

Case report-Olgu sunumu

Difficulty in revealing the abuse: incest

Ortaya çıkarılması zor olan istismar: ensest

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Abstract

Incest is defined as any form of sexual contact between immediate relatives without regarding the ages, and consent of the participants. In studies performed recently, the investigators take all caregivers liable to look after the sufferers into consideration as perpetrators, notwithstanding their biologic ties with the victims. Historically incest relations mostly between father and daughter have been addressed, disregarding incest between siblings. Although numerous case reports of incest have been presented, this case differs from others in that the victim had been sexually molested by her brother throughout a year, and she was hospitalized with a diagnosis strongly suggesting an acute organic pathology.

Keywords: Forensic medicine, incest, organic disease, abuse

Özet

Ensest, katılımcıların yaşına ve rızasına bakılmaksızın yakın akrabalar arasındaki herhangi bir cinsel ilişki olarak tanımlanmaktadır. Son yıllarda yapılan çalışmalarda araştırmacılar; bakmakla yükümlü olan tüm kişileri, mağdurla olan biyolojik bağına bakılmaksızın bu kapsama almaktadır. Tarihsel olarak en sık baba-kız ensesti konuşulmakta ve kardeş ensest kavramı göz ardı edilmektedir. Ensest ile ilgili olarak çeşitli olgu sunumları olmakla birlikte; bu olgu bir yıl süresince ağabeyi tarafından cinsel istismara maruz kalması, ayrıca akut organik bir patolojiyi kuvvetle düşündürmesi ve bu tanıyla hastaneye yatışı yapılması açısından diğer ensest olgularından farklılık göstermektedir.

Anahtar sözcükler: Adli tıp, ensest, organik hastalık, istismar

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Introduction

Incest is defined as any form of sexual contact between immediate relatives without regarding the ages, and consent of the participants [1]. The conventional concept of incest relation is only based on blood ties. However in recent years the concept of encompassing all caregivers liable to look after the victim as perpetrators of the incest act without considering the existence of blood tie has become an issue of controversy [2]. Incest which is as old as history of humanity, has been viewed as a taboo in all populations, and also forbidden from traditional, religious, and legal perspectives [3]. Historians indicate that Hittite civilization which reigned in Anatolia circa 2000 BC defined incest relations as the most disgusting act from religious and legal perspectives, and abusers were

sentenced to death [4].

Historically, incest as a form of sexual abuse most frequently refers to an incest relation between father, and daughter. The concept of incest relation between siblings is mostly ignored [5, 6]. However many recent investigations have revealed that in the most common form of incest, especially older sibling abuses younger one [7-9]. Factors such as alcoholism, substance abuse, mental retardation, crowded family, increased physical intimacy, divorce in the family, and socially isolated family affect the incidence of incest [10]. According to a survey conducted by World Health Organization (WHO) in 1996, the prevalence of sexual abuse was estimated to be between 10-20%, and 34% of the victims were reported to be sexually harassed by family members [11]. Some estimates have indicated that 20 million Americans are victims of sexual abuse committed by their parents [12]. Since incest is regarded as a taboo, and this form of sexual abuse is experienced in the family, its disclosure is challenging, and it is revealed as a consequence of referrals to healthcare organizations, and following litigations opened against these sexual assaults [13].

In this study, we are presenting a case of incest who had been sexually abused by her brother throughout one year. Since the perpetrator was her brother she could not complain openly, and consulted to hospitals many times because of various systemic diseases. Finally, she was hospitalized for the complaints suggestive of acute abdominal pain, and incest relation was disclosed during her hospitalization.

Case report

This case is a 17-year-old secondary school graduate. During her interview it was observed that the conscious of the victim with normal IQ was open, time, and place-orientation were satisfactory without any impairment in her attentiveness, and memory. She said that she had six siblings, and her father, and mother had been engaged in farming. She mentioned that after she had quitted living with her family, she had stayed with her grandmother, and cared after her grandfather up to two months from that time. She was working in a textile atelier.

Medical history of the victim revealed that she had consulted to the hospital because of abdominal pain, and her physical examination disclosed her pregnancy. During the interview, she told that she wasn't married, and her brother molested her all year long. She also indicated that her brother was 23-year-old bachelor, and shared the same room with him. She added that her brother abused her sexually after the whole family, including herself went into sleep. She stated that she wasn't strong enough to resist her, and she couldn't remember the number of incidents of sexual assaults. The sufferer declared that since her family would not trust, believe her, and care for her in anyway, and also discriminate her unfavourably from her siblings, she couldn't confess these incidents to her family.

After examination of the victim, social service workers indicated that although mental health of the sufferer was intact, she should be put under the auspices of the state. Interviews conducted by judiciary authorities, and her testimonies, revealed sexual abuses committed by her brother, but she refrained from opening lawsuits against her brother.

During psychiatric consultation, it was observed that she had been weeping in a dominant depressive mood with accompanying thoughts of death, and had fears secondary to the abusive incidents incurred on her. Conceivably, posttraumatic stress disorder developed because of sexual abuses she was suffered in addition to impaired physical, and psychological health.

In this case, many hospital encounters have been revealed during the period of sexually abusive incidents, and before the disclosure of incest relation. She applied to the clinics because of various medical complaints which suggested us the existence of somatization symptoms secondary to sexual exploitation. During the period of sexual exploitation she

had been hospitalized in the clinics of physical therapy, and rehabilitation, and also general surgery. She had also undergone tests in out-patient clinics of psychiatry, chest diseases and dermatology. The sufferer consulted to the clinics of physical therapy and rehabilitation because of complaints of left shoulder pain persisting for the last six months, as a result of the tests performed, any abnormal finding explaining her left shoulder pain was not found. She referred to the clinics of general surgery with complaints of abdominal pain, heartburn, nausea, vomiting, brackish water in the mouth without any detected abnormality explaining complaints despite the tests performed. In the clinics of chest diseases, this case with complaints of expectoration of phlegm, fever, sweating, loss of appetite was examined considering suspect tuberculosis, and she was referred to the psychiatry clinics after meticulous physical examination. The sufferer had been diagnosed as urticaria after tests performed in the clinics of dermatology. Her psychiatric examination revealed that the victim was monitored as a depressive patient, and she had been demoralized during the period of frequent sexually abusive offenses. Obsessed by suicidal thoughts, she could hardly sleep with the aid of sleep pills, and wanted to marry a man addicted to alcohol and gambling to whom her family opposed vehemently.

Genital examination of the victim disclosed evidences of more than one week-old hymenal ruptures at 2, 10, 11, 12 o'clock positions extending to the base, and on abdominal US, a single alive 89 day-old fetus was detected. The victim strongly asserted that she did not want to deliver this baby, and the pregnancy with a gestational age not extending beyond 20 weeks was terminated upon her request.

Discussion

Incest is a social reality prevailing in many countries of the world for centuries [14]. Disclosure of incest is a very difficult task because of its intrafamilial nature which is forbidden in every community as a taboo. Lawsuits filed against this offense, and the resultant health problems are reportedly facilitate the disclosure of the event [3, 13]. The deleterious effects of the incest relation vary from one victim to another according to the violence exerted during the act, duration of exploitation, and reaction of the family against these sexually abusive attempts [15]. The reaction of the child to these offenses might be observed in various forms as fear, depressive mood, posttraumatic stress disorder, attention deficiency, hyperactivity disorders, secondary enuresis, and encopresis, behavioural, educational, and sexual problems, outbursts of anger, weakened impulse control, and oppositional defiant disorder [16, 17].

In incest relations, girls, and boys of every age can be exposed to sexual assaults, and abuses. A large scale investigation performed in our country (Understanding the Incest Reality in Turkey) revealed that the offenders were mainly of male gender, while the victims were predominantly female children. Still a study conducted by Sobsey and Doe [18], reported that 90.8% of the perpetrators were of male, and 81.7% of the victims were of female gender. This case sustains the investigations conducted so far in that the brother molested his sister [19].

Various psychiatric disorders arising from incest relations, such as posttraumatic stress disorder encourage the victim to consult to psychiatrists expert in the field of sexual mistreatments [20-24]. Contrary to similar cases of incest, our case referred to clinics of different disciplines of our hospital 17 times a year, and finally since her symptoms of somatization disorder strongly suggested an organic disease, he was hospitalized, and monitored in the department of general surgery with a diagnosis of acute abdomen. Meanwhile, she was treated by the department of dermatology with a diagnosis of a somatic disease.

It is indicated that somatization disorder has been frequently encountered among psychiatric findings observed in these patients [25]. Chronic gastrointestinal disorders, and somatization disorder have been reportedly encountered more frequently in cases

with a history of sexual abuse [26]. Our case did not inform authorities of the mistreatments incurred on her, despite her numerous referrals to the hospital, the incidents of molestation were disclosed after discovery of her pregnancy, and resultant lawsuits opened against the offender.

In conclusion, incest relation is a taboo in the community which prevents the disclosure of sexually offensive acts and exploitations. To increase awareness about this issue, we exemplified our case so as to emphasize underlying, unconfessed sexual harassment as an important factor to be considered by clinicians in cases of increased incidence of referrals of children, adolescents and young adults without any previously known disease(s) to the hospitals even with an apparent organic disease.

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