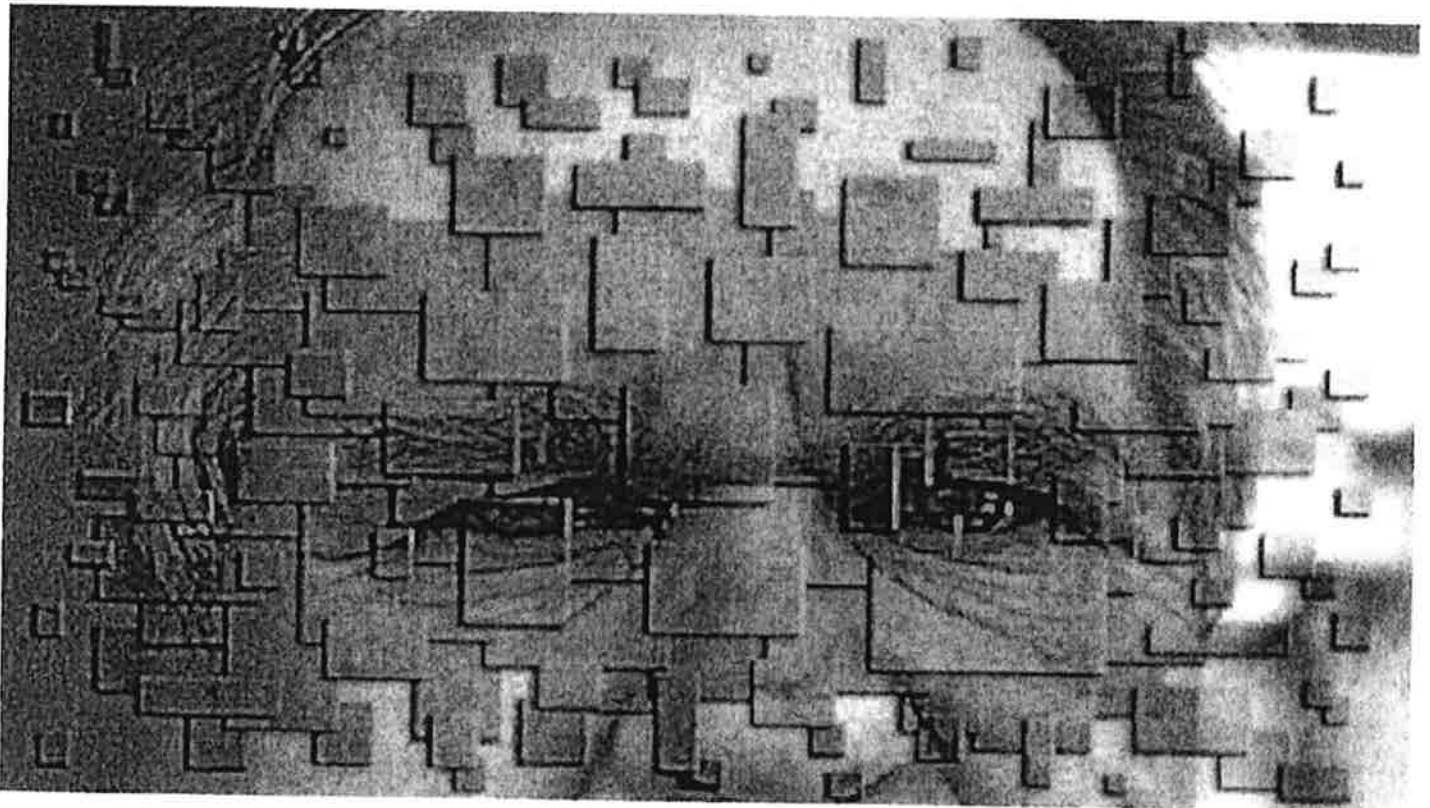


Crime Research

Healthcare Serial Killers: Doctors and Nurses Who Kill

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For victims and their families this is an unimaginable crime. The so called 'angel of death' nurse is a nurse who has taken it upon themselves to kill their patients. While thankfully quite rare, serial killer nurses can go undetected for many years, exerting their power and control over the vulnerable, often telling themselves they are delivering an act of mercy.

Nurses train for many years as a healthcare professional in order to treat and support patients within their care. They have a level of responsibility to their patients and a level of trust which is seen in few other relationships between individuals. In the early years, such cases were often referred to as 'angel of mercy' killings. This comes from the notion that some of those responsible carry out their crimes to, in their eyes, relieve the patient of their suffering.

However, not all cases fit this mould and it is not uncommon for what may have started as an act of perceived mercy, turns into something else over time, where a perpetrator begins to expand their victim pool out with



Nurses Who Kill

There have been numerous cases of Healthcare Serial Killers (HSKs), as they are preferably known, around the world. Charles Cullen in New Jersey who may have killed over 400 patients within 16 years as a nurse across nine hospitals, Kimberly Saenz also in America who murdered five patients in Texas by injecting them with bleach.

Italian nurse Daniela Poggiali who murdered 38 patients using potassium chloride and took pictures of herself next to the deceased bodies of patients and shared them on social media. Then there is Genene Jones, a paediatric nurse in San Antonio in Texas known to have killed four children by injecting them with drugs.

Most nurses who kill work alone, however a case in Austria saw four nurses in Vienna who worked together between 1983 and 1991. Led by nurses aide Waltraud Wagner at Lainz General Hospital, they killed patients using morphine and later by drowning, holding the patient down, pinching their nose and pouring water down their throat, a truly horrific and terrifying way to die.

Maria Gruber, Irene Leidolf, Stephanija Mayer, and Waltraud Wagner, collectively known as the 'Lainz Angels of Death', have admitted killing 49 patients but as with many medical serial killers it is feared the true number of patients murdered may be as high as 200. They were caught when a doctor overheard them laughing about their latest victim, starting an investigation which resulted in their arrest in 1989.

When he was finally caught after family members raised concerns and a discovery of false medical records was made, it was believed this doctor murdered up to 250 of his patients between 1975 and 1988. Convicted of murder for 15 of his patients, Dr Harold Shipman was sentenced to life in prison and was recommended never to be released.

He hung himself in his prison cell in 2004. In the UK, the case of Dr Harold Shipman is one which caused shock across the country. A friendly local GP who had been murdering his elderly patients by injecting them with diamorphine and falsifying their medical notes. His choice of patients, their ailing health and his cool and reassuring manner to family members ensured the deaths were attributed to poor health.

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Studies on Medical Serial Killers

Dr Eindra Khin Khin, Assistant Professor of Psychiatry and Behavioural Sciences at the University of Virginia has highlighted cases of healthcare serial killings have risen since the 1970's. Ten cases were recorded within that decade, by 2001 to 2006 this number had risen to forty cases.

In a presentation at the annual meeting of the American Academy of Psychiatry and the Law, Dr Khin Khin showed **the majority of cases took place within a hospital setting (72%), with 20% of cases happening in nursing homes and 6% within the patients homes**. Over half of all cases were carried



Often victims are elderly or very sick and their deaths can be put down to natural causes rather than suspicions being raised. In most cases a cluster of deaths raise questions and the most common form of killing is through use of an injectable substance only detectable through toxicology. In many cases, the age and health conditions of patients mean such tests are not carried out and the crime remains undetected.

Are There Common Traits In Serial Killer Healthcare Professionals?

Criminologists have begun to examine cases in order to try and identify common traits among such healthcare professionals, predominantly nurses, who turn on their patients. Using the term 'healthcare serial killers' or HSKs rather than 'angel of death nurses', criminologists have found some interesting results through their research.

Published in the Journal of Investigative Psychology and Offender Profiling, the research carried out by Dr Elizabeth Yardly and Dr David Wilson, both prominent criminologists, has been influential in the understanding of such crimes.

Attention seeking, strange behaviour when a patient dies, frequent changes in hospital working locations and a disciplinary record have all been flagged as common factors seen in health care serial killers.

This research examined 16 nurses, both male and female who have been convicted of murdering patients within a hospital setting. Cases examined included Beverley Allitt, probably the most well known 'Angel of Death' nurse serial killer in the UK. Allitt was a healthcare nurse who in April 1993 was convicted of the murder of four children, the attempted murder of three children and inflicting grievous bodily harm on a further six children, all over a 3 month period at Grantham and Kesteven Hospital in Lincolnshire, England.

Further case studies included Victorino Chua convicted of two murders and 19 poisonings at Stepping Hill Hospital in Stockport, England in 2015. Collin Norris who was convicted in 2008 of four murders carried out in 2002 in Leeds, England and American Charles Cullen who confessed to killing 40 patients over a 16 year period in New Jersey and Pennsylvania in America.

In many cases of murder within healthcare settings, the perpetrator has carried out multiple killings before they are caught. This repetitive cycle suggests a pleasure is received from the acts leading some to believe there may be an addictive element to their murderous behaviour.

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Access and Opportunity

Access to drugs appears to be the enabler for these crimes with the most common method of killing being poisoning with the majority of cases included in this study involving insulin.



Beverley Allitt was the only case in the study that used two methods of killing, poisoning and suffocation. Of the 16 offenders studied, **over 50% had a history of mental health issues of some kind and signs of a personality disorder.**

Charles Cullen is believed to have been murdering his patients for 16 years across nine different hospitals between 1987 and 2003 before he was caught. Some estimates on the actual number of patients who died at his hands are in the hundreds, as many as 400 patients.

The case of Charles Cullen is a complicated one with a personal history marked with suicide attempts, police investigations and stays in psychiatric wards, however no one raised the alarm when his working practices were dangerous and not up to standard.

A nurse who was reportedly fired five times from nursing roles however was still able to practice as a nurse at different hospitals and continue gaining access to patients.

A 2006 study examining 90 cases of healthcare serial killers from twenty different countries between 1970 and 2006, found that **86% of those who became serial killers within healthcare were nurses, both male and female.**

Further research has categorized healthcare serial killers in accordance with their motives. These categories show the range of motivations and psychological rewards achieved by those in the medical profession who kill their patients. According to Dr Khin Khin they can often be categorized into the following groups:

- **Thrill Seekers** – these are individuals who achieve a thrill from the act of killing, a thrill which they want to repeat over and over again.
- **Power Oriented** – in this group, they kill to achieve a feeling of power and control. Dr Harold Shipman is an example of a healthcare serial killer who falls within this category.
- **Gain Motivated** – these individuals receive something from the act of killing, this may be relieving a burden by removing the patient from their care or they may be able to steal money or belongings from the patient.
- **Missionary Killers** – less common, these are serial killers within healthcare who believe they are doing a good deed by getting rid of people who are "immoral or unworthy" in some way.

Further to categorization by motives, studies have identified a number of character traits and behaviours which may, when combined, be a warning sign for a potential health care serial killer;

- History of mental instability
- Preference for night-shifts, or shifts with less staff and supervisors on duty
- History of difficult personal relationships
- Tendency to 'predict' when a patient will die

