were 40 injuries comprising of 29 stab wounds, 7 wedge shaped single puncture wounds, 3 paired puncture wounds, and one muscle depth laceration. Of the 29 stab wounds on the torso, there were 8 on the right side of the chest, 2 on the left side of the chest, 26 injuries on the back. (Figures to demonstrate)

On internal examination and dissection of the external injuries, it was noted as follows: Neck: The tissues and strap muscles beneath the ligature mark showed extravasation of blood on the right-side measuring 5cm x 3cm, and a fracture of the lamina cartilage of the thyroid with blood effused into the surrounding tissues.

Thorax: There were 5 stab wounds piercing the right lung. The left lung was relatively spared.

There were two stab wounds that traversed the right dome of diaphragm and hit the upper surface of the right lobe of liver.

Abdomen: 13 stab wounds pierced the liver, 3 stab wounds to the kidneys (2 right and 1 left), 5 stab wounds to the right side of abdominal aorta, right ureter, right side of mesentery, and posterior aspect of ascending colon.

Other relevant internal examination findings: The brain and its membranes were noted to be intact

and pale. The heart was noted to be intact with diffuse petechial haemorrhages in the endocardium. The lungs were noted to be collapsed on both sides, with pleural cavity containing 150ml of blood and blood clots on either side. The peritoneum contained 1000ml of blood and blood clots. The stomach contained 300ml of light brown colour fluid with kerosene smell, stomach mucosa was congested. The uterus was normal in size and the cavity was empty.

For further investigation:

1. The blood and viscera were collected for chemical analysis
2. Fingernail clippings were collected
3. The weapon (tailoring scissors) examined.

Chemical analysis of blood and viscera revealed that the deceased had consumed organophosphorus compound prior to death.

The weapon sent for examination showed that it was consistent with the injuries on the body as described in the report.

The postmortem changes corroborate the police history, and the postmortem interval was 12 to 24 hours prior to autopsy procedure.

Final opinion was given as:

“Death was due to shock and haemorrhage as a result of multiple stab injuries sustained, however, the deceased had consumed substance containing organophosphorus compound prior to death”.



**Figure 1: Scratch abrasions present over the front and sides of neck.**



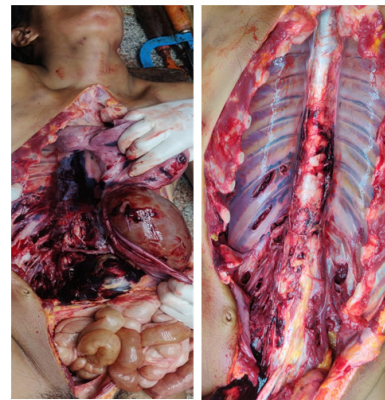
**Figure 2: Multiple Z-shaped stab wounds present over the right side and back of torso.**



**Figure 3: Stab wounds over the right side of chest and flank**



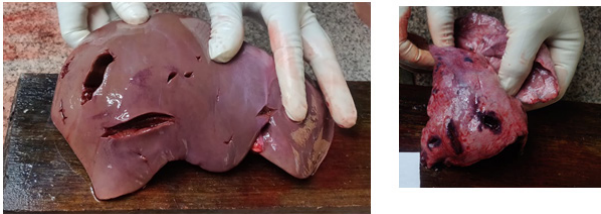
**Figure 4: Ribcage and sternum exposed, note the stab wound over the right 7-8th intercostal space, cutting the cartilaginous costochondral margin.**



**Figure 5 & 6: Organ removal from the thoracic and abdominal cavities, to reveal haemorrhages, affected viscera and wound tracks.**



**Figure 7: Dissection of neck: Extravasation of blood into the strap muscles due to underlying thyroid cartilage fracture.**



**Figure 8 & 9: Liver with multiple stab wounds present over the right lobe. Right lung with stab wounds over the back of lower lobe.**



**Figure 10: Tailoring scissors sent for weapon examination.**

### Discussion

Stabbing is the predominant form of homicidal violence globally, resulting in both physical impairment and death. In cases of overkill homicide, it is common to see multiple injuries, many of which are inflicted on the body well beyond the death of the victim.<sup>8</sup>

In our case it was noted that the weapons used were those that were easily available and in reach of the aggressor and further the grouping of injuries was localized in the head, neck, and chest regions, which is similar to the studies conducted by Alessandro Mauro Tavone et al and Kopacz P et al.<sup>9,10</sup> The scattered evidence and use of multiple weapons indicate the disorganization, the lack of planning and the escalation of the act, and the use of multiple weapons can also signal improvisation during the crime.<sup>7</sup> This is also in concurrence with the study conducted by Salfati.<sup>5</sup>

The injuries on the body give clues to the relative positions and the manner in which the weapons were used. The majority of injuries being on the back of the body and being directed right to left, upwards and forwards- suggests the position of the assailant was behind the victim, this is if we consider a normal right-handed grip on the weapon and not an icepick grip.

The dual use of a shawl as a ligature material to both asphyxiate the victim and prevent them from moving away to defend themselves, also plays a role in the distribution pattern of the injuries. This is noted in that injuries are present on all sides of the torso. The use of more than one harmful tool is a common finding with 32.9% of cases in the study conducted by Alessandro Mauro Tavone et al.<sup>9</sup>

The scratch abrasions over the neck showed an active effort by the victim to release herself from the restraint on the neck. Further, the presence of bloodstains on the dorsal and plantar aspects of both feet indicates a standing up position of the victim and also pooling of blood on the floor from the wounds. Notably, there is no grouping of injuries on the breasts or the genital areas, which tends to be a feature seen in murders arising from infidelity or crimes of a sexual nature.<sup>3</sup>

It is also of note that the deceased had consumed organophosphorus compound prior to death, the exact nature and motive behind this is speculative at best. Whether the deceased had decided to end her life, or she was forced/tricked into consuming the product prior to the altercation with the assailant is unclear. The blood and all viscera sent for chemical analysis were positive for organophosphorus,

suggesting the consumption-to-death window period was not narrow. There was no suicide note or previous history of suicidal tendencies or self-harm on questioning the relatives. Another possibility discussed with the investigating officer was if the deceased had consumed poison and confessed to her husband knowing he may respond violently, in a sub-type of complex suicide- This was not pursued as there is no proof to corroborate.

The eyewitness testimonies also gave great credence to the case, as they explained the relative positions of the assailant and victim- which matches the pattern of injuries present on the body. The eyewitness information informs us that they saw the scenario wherein which the assailant was behind the victim with scissors in a closed position, holding it in his right hand as one would hold a knife and thrusting it into her back. All while holding both ends of the shawl in his left hand, the loop of which was encircled around the neck of the victim.

### Conclusions

The main duties of the forensic pathologist revolve around delivering an accurate description of the injury, this includes: its position, size, number, pattern, direction, evaluation of internal damage, and also very vitally the cause of death. Multiple injuries pose multiple questions with respect to the number of assailants, number of weapons used, varying age, size, position of the wounds all having different implications, obfuscation of wounds on top of wounds, fabricated injuries, etc.

The role of eyewitnesses can never be understated and if found to be consistent with the facts of the case, can be a powerful tool in piecing the crime together.

**Conflict of interests:** Nil

**Funding:** No funding was associated with this report.

**Ethical Clearance:** Not applicable as long as consent for pictures is obtained from the next of kin.

**Consent:** Has been obtained from the next of kin to publish images for academic purposes, taking care to avoid any identifiers.

### References

1. DiMaio VJ, Dana SE. *Handbook of forensic pathology*. 2nd ed. Boca Raton (FL): CRC Press; 2007. p. 107.
2. Reddy KSN, Murty OP. Medicolegal aspect of wounds. In: Reddy KSN, Murty OP, editors. *The essentials of forensic medicine and toxicology*. 35th ed. New Delhi: Jaypee Brothers Medical Publishers; 2022. p. 149-152.
3. Saukko P, Knight B. Transportation injuries. In: Saukko P, Knight B, editors. *Knight's forensic pathology*. 4th ed. Boca Raton (FL): CRC Press; 2016. p. 158-159, 427.
4. DiMaio VJ, Dana SE. *Handbook of forensic pathology*. 2nd ed. Boca Raton (FL): CRC Press; 2007. p. 113.
5. Salfati CG. The nature of expressiveness and instrumentality in homicide: implications for offender profiling. *Homicide Stud.* 2000;4(3):265-293.
6. Ressler RK, Douglas JE, Burgess AW. *Sexual homicide: patterns and motives*. New York: Simon and Schuster; 2008. p. 163-165.
7. Baldari B, Cioffi A, Cecannecchia C, Bosco MA, Cipolloni L, De Simone S. Passionate homicides and overkilling: a forensic case series of overkill in Rome (Italy) from 1999 to 2015. *Clin Ter.* 2024;175(6).
8. Fotios Chatzinikolaou, Eleftherios Vavoulidis, Theodora Tsiapla, Chrysoula Margioulas-Siarkou, Et al. Overkill in forensic medicine: A systematic review. *Acta Psychologica*, Volume 259, September 2025
9. Alessandro Mauro Tavone, Giulia Ceccobelli, Giorgia Piizzi1, Raimondo Vella, Et al. Profiling Players Involved in Overkill: An Analysis of 71 Cases in Central Italy, *Healthcare*. September 2022, Vol. 10, Issue 10, 1873
10. Kopacz P, Juźwik-Kopacz E, Bolechała F, Strona M, Konopka T. Overkilling: A specific type of homicide - Constructing the definition: Injuries and victim. *Leg Med (Tokyo)*. 2022 Nov;59:102147. doi: 10.1016/j.legalmed.2022.102147.