WHAT IS SUSPENSION?

Suspension refers to a type of positional torture where the individual is suspended by the wrists (la bandera), ankles (murcielago), arms or hair (1). The victim can be suspended for a time period varying from minutes to hours or even days (2). Suspension torture is often combined with others forms of torture, such as beating and/or electrical torture (3,4). Suspension is among the most common and oldest documented torture methods. The UN Special Rapporteur on Torture lists “suspension in various positions” as a method of torture (2) and the European Court of Human Rights considered cases of suspension as torture (5). Further, the Nelson Mandela Rules stipulate that restraints (often used in suspension torture) are not to be used for disciplinary purposes (Rule 43-2) and specify strict conditions to be fulfilled if restraints

IN PRACTICE

Suspension is practiced in several ways (7). Cross suspension consists of spreading the arms and tying them to a bar. Butchery suspension is fixation of hands upwards, either together or individually. Reverse butchery suspension consists of fixation of the feet upward and the head downwards (7). Parrot perch (chicken-kebab, helicopter) is another form of suspension where the wrists are bound together in front of the body, the arms passed over the knees and a pole thrust behind the knees (7,8). This type of suspension has been commonly used in many Latin American countries, but has also been documented in other countries (9). Palestinian suspension (strappado, reverse hanging, Corda, Scorpion Position, Akrab), is another form of suspension where the arms or wrists are tied behind the back and then attached to a horizontal bar (7,8). Sometimes the victim has heavy weights tied to the legs which are lowered for brief recovery periods (8). There are many other methods of suspension including crucifixion where the arms are outstretched and tied to a bar (8).

HEALTH CONSEQUENCES

Suspension leaves permanent and visible injuries on the victim, however it is not uncommon for a victim to only start experiencing symptoms months or years after the torture (3).

Tight strapping from ropes and handcuffs may cause pressure injuries in the underlying tissue. This may result in regular nerve injury with loss of sensory function (3). Full suspension by the wrists causes permanent nerve damage after about fifteen minutes to an average-sized man. If the victim is heavier, the damage can occur more rapidly (10).

In addition to causing nerve damage, suspension torture can cause serious damage to blood vessels. For example, the parrot perch suspension can cause neurovascular damage, deep venous thrombosis (blood clot in a deep vein) and pulmonary thromboembolism (blockage of lung artery) (8).

Ligature marks from suspension can be found on the wrists of the victim and there might be ischemic necrosis of the hands (loss of blood flow to bone tissue), including the development of dry gangrene (body tissue dries up usually as a result of poor circulation) (2). Furthermore, the victims often show extensive edema (swelling) of the hands and the inability to raise their arms (2).

Some positions can reduce the blood supply to the brain, particularly to the temporal and prefrontal cortices potentially causing serious damage (11).

Depending on the type of suspension applied, it can also cause difficulty breathing or even death by asphyxiation (4). For example, reverse butchery suspension can cause suffocation as fluids block the nasal passage and mouth (10).

Palestinian hanging can cause major damage to the shoulder joint complex and creation of brachial plexus damage (damage of the nerves that sends signals from the spinal cord to the shoulders, arms and hands) (8).

CONCLUSION

Suspension torture encompasses a range of positions. This form of torture may cause severe, and perhaps irreversible, health consequences depending on a range of variables including the specific position and length of time held in the position.
REFERENCES

1. Kanchan T, Kumar TM, Kumar GP, Yoganarasimha K. Torture and Role of Medical Practitioners. 2007;


