

# Sexual Attraction to Corpses: A Psychiatric Review of Necrophilia

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The authors review 122 cases (88 from the world literature and 34 unpublished cases) manifesting necrophilic acts or fantasies. They distinguish genuine necrophilia from pseudonecrophilia and classify true necrophilia into three types: necrophilic homicide, "regular" necrophilia, and necrophilic fantasy. Neither psychosis, mental retardation, nor sadism appears to be inherent in necrophilia. The most common motive for necrophilia is possession of an unresisting and unrejecting partner. Necrophiles often choose occupations that put them in contact with corpses. Some necrophiles who had occupational access to corpses committed homicide nevertheless. Psychodynamic themes, defense mechanisms, and treatment for this rare disorder are discussed.

"Shall I believe  
That unsubstantial death is amorous,  
And that the lean abhorred monster keeps  
Thee here in dark to be his paramour?"

—William Shakespeare<sup>1</sup>

Necrophilia, a sexual attraction to corpses, is a rare disorder that has been known since ancient times. According to Herodotus,<sup>2</sup> the ancient Egyptians took precautions against necrophilia by prohibiting the corpses of the wives of men of rank from being delivered immediately to the embalmers, for fear that the embalmers would violate them. According to a legend, King Herod had sex with his wife Marianne for seven years after he killed her.<sup>3,4</sup> Similar legends exist

about King Waldemar and Charlemagne.<sup>3,5</sup> Necrophilia was considered by the Catholic Church to be neither whoring ("fornicatio") nor bestiality, but "pollution with a tendency to whoring."<sup>6</sup>

In more recent times, necrophilia has been associated with cannibalism and myths of vampirism. The vampire, who has been romanticized by the Dracula tales, obtains a feeling of power from his victims, "like I had taken something powerful from them."<sup>7</sup> Cannibalistic tribal rituals are based on the notion that consumption of human flesh imparts a special power or strength to the cannibal. Browne even described a "healthy necrophilism," found in the "mementoes cherished in every household of those who passed away."<sup>8</sup>

The theme of necrophilia has been captured by some famous artists. The classical "Sleeping Beauty" tales embody a necrophilic fantasy, in which a corpse

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is restored to life. Shakespeare's "Romeo and Juliet" conveys a similar fantasy. Some "Heavy Metal" songs explicitly deal with necrophilia.

Several authors have used single case reports as the basis for psychiatric hypotheses to explain necrophilia. However, it is hard to draw any conclusions about the true nature of necrophilia from individual cases, even if they are detailed studies. Our goal was to gain a more thorough understanding of necrophilia by examining the largest possible sample. To this end, we collected 88 cases from the world literature<sup>5,6,9-50</sup> and 34 unpublished case reports from colleagues.

### Methods

Each case was analyzed according to a number of variables. There is an obvious bias in the material towards recording positive, rather than negative, data. For example, if mutilation was mentioned in a case description, there is no doubt that it occurred; authors are, however, less inclined to report a negative finding such as mutilation.

On the other hand, information was quite clear regarding homicide. Authors are unlikely to fail to record a homicide associated with necrophilia. Similarly, the "pure" fantasizers are easily distinguished from those necrophiles who carried out their acts, since authors invariably document the occurrence of sexual activities with a corpse.

The percentages given have been calculated according to the number (N) of cases for which positive or explicitly negative data were available for that item. Due to the limitations of retrospective

case assessment, statistical analyses of the data were not performed. The data were aggregated from several decades, many countries, and various languages. There were great variations in the reporting methods. Further, the problems of a low base rate and gaps in the data enhance the risk of overinterpretation.<sup>51</sup>

### Classification

We classified the sample into two broad groups: (1) Genuine necrophilia (N = 54); (2) Pseudo-necrophilia (N = 33). There were insufficient data to classify 35 cases.

The genuine necrophile has a persistent sexual attraction to corpses. The sexual attraction may be manifested in the necrophile's fantasies, or in a series of necrophilic acts. Most of this group fits the DSM-III-R diagnosis of Paraphilia Not Otherwise Specified.<sup>52</sup> It includes cases in which the corpse represents a fetishistic object.

We classified the genuine necrophiles into three groups, based on the nature of their acts with corpses:

A. *Necrophilic homicide*—murder to obtain a corpse for sexual purposes (N = 14);

B. *Regular necrophilia*—the use of already dead bodies for sexual pleasure (N = 21);

C. *Necrophilic fantasy*—fantasizing about sexual activity with a corpse, without carrying out any necrophilic acts (N = 15).

(Four cases of genuine necrophilia had insufficient data to be subclassified into these groups.)

The pseudonecrophile has a transient attraction to a corpse, but corpses are

not the object of his sexual fantasies. He prefers sexual contact with living partners. This group includes sadistic, opportunistic, and transitory cases.

### **Case Illustrations**

The following case vignettes illustrate these four categories.

#### **1. Genuine Necrophilia**

**A. Necrophilic Homicide** A 25-year-old, single white male college senior engaged in conventional sexual relations with his live-in girlfriend. He had a high sex drive and masturbated approximately seven times a day. He had a large collection of pornography and had committed acts of bestiality, urophilia, and coprophilia. He had engaged in necrophilic acts with animals he had killed and with bodies in the morgue of the hospital where he worked as an orderly. He had a longstanding fantasy of having "all kinds of sex" with a dead body. He thought his destiny was to be someone special, either the Antichrist or the prophet Elijah. He murdered an eight-year-old neighborhood girl in order to carry out his sexual fantasy (Rosman and Resnick).

**B. Regular Necrophilia** A 21-year-old, separated white woman was employed as an apprentice embalmer for four months. During that time, she had sexual intercourse with 20-40 male corpses. She engaged in necrophilia because she could not achieve sexual satisfaction with a living person. She had been sexually molested at the age of eight, and raped by a teacher when she was fourteen. She drank heavily and had very low self-esteem. She regarded her-

self as having "died in spirit" a year earlier. The corpses gave her comfort, as well as the sense of being able to touch and express herself to someone (Bromberg, personal communication).

**C. Necrophilic Fantasy** A 40-year-old, single white man requested psychiatric help because he was afraid that he would carry out a repetitive fantasy he had had since he was 15. His fantasy was to kill a woman, cut her up, remove the organs, and then masturbate while immersing his hands in the blood of the corpse.

He had always been socially isolated. He had been caught masturbating in public places and engaging in voyeuristic activities. Choking prostitutes also excited him sexually. In his late 20s, he obtained a job in a morgue for the sole purpose of being near dead bodies. Although he denied any actual sexual contact with the corpses, he had become sexually excited by cutting them up. He killed animals for the purpose of carrying out a similar fantasy. He killed the animals painlessly, taking no pleasure in the killing itself. His pleasure came from the mutilation of the warm bodies (Risen, personal communication).

#### **2. Pseudonecrophilia**

A 37-year-old, single white man went out drinking with his 49-year-old girlfriend. He had been a heavy drinker since his teen years. On the way home, he shot her through the head "by accident." He said he had felt threatened by a passerby who stopped to bother him. While he was engaged in hiding the body, he became sexually excited. He had anal intercourse with the corpse,

and then disposed of it. He had read about necrophilia in pornography magazines (Bertschinger, personal communication).

### Characteristics of the Sample

In the pseudonecrophile group, reliable information was available only for the subgroup that committed homicide. Our cases yielded the following demographic information:

**Age** The ages of the necrophiles were noted at the time that they committed their necrophilic acts; in the case of the fantasizers, ages were noted at the time that their fantasies were revealed. The mean age of the necrophiles was 34 (see Table 1).

**Sex** Ninety-two percent of the true necrophiles were male (see Table 2). All of the homicides were committed by men.

**Intelligence** Our data regarding in-

telligence were taken only from those cases in which specific intelligence quotients were reported. All ( $N = 13$ ) had IQs above 80, and 69 percent ( $N = 13$ ) had IQs above 100. Of the true necrophiles, 86 percent ( $N = 7$ ) had IQs above 100.

**Sexual Orientation** The sexual orientation of our sample ( $N = 71$ ) was comparable to that of the general population: 79 percent (56) were heterosexual; 13 percent (9) were bisexual; 9 percent (6) were homosexual. Among the true necrophiles ( $N = 40$ ), 70 percent (28) were heterosexual, 15 percent (6) were bisexual, and 15 percent (6) were homosexual.

The necrophilic homicide group ( $N = 12$ ) had the lowest percentage of heterosexuals—58 percent (7); the pseudonecrophilic killers ( $N = 19$ ) had the highest percentage of heterosexuals—84 percent (16) and no bisexuals.

**Sex of the Corpses** The sex of the corpses paralleled the sexual orientation of the necrophiles. Of the total sample ( $N = 91$ ), 85 percent (77) used corpses of the opposite sex, 10 percent (9) used same sex corpses, and 5 percent (5) used corpses of both sexes.

Among the genuine necrophiles ( $N = 43$ ), 77 percent (33) used opposite sex corpses, 16 percent (7) used same sex

Table 1  
Age

	N	Mean Age	Range
Necrophiles	36	34	17-59
Homicide	11	33	22-47
Regular	13	33	17-54
Fantasizers	10	31	19-48
Pseudo-necrophilic killers	22	29	16-52
Total sample	68	34	16-65

Table 2  
Sex

	N	Male	Female
Necrophiles	53	92% (49)	8% (4)
Homicide	14	100% (14)	-
Regular	20	85% (17)	15% (3)
Fantasizers	15	93% (14)	7% (1)
Pseudo-necrophilic killers	33	100% (33)	-
Total sample	115	95% (109)	5% (6)

corpses, and 7 percent (3) used both. The necrophilic killers (N = 14) used the highest percentage of same sex corpses, 50 percent (7).

**Marital Status** In our sample (N = 78), 60 percent (47) were single, 26 percent (20) were married, and 14 percent (11) were divorced or widowed. The marital status of the true necrophiles and pseudonecrophiles was similar. Ninety percent (9) of the fantasizers were single.

**History of Sadistic Acts** In 64 percent (27) of the cases (N = 42), there was a history of prior sadistic acts. All (11) of the pseudonecrophilic killers had a history of sadistic acts, and the rate among the true necrophiles (N = 29) was 52 percent (15). The highest rate of sadistic acts among the true necrophiles was in the necrophilic homicide group (78% (7) N = 9); the lowest was in the regular group (30% (3), N = 10). A history of sadistic acts was reported in 56 percent (5) of the fantasizers (N = 9).

**Nonnecrophilic Intercourse** Most (86% (31)) of the true necrophiles (N = 36) had had nonnecrophilic intercourse prior to their necrophilic acts or fantasies; the pseudonecrophilic homicide group (N = 20) had the highest percentage (95% (19)). Some of the subjects were involved in successful relationships when they committed their necrophilic acts. Prior nonnecrophilic intercourse was reported in 91 percent (10) of the fantasizers (N = 11) and 75 percent (9) of the regular group (N = 12).

### Psychopathology

We classified the sample according to the primary psychiatric diagnosis, based on DSM-III-R.<sup>52</sup> Our data show the

presence or absence of psychosis and personality disorder. However, the notorious unreliability of diagnostic labels from country to country and decade to decade must be kept in mind.

**Psychosis** Of the total sample (N = 64), 17 percent (11) were psychotic. Only 11 percent (4) of true necrophiles (N = 36) were psychotic, and none of these committed homicide. On the other hand, three (14%) of the pseudonecrophilic homicides (N = 21) were committed by psychotic individuals. Two cases in the regular necrophile group (15%, N = 13) and two in the fantasizer group (17%, N = 12) were psychotic.

**Personality Disorders** One half of the sample were diagnosed with personality disorders (see Table 3).

**Unusual Belief Systems** In addition to psychiatric diagnoses, we recorded the presence of any unusual belief systems, such as parareligious beliefs or devil worship. Unusual beliefs were reported in 55 percent (18) of the total sample (N = 33); 73 percent (8) of the pseudonecrophilic homicide group (N = 11) and 45 percent (9) of the necrophiles (N = 20) had unusual beliefs. The breakdown for the necrophiles was 40 percent (4) of the homicide group (N = 10), 33 percent (2) of the regular group (N = 6),

Table 3  
Diagnosis of Personality Disorders

	N	Present
Necrophiles	17	59% (10)
Homicide	6	83% (5)
Regular	4	50% (2)
Fantasizers	7	43% (3)
Pseudo-necrophilic killers	10	80% (8)
Total sample	32	56% (18)

and 75 percent (3) of the fantasizers ( $N = 4$ ).

**Alcohol Consumption** Eighty percent (8) of the pseudonecrophilic homicide group ( $N = 10$ ) consumed alcohol before committing their acts, compared with only 44 percent (8) for the genuine necrophiles ( $N = 18$ ). Only 25 percent (2) of the regular necrophiles ( $N = 8$ ), and 60 percent (6) of the necrophilic homicide group consumed alcohol.

### Acquisition of Corpses

The subjects obtained their corpses through their work, by committing a homicide, or by taking advantage of a chance opportunity.

**Occupational Access** The most common occupations (eight cases each) were hospital orderly, cemetery employee, and morgue attendant. The other occupations were funeral parlor assistant (5), soldier (3), and cleric (2); there were single cases of a pathologist, an anatomy student, an ambulance driver, and a volunteer fireman. The pseudonecrophilic homicide group had the lowest reported rate of occupational access to corpses (see Table 4).

**2. Homicide** The rate of homicide committed by true necrophiles ( $N = 50$ ) was 28 percent (14). Most of these homicides were for the purpose of necro-

philic acts. By definition, none of the pseudonecrophilic killers ( $N = 33$ ) murdered their victims for the specific purpose of performing necrophilic acts.

### Specific Acts and Fantasies

Of the total sample ( $N = 112$ ), 86 percent (96) actually engaged in necrophilic acts (as opposed to fantasy alone). Among the genuine necrophiles ( $N = 53$ ), 72 percent (38) committed necrophilic acts. All but one of the persons who engaged only in fantasy ( $N = 16$ ) were classified as genuine necrophiles. The specific nature of the most common necrophilic acts and fantasies is given in Table 5.

Biting of the breasts (three cases) was reported exclusively in pseudonecrophiles. Fondling or sucking of the breasts was reported only in true necrophiles. Three true necrophiles hugged or slept with the bodies, and five manipulated the corpse's genitals manually. Three of the four decapitations were performed by pseudonecrophiles. Acts that were mentioned in single cases included mutilation of only the sexual organs, drinking the corpse's blood (vampirism), washing the body, preserving the body or body parts, and insertion of an umbrella into the vagina.

### Motivation

Some necrophiles stated explicit motives for their actions; others provided clues to their motivation by their actions. The necrophiles frequently had more than one motive.

The most common motive of the true necrophiles ( $N = 34$ ) was to possess an unresisting and unrejecting partner (68%

Table 4  
Occupational Access to Corpses

	N	Access
Necrophiles	35	57% (20)
Homicide	11	46% (5)
Regular	16	69% (11)
Fantasizers	8	50% (4)
Pseudo-necrophilic killers	18	22% (4)
Total sample	62	53% (33)

(23)). Other commonly reported motives were: reunion with a romantic partner (21% (7)); conscious sexual attraction to corpses (15% (5)); attempt to gain comfort, or to overcome feelings of isolation (15% (5)); attempt to gain self-esteem by the expression of power over a homicide victim (12% (4)).

Less commonly reported motives were: unavailability of a living partner; compensation for a fear of women; belief that sex with a living woman was a mortal sin; need to achieve a feeling of total control over a sexual partner; compliance with a command hallucination; performance of a series of destructive acts; expression of polymorphous perverse sexual desires; and need to perform limitless sexual activity.

## Discussion

Necrophiles have been characterized as mentally deficient,<sup>16,23,28</sup> psychotic<sup>16,37,48</sup> and incapable of obtaining a consenting sexual partner.<sup>6</sup> Our data suggest that these views of necrophilia are incorrect. Although our data on IQ figures were limited, they do not support the contention that necrophiles have subnormal

intelligence. Although necrophiles have been considered "crazy" because of the bizarre nature of their acts, only 11 percent of the true necrophiles in the sample were psychotic. The high frequency of nonnecrophilic intercourse (92% (11)) in the necrophilic homicide group (N = 12) indicates that killing to obtain a corpse for necrophilic purposes is not the only way most of these individuals can engage in sexual intercourse.

The use of alcohol or drugs may have been an important factor in helping some of the perpetrators overcome their inhibitions and actually perform their necrophilic acts. Brill<sup>6</sup> noted:

"... the destruction of the dams of shame, disgust and morality, which must take place in the erection of necrophilia, requires more psychic labor than in the construction of any other perversions."

On the other hand, several regular necrophiles did not use alcohol at the time of their acts. Epaulard contended that association with corpses, in thought or in reality, tends to diminish the revulsion that is normally associated with them.<sup>23</sup> Alcohol may have been used in some cases to overcome inhibitions

Table 5  
Specific Acts or Fantasies

	Total Sample (N = 112)	Pseudo-N Killers (N = 33)	Necrophiles			
			Homicide (N = 14)	Regular (N = 21)	Fantasy (N = 15)	Total (N = 53)
Vaginal Intercourse	51% (57)	61% (20)	57% (8)	33% (7)	53% (8)	45% (24)
Anal Intercourse	11% (12)	18% (6)	29% (4)	5% (1)	7% (1)	11% (6)
Kissing	15% (17)	6% (2)	29% (4)	29% (6)	20% (3)	26% (14)
Suck/Fondle Breasts	8% (9)	-	7% (1)	24% (5)	20% (3)	17% (9)
Fellatio/Cunnilingus	7% (8)	3% (1)	7% (1)	19% (4)	3% (1)	11% (6)
Mutilation	29% (32)	30% (10)	36% (5)	19% (4)	40% (6)	30% (16)
Necrophagia	8% (9)	12% (4)	14% (2)	-	7% (1)	6% (3)

about killing, rather than about the necrophilic acts.

Several authors have noted the connection between occupation and necrophilia.<sup>6,11,20,46</sup> Some necrophiles stated that their preexisting sexual attraction caused them to choose jobs that would allow them to be close to corpses. The frequency of occupational access to corpses among the necrophiles (57.1%, N = 35) suggests that careful screening and supervision of employees should be done in cemeteries, morgues, funeral homes, and pathology departments.

Several necrophilic murderers had access to corpses through their occupations. The ready availability of corpses in a job environment does not, therefore, preclude the possibility that a necrophile will commit homicide.

An examination of the specific necrophilic acts and fantasies revealed the following:

1. Vaginal intercourse was more frequently reported for the necrophile and pseudonecrophile killers than for the regular necrophile group. The fact that several of the regular necrophiles did not engage in vaginal intercourse supports Spoerri<sup>10</sup> and Rauch's<sup>45</sup> contention that coitus is not an essential component of necrophilia. Rigor mortis or the failure to obtain a full erection often makes it difficult to actually have intercourse. As in all perversions, the act is not as rewarding as the fantasy would suggest.

2. Kissing of the bodies was reported in more cases involving true necrophiles than pseudonecrophilic killers. Other acts frequently associated with sexual foreplay, such as sucking and fondling

of the breasts, fellatio, and cunnilingus, followed the same trends. This association of passionate acts with true necrophilia would be expected. True necrophiles are erotically attracted to corpses *per se*, whereas the acts of pseudonecrophiles are "surrogate" acts<sup>45</sup>—i.e., the corpse fulfills a nonerotic purpose.

3. Mutilation and necrophagia were not committed by several true necrophiles. These data support Moll's contention that sadism is not present in all cases of true necrophilia.<sup>53</sup>

Although the most common motive for necrophilia was possession of an unresisting and unrejecting partner, the necrophiles frequently expressed more than one motive for their acts. Our data confirm Smith and Braun's observation that: "Necrophilia may appear as the culmination of a pattern of multiple and increasingly perverse practices rather than as an isolated, abrupt deviation."<sup>44</sup>

### Psychodynamic Themes

The explanations offered for necrophilia in the literature have been primarily psychoanalytic. They include: (1) a fusion of aggressive and libidinal drives;<sup>6,23,54</sup> (2) sadistic and destructive wishes;<sup>7,15,30,45,53,55-57</sup> (3) developmental problems of pregenital fixation or Oedipal conflicts;<sup>4,6,7,15,40,43,44,58</sup> (4) identification with the mother, or an attempt to deal with separation anxieties;<sup>4,6,15,24,30,40,43,44,58</sup> (5) an attempt to deal with loss or the fear of loss;<sup>4,5,17,40,42</sup> (6) fears of death or of women;<sup>5,15,22,40,44,45,59</sup> (7) a moral deficiency or degeneracy.<sup>6,20,23,37,48,56,57</sup>

The major defense mechanisms that



have been attributed to necrophiles are: (1) denial of separation and loss;<sup>4</sup> (2) identification with a parental figure;<sup>30,43</sup> (3) introjection of a parental image;<sup>40,43</sup> (4) counterphobic reaction against a fear of the dead;<sup>40</sup> (5) transforming passive into active.<sup>15,17,22</sup>

The psychodynamic hypotheses that have been proffered in the literature are often based on single cases. They are thus very difficult to confirm or deny empirically. One central theme in necrophilia is a profound lack of self-esteem which has been stated explicitly by some necrophiles.

We postulate that the following psychodynamic events could lead to necrophilia:

1. The necrophile develops poor self-esteem, perhaps due in part to a significant loss;

(a) He (usually male) is very fearful of rejection by women, and he desires a sexual object who is incapable of rejecting him; and/or

(b) He is fearful of the dead, and transforms his fear of the dead—by means of reaction formation—into a desire for the dead;

2. He develops an exciting fantasy of sex with a corpse, sometimes after exposure to a corpse. As Ernest Jones said: "The dead person who loves will love forever and will never be weary of giving and receiving caresses."<sup>4</sup>

### **Treatment**

Very little has been written on the treatment of necrophiles. No one has treated a sufficient number of necrophiles to determine effective treatment

on a scientific basis. Based on the data available, we suggest that clinicians: (1) determine whether the person has genuine necrophilia; (2) treat any associated psychopathology; (3) establish psychotherapeutic rapport; (4) if the subject is male and has a heightened sex drive, consider treating him with an antiandrogen, such as depo progesterone [Risen, personal communication]; (5) if the necrophile is sexually or socially isolated, help him/her to establish normal sexual and social relationships; (6) desensitization may be helpful to divert the necrophilic fantasies to a living object.<sup>33</sup>

### **Conclusion**

Necrophilia is a very rare and poorly understood phenomenon. We have proposed a classification of this disorder to help clinicians put new cases into better perspective. The paucity of data has made it difficult to offer firm explanations about necrophilia. We hope that this review will help future investigators to gather sufficient data to analyze cases of necrophilia prospectively.

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