

Bite Marks as a Form of Physical Abuse in Intimate Partner Violence Against Men

A.Millaty Halifah Dirgahayu^{1*}, Djumadi Ahmad^{1,4}, Denny Mathius^{1,2,4}, Zulfiyah Surdam^{1,3,5}

¹Department of Forensic Medicolegal, Faculty of Medicine, Universitas Muslim Indonesia, Makassar, Indonesia

²Department of Physiology, Faculty of Medicine, Universitas Muslim Indonesia, Makassar, Indonesia

³Department of Forensic Medicolegal, Bhayangkara Hospital, Makassar, Indonesia

⁴Department of Forensic Medicolegal, Faculty of Medicine, Universitas Hasanuddin, Makassar, Indonesia

⁵Department of Anatomy, Faculty of Medicine, Universitas Muslim Indonesia, Makassar, Indonesia

*Corresponding Author. E-mail: a.millaty.hdl@umi.ac.id

DOI: 10.33096/6pv1xb60

ABSTRACT

Background: Intimate partner violence (IPV) is a pervasive public health and human rights issue that can affect individuals of all genders. While women are disproportionately affected, male victims are often underreported and underserved. Bite marks, though sometimes underestimated, represent a violent and intimate form of physical abuse.

Content: A 26-year-old male presented with multiple bite marks on the upper arm, shoulder, and chest, consistent with patterned injuries typical of human dentition. The injuries were inflicted by his female partner during a domestic altercation. In addition to the bite wounds, the victim sustained a puncture wound to the chest caused by a ballpoint pen. This event marked an escalation in the pattern of abuse that the victim reported had been ongoing for over a year. This case highlights the complexity of IPV, especially when the victim is male. Bite marks are often inflicted during close physical struggle and are typically associated with intense emotional states, such as rage or control. From a forensic perspective, bite marks can serve as critical evidence linking the perpetrator to the act of violence. The use of an improvised weapon (a pen) in this case also underscores the impulsivity and escalation potential of IPV.

Article history:
Received: 4 Januari 2026
Accepted: 10 Mei 2026
Published: 30 Juni 2026

Summary: *This case underlines the need for a gender-inclusive approach to IPV evaluation and management. Medical and forensic professionals should be trained to recognize bite injuries and respond appropriately to male victims, ensuring comprehensive documentation, evidence collection, and referral for psychosocial support.*

Keywords: *Bite marks; intimate partner violence; male victim; physical abuse; forensic examination*

INTRODUCTION

Bite marks can be an important indicator in the context of domestic violence. One often overlooked manifestation of physical violence in relationships is bite marks. Although these marks are often ignored because biting a partner is considered normal, this cannot be considered normal if it occurs too frequently and is done by a partner, especially when angry.¹

Intimate partner violence (IPV) is generally associated with female victims. However, men can also be victims of physical, emotional, and sexual violence from their partners. Social stigma and gender bias often lead to such cases not being reported or taken seriously, thereby exacerbating the psychological impact on the victim². According to data from Simfoni PPA in 2024 in Indonesia, there were 6,436 cases of violence against men out of 29,091 cases. In South Sulawesi, there were 376 cases of violence against men out of 1,427 cases of violence³. This case report discusses repeated incidents of violence experienced by a male victim at the hands of his partner, highlighting a pattern of progressive physical violence. The initial incident involved biting several parts of the body, followed by stabbing with a pen, indicating an escalation of violent actions. This case aims to document patterns of violence, analyze the incidence rates and triggering factors, as well as explore the legal and psychological implications for the victim.

CASE

A 26-year-old man presented with several bite marks consistent with the typical pattern of injuries caused by human teeth. According to the patient's statement, the injuries were inflicted by his female partner during an argument. In addition to the bite wounds, the victim sustained a stab wound to the upper abdomen caused by a pen.

During the examination, seven injuries were found, specifically: one pressure abrasion on the lower left arm, two pressure abrasions on the left shoulder, one pressure abrasion on the left chest, one pressure abrasion on the upper right arm, one scratch abrasion on the upper right arm, and one bruise on the upper right arm.

DISCUSSION

This case report highlights incidents of violence in relationships where the victim is male. Mas'udah's research in 2024 found that out of 53 samples, the types of violence experienced by men were not limited to one type of violence, but also included verbal, sexual, and economic violence simultaneously⁴. The study explains that women engage in such behaviour due to jealousy, lack of self-confidence, and the inability of men to provide economic stability. Victims typically do not report such cases because they feel ashamed to admit they are victims, as societal stigma often portrays men as the superior party^{4,5}.



Figure 1. The green arrow shows a scratch wound on the left arm, the blue arrow shows a pressure wound on the chest, and the red arrow shows a pressure wound resembling teeth marks on the chest

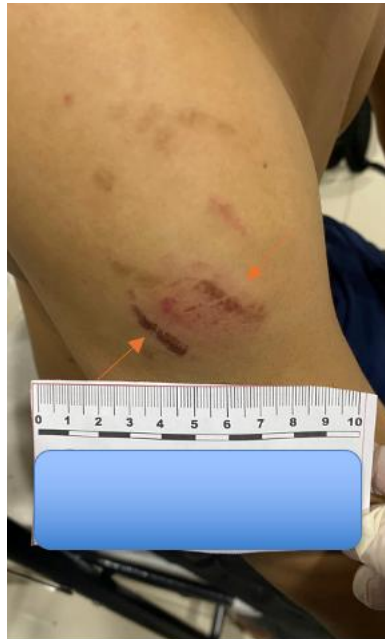
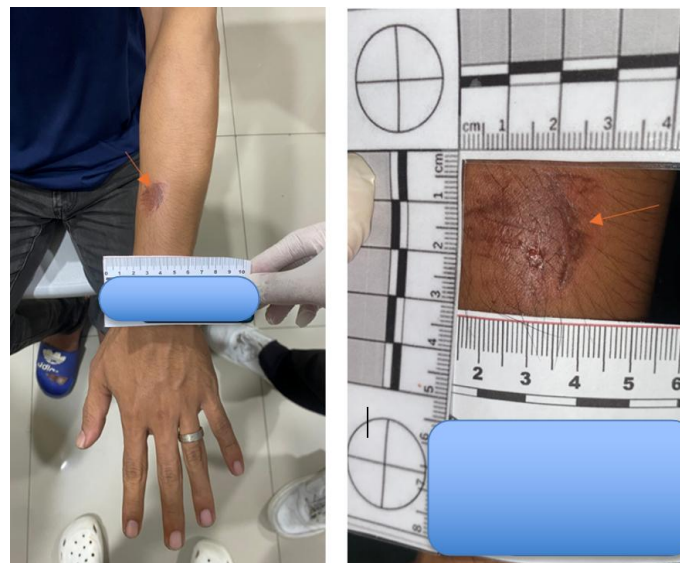


Figure 2. The red arrow indicates a pressure sore resembling a tooth mark on the right arm



Figures 3 and 4. The red arrows indicate pressure abrasions resembling teeth marks on the right forearm

Bite mark analysis involves examining patterned injuries and contextual circumstances, combining morphological and positional data⁶. Given the uniqueness of human teeth, bite marks caused by teeth on skin or impressions on flexible surfaces can aid in human identification. Bite marks provide important elements that contribute to the identification of the biter; comparing bite marks with the suspect's teeth can be decisive in confirming identification.⁷ In the field of forensic science, bite mark can be classified as either pressure contusions, pressure abrasions or lacerations. In this case, the injury

is categorized as a pressure abrasion due to the absence of epithelial discontinuity in the injured skin. The pressure abrasion identified on the victim was caused by blunt force trauma.¹ The lesions present in the victim might have been related to blunt force trauma, a mechanism of aggression that is usual in intimate partner violence. In intimate partner violence, blunt force trauma is frequently associated with physical attacks such as slapping, punching and kicking, pushing against solid surfaces or hitting the victim with domestic items. These injuries frequently result in scratches and bruises of varying degrees, as well as patterned injuries indicative of repeated contact with rough surfaces or defensive actions by the victim⁸. Such injuries are often distributed on exposed areas of the body, including the face, neck, upper limbs, and trunk, and may coexist with older lesions in various stages of healing. This injury pattern is characteristic of ongoing or recurrent abuse rather than a single accidental event. Abrasions in intimate partner violence may also be associated with restraint, dragging, or forceful gripping, indicating a power imbalance and coercive control exerted by the perpetrator^{4, 9}. According to Worman et al in their study at 2021, 31.7% of 167 samples reported repeated incidents of violence in their relationships.

According to the study, male victims are discouraged from sharing their stories because they fear stigma, mockery, or disbelief because of cultural expectations of masculinity, such as emotional fortitude, physical prowess, and independence. Because of this, rather than being acknowledged as abuse, acts of violence against men are often minimized, normalized, or misunderstood as mutual conflict. In addition to having an impact on the victims' psychological health, this lack of acknowledgment makes it more difficult to gather accurate epidemiological data and create inclusive preventative measures.¹⁰ Machado et al interviewed 10 victims of intimate partner violence and concluded that there is a lack of visibility and social awareness regarding intimate partner violence against men within society. The invisibility of male victims of intimate partner violence poses challenges in identification, documentation, and legal redress. Health care professionals and forensic practitioners may overlook subtle physical injuries or psychological trauma in men, leading to missed opportunities for intervention. Machado et al's findings underscore the need for increased social awareness, gender-inclusive policies, and professional training to ensure that intimate partner violence is recognized and addressed as a public health and human rights issue affecting individuals of all genders⁶. Scott et al critically reviewed the conceptual foundations of victimisation in intimate partner violence among men. The influence or role of gender and societal expectations on men's experiences and perceptions of violence victimisation in relationships and their help-seeking behaviour are explored. Current knowledge about the types, tactics, and patterns of relationship violence against men and the health and social consequences of relationship violence are discussed. Additionally, the conceptual and empirical limitations of the research conducted by Scott et al. are highlighted, including a tendency to compare

only the prevalence rates of separate incidents of violence among women and men; the use of measures of intimate partner violence that are not designed to capture men's conceptualisation of intimate partner violence; and a lack of attention to the gender and gender identity of both victims and perpetrators^{9, 11}. This certainly needs special attention so that knowledge about violence against men can be deepened to make it easier to identify. In this case, several bite marks were found on various parts of the body, with wounds of varying ages. This indicates that the victim had been subjected to violence more than once¹². Whether committed by the same person or by different perpetrators, intimate partner violence frequently reoccurs, indicating a recurring pattern of vulnerability rather than a singular incident. Experiences of violence become part of a recurring cycle for many survivors, which is influenced by emotional ties, power disparities, fear, financial reliance, and restricted access to adequate protection or assistance. This recurrence highlights the fact that domestic violence is a complicated social and relational phenomenon with long-term effects on one's physical and mental health rather than just an isolated act of aggression. Intimate partner violence often recurs, whether perpetrated by the same individual or by different perpetrators. This aligns with research conducted by Schemmel et al., which concluded that out of 12,000 male respondents, 1,209 reported having experienced violence in the past. Viewed through a humanistic lens, these findings call for greater empathy and inclusivity in how domestic violence is understood and addressed¹³. Recognizing the recurrent nature of violence and acknowledging the experiences of all victims regardless of gender are essential steps toward building supportive systems that prioritize safety, dignity, and recovery. Only by listening to survivors' narratives and responding with compassion can society begin to break the cycle of repeated intimate partner violence even in men¹⁴. The study suggests that cultural expectations of masculinity, such as emotional strength, physical power, and self-sufficiency, discourage male victims from sharing their experiences. They often fear stigma, ridicule, or disbelief. This lack of recognition harms the victims' mental health and complicates the collection of accurate data and the creation of effective prevention plans. From a clinical and legal perspective, the invisibility of male victims of intimate partner violence creates problems in identifying, documenting, and pursuing legal action. Healthcare workers and forensic experts may miss subtle physical injuries or psychological harm in men, resulting in missed chances for help. The need for greater social awareness, gender-inclusive policies, and better training for professionals. This will help ensure that intimate partner violence is recognized and treated as a public health and human rights issue that affects everyone¹⁵.

CONCLUSION

This case highlights the importance of raising awareness that men can also be victims of intimate partner violence, including in the form of bite wounds. Objective and stigma-free assessment by medical personnel is essential for the protection of victims and a fair legal process. As a result, violence against men is often underestimated, accepted, or misinterpreted as mutual conflict rather than considered as violence.

Conflict of Interest

We declare that there is no conflict of interest.

Acknowledgements

The author would like to express deepest gratitude and appreciation to the Head and Secretary of the Department of Forensic and Medicolegal Medical Faculty of Universitas Muslim Indonesia for his guidance, support, and academic policies that enabled the compilation of this case report.

REFERENCES

1. Acharya D, Nilendu D. From Anatomy to Analysis : Current Trends and Future Directions in Bite Mark Forensics. 2025.
2. Expósito-Álvarez C, Roldán-Pardo M, Vargas V, Maeda M, Lila M. The Impact of Trauma and Substance Use on Emotion Regulation and Intimate Partner Violence Perpetration: Implications for Perpetrator Programs. *Behavioral Sciences*. 2025;15(2). doi:10.3390/bs15020156
3. Indonesia KP perempuan dan PAR. <https://kekerasan.kemenpppa.go.id/ringkasan> [Internet]. 2025. SIMFONI PPA (Sistem Informasi Online Perlindungan Perempuan dan Anak). Available from: <https://kekerasan.kemenpppa.go.id/ringkasan>
4. Mas'udah S. Male victims of domestic violence among professional families: Shackled in masculinity. *Jurnal Sosiologi Dialektika*. 2024;19(1):66–76. doi:10.20473/jsd.v19i1.2024.66-76
5. Coker AL, Pope BO, Smith PH, Sanderson M, Hussey JR. Assessment of clinical partner violence screening tools. *Journal of the American Medical Women's Association* (1972). 2001;56(1):19–23. PubMed PMID: 11202067.
6. Machado A, Santos A MM (Un)Acknowledgment of M as V of IPV violence VVict 2023 A 1;38(2):250-266. doi: 10.1891/VV.2022.0022. E 2023 A 3. P 37011947. (Un)Acknowledgment of Men as Victims of Intimate Partner Violence. Springer Publishing Company. 2023;1(38(2)):250-266.
7. Mazza M, Marano G, del Castillo AG, Chieffo D, Monti L, Janiri D, et al. Intimate partner violence: A loop of abuse, depression and victimization. *World Journal of Psychiatry*. 2021;11(6):215–21. doi:10.5498/wjp.v11.i6.215
8. Vidyadhara K, Pertiwi PP. A Scoping Review of Risk Factors for Intimate Partner Violence Perpetrators in Indonesia. *Buletin Psikologi*. 2024;32(2):138. doi:10.22146/buletinpsikologi.94291
9. Scott-Storey K, O'Donnell S, Ford-Gilboe M, Varcoe C, Wathen N, Malcolm J, et al. What About the Men? A Critical Review of Men's Experiences of Intimate Partner Violence. *Trauma, Violence, and Abuse*. 2023. p. 858–72. doi:10.1177/15248380211043827 PubMed PMID: 35094633.

10. Wörmann X, Wilmes S, Seifert D, Anders S. Males as victims of intimate partner violence — results from a clinical-forensic medical examination centre. *International Journal of Legal Medicine*. 2021;135(5):2107–15. doi:10.1007/s00414-021-02615-x PubMed PMID: 33928431.
11. Macorano E, Mele F, Calvano M, Leonardelli M, Duma S, Gabriele G De, et al. Reverse engineering in forensic investigations: a new approach to bite mark analysis. *Journal of Forensic Odonto-Stomatology*. 2023;41(3):45–51. PubMed PMID: 38183971.
12. Recommenda IOFOS. I.O.F.O.S. Recommendations for Quality Assurance: Tooth mark (bite mark) analysis and comparison. 2008.
13. Christoloukas N, Mitsea A, Rontogianni A, Papadakis E, Angelopoulos C. Evaluation of Bitemark Analysis's Potential Application in Forensic Identification: A Systematic Review. *Diagnostics*. 2024;14(11). doi:10.3390/diagnostics14111180
14. Schemmel J, Macey D, Goede LR. Intimate Partner Violence Against Men in Germany—A Study on Prevalence, Victim–Offender Overlap, and the Role of Parental Violence. *Journal of Interpersonal Violence*. 2025. doi:10.1177/08862605251321003
15. Baukaite E, Walker K, Sleath E. Breaking the Silence: Addressing Domestic Abuse in Mental Health Settings—Identification, Screening, and Responding. *Trauma, Violence, and Abuse*. 2024. doi:10.1177/15248380241280092