

Are your students ‘playing’ the fainting game?

The fainting game entails intentionally cutting off the oxygen supply to the brain to experience a high, often by strangulation. It has been practised by young people for a long time but only few adults are aware of its existence and the risks involved.

Among all its names in the US, ‘the choking game’ is the one the Centers for Disease Control and Prevention uses in its report (2008), although, strictly speaking no choking (internal obstruction of the airway) occurs. In France it is called *le jeu du foulard* (‘the scarf game’). Curiously, scarves are rarely used. About 10 years ago, the UK media referred to it as the ‘the fainting game’ (TFG)—quite some time before it became news in France, Canada or the US. Although fainting when ‘playing’ solo most certainly means dying, this denomination is the most appropriate (BBC News, 1999).

The TFG was in the news for some weeks when Eton College pupils confessed to playing it after one of them died hanging himself. Thereafter, it fell out of public scrutiny. Did the practice actually fall into oblivion? Or was it safer to pretend it never existed? While most adults ignored TFG, kids kept playing and dying. Some possible TFG accidents were covered in the news with headlines such as: ‘Hanging tragedy’, ‘Death of student shrouded in mystery’, or ‘Childish experiment gone tragically wrong’.

In order to ‘play’, children and young people use:

- Dressing-gown cords
- School ties
- Judo belts
- Dog leads
- Tied to:
- Bunk beds
- Showers
- Door pegs
- Wardrobe frames.

Coroners record narrative, open, misadventure or accidental verdicts. Without a note left by such young victims, coroners require proof beyond all doubt to register a suicide verdict.

The mass media, however, often suggests suicide as an alternative to accidental death, proposing causes such as bullying, suicide chatrooms, an impulse or a cell phone row, even if the victim is described as a ‘happy-go-lucky

kid’. Devastated parents are left, for the rest of their lives, with a haunting ‘why?’

Effects on the body

Despite its long history, this bizarre practice is still unknown by most people, including medical and law enforcement staff. It basically consists in external compression of the airway on the sternum or neck, either by hand (team) or by ligature (solo) to restrict oxygen flow to the brain (hypoxia). If pressed, the carotid artery nerve ganglion may provoke cardiac arrhythmia causing cardiac arrest. If not, the pressure on the jugular veins prevents venous blood return from the brain, gradually causing passive congestion and diminishing oxygen supply to the brain. This results in depressed respiration and unpredictable unconsciousness, turning useless any escape mechanism.

The collapse of the body increases tension on the ligature and the pressure obstruction of the carotid arteries prevents blood flow to the brain (anoxia), while pressure obstruction of the larynx cuts off air flow to the lungs, producing irreversible asphyxia. All hope of meaningful recovery is lost with clinical brain death. When the victim is ‘saved’ before death, complications may include persistent vegetative coma, cerebral oedema, and herniation of the brain.

Reasons behind the ‘game’

Those who practice in teams say that they get a ‘high’ when, thanks to those present, they recover from unconsciousness. Some mention, in usually poor words, visual and auditive hallucinations, which the names given to TFG are meant to express. These names include cosmos, blackout, space monkey, high riser or speed dreaming, for example.

Among individuals saved from death, and scientists who experimented on themselves, some have retained no recollection of what happened. Others were conscious of:

- Sudden loss of motion and heavy legs
- Flashes of light
- Brilliant circles of colours
- Hissing in the ears.

Addiction to this practice is possible.

Affected groups

The fainting game is practised by children and adolescents, mainly aged 12–16 years, of all social or ethnical backgrounds, the daredevils as well as the very sensible.

Anne Corrêa Guedes is a member of the scientific committee of the APEAS, Lisbon

Email: aacguedes@gmail.com

Key words

- Choking ■ Fainting ■ Game ■ Anoxia ■ Hypoxia

They reason that, unlike drugs, it does not leave marks and is free of charge. When they do it in teams, alternatively strangulating and being strangulated, the main risk is a cardiac arrest. Without help in the first few minutes—the other players may panic and run away—it can be fatal. Those who practice secretly are tragically only discovered when they die from accidental hanging.

Where they learn it

Children and young people may become aware of the game through peers at school, during after school activities or in summer camps, for example. Instructions are also easy to access online through some social networking sites, blogs and video hosting sites. Usually, these omit to mention the risks involved. Some, after playing in teams, practise on their own. Others discover alone the strange sensation produced by pressing on the neck and explore it.

Warning signs

The absence of signs does not mean that someone is not practising it and the first time may be fatal. Signs tend to increase with repetitive practice.

Some of the warning signs include:

- A cord, string, belt or rope in an unexpected place
- Recurrent and violent headaches,
- Ecchymoses on the neck, humming or pain in the ears
- Micro-hemorrhages in the eyes (sometimes with loss of visual acuity)
- Dull noises (feet beating the floor or a wall during convulsions after collapsing)
- With time the child may also develop epileptic seizures, amnesia, confusion, and/or mental disorders.

Polls (Ipsos, 2007) show that, in a sample of more than a 1000 persons representative of the French population aged over 15 years, 6% of the parents who have heard of TFG consider that their children must have practised it once. Out of these, 5% declare knowing children or adolescents who have been injured or died of this practice, and nearly half of those who practised TFG or have seen others doing it were not conscious of the risk.

Conclusions

Deaths by hanging are too quickly assimilated to suicides or asphyxiophilia. A study (Nixon et al, 1995) on 136 youngsters deceased by strangulation, hanging and suffocation in the UK questions the exact cause of the death of 21 children aged 8 to 14 years. In a Scottish study (Wyatt et al, 1998), 6 deaths by hanging are classified as suicides only because they are not accidental. A study by the Office for Population Censuses and Surveys (1994), identifying 136 children under the age of 15 years, concluded that:

‘the prevention of hanging in the group of older boys needs further exploration.’

Further Information

APEAS



A Canadian study in 2001 was the first one to mention strangulation games among youngsters in school bathrooms, using towel dispensers. Following the death of four children and the coma of a fifth, not only the existence of this practice was acknowledged but the decision was taken to suppress cloth towel dispensers in Canadian schools.

As Françoise Cochet, president of the APEAS (French association for parents whose children have been victims of strangulation), says:

‘the difference between harmful risk-related activities and TFG is precisely the fact adolescents are not conscious of the danger.’

On the subject of preventive actions, her recommendation is not to fear the issue. Here as elsewhere, information is invaluable.

BJSN

- BBC News (1999) Education: Eton boy's fatal strangling game <http://news.bbc.co.uk/1/hi/education/297656.stm> (accessed 2 March 2009)
- Blanchard R, Hucker SJ (1991) Age, transvestism, bondage and concurrent paraphilic activities in 117 fatal cases of autoerotic asphyxia. *Br J Psychiatry* **159**: 371–7
- Centers for Disease Control and Prevention (2008) Unintentional strangulation deaths from the ‘choking game’ among youths aged 6–19 years—United States, 1995–2007. *MMWR Weekly* **57**(06): 141–4
- Ipsos (2007) Notoriété et pratique du jeu du foulard. www.ipsos.fr/CanalIpsos/articles/2232.asp (accessed 2 March 2009)
- Le D, Macnab AJ (2001) Self strangulation by hanging from cloth towel dispensers in Canadian schools. *Inj Prev* **7**: 231–3
- Nixon JW, Kemp AM, Levene S, Sibert JR (1995) Suffocation, choking, and strangulation in childhood in England and Wales: Epidemiology and prevention. *Arch Dis Child* **72**: 6–10
- Wyatt JP, Wyatt PW, Squires TJ, Busuttill A (1998) Hanging deaths in children. *Am J Forensic Med Pathol* **19**(4): 343–6

Key Points

- The fainting game can lead to permanent brain damage or kill
- Professionals working with children and young people need to be aware of the practice and its warning signs
- Children and young people can easily access sources of information on how to practise the fainting game but are rarely aware of its dangers