

# The Pseudoscience that Shielded Police Violence

*by Magda Boutros*

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**“Excited delirium” is a diagnosis that was used to absolve police officers of responsibility for the deaths of Black and Brown men. For decades, it was legitimized by a network of forensic pathologists, law enforcement agencies, and private companies that sustained this pseudoscience.**

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About: Aisha M. Beliso-De Jesús, *Excited Delirium: Race, Police Violence, and the Invention of a Disease*, Durham, Duke University, 2024, 312 p.

*Excited Delirium* tells the story of “excited delirium syndrome”, a diagnosis that was used by forensic pathologists in the United States as a medical scapegoat to exonerate police officers who used excessive force against Black and Brown men. Rooted in racist tropes, the syndrome is based on the claim that Black men have a genetic predisposition to become “cocaine-crazed”, even when using small amounts of the drug, which leads them to develop superhuman strength and to spontaneously die during police interventions.

Beliso-De Jesús first came across excited delirium as she was researching the policing and criminalization of Afro-Caribbean religions. She discovered that, in several cases of unexplained deaths in police custody, medical examiners attributed the cause of death to this little-known syndrome. Using archives and interviews, the anthropologist traces the construction and use of excited delirium syndrome, by following the network of medical experts, researchers, police officers, lawyers, and

private companies that made up and legitimated the diagnosis, and the stories of the families who were denied justice after losing a loved one at the hands of the police.

## **The Origins of a Racist Diagnosis**

The book centers on Charles Wetli, the forensic pathologist who first coined the term “excited delirium syndrome” in the 1980s. At the time, Wetli was the chief assistant medical examiner of Dade County, in Miami. He had made a name for himself by becoming a so-called “cult-expert”, publishing research and providing trainings to law enforcement on Afro-Caribbean religions. He promoted the idea that the tattoos of Black and Brown immigrants could help decipher the kind of criminality they were involved in. His work contributed to the criminalization of these religions during the Satanic Panic of the 1980s, when practitioners of Afro-Caribbean religions were indicted for so-called satanic ritual abuse of children.

The pathologist first theorized the connection between Blackness and cocaine-induced death when he worked on the cases of a dozen Black women who were found dead in Miami between 1986 and 1988. Dismissing the police’s initial suspicions of homicide, Wetli declared these cases to be “sudden death from low doses of cocaine that cause the victims to go berserk and die within minutes” (47). Black women, he argued, had a predisposition to develop these symptoms after low doses of the drug, especially when it was associated with sex. Drawing on racist and sexist tropes, he stated: “For some reason, the male of the species becomes psychotic, and the female of the species dies in relation to sex while using cocaine” (48). Based on his reports, none of these deaths were investigated as homicide, even as the bodies kept piling up. It was not until 1988, when evidence surfaced connecting a serial rapist to the so-called “cocaine sex” cases, that the investigations were reopened. A review of Wetli’s pathology reports found that he had disregarded obvious signs of trauma and strangulation on the victims’ bodies, some so pronounced that they were visible from 10 feet away.

Even as his claims connecting cocaine, sex, and death in Black women were debunked, Wetli continued developing his excited delirium theory, focusing on cases of Black men who died in police custody after officers used choke holds, hog-tying, or electric shocks. When suffering from excited delirium, he claimed, Black people are said to become aggressive, excited, sweaty, and agitated; they are impervious to pain;

and then, they suddenly “up and die”. The theory did not explain how they went from developing “superhuman strength” to suddenly dying. Wetli published research papers, gave trainings to law enforcement, and wrote dozens of medical reports attributing police-caused deaths to excited delirium.

The pathologist and his co-authors maintained that, when Black men die at the hands of the police and there is evidence of cocaine use and “delirium”, medical examiners should attribute the cause of death to excited delirium, without the need for further investigations. In practice, this meant that pathologists relied primarily on the accounts the officers and paramedics present at the scene regarding the behavior of the deceased, to attribute the death to excited delirium syndrome.

Beliso-De Jesús argues that Charles Wetli epitomizes the *White expert*, “the seemingly impartial outsider believed to provide a neutral perspective, yet who instead actually reinforces the entire structure of [racist] violence.” (149) The pathologist built his career by using media sensationalism and racism to craft himself into an expert, first on Afro-Latiné religions, then on cocaine sex, then on excited delirium. Even after Wetli had a change of heart about Afro-Latiné religions and tried to undo some of the harm his reports had caused to these communities, and after his cocaine sex theory was debunked, he was still considered a credible expert in legal proceedings.

## Medicalizing Police Violence

While Charles Wetli is key to the story of excited delirium, the strength of Beliso-De Jesús’ account lies in the way she uncovers the broader structures within which the made-up medical condition was sustained and legitimated for decades without challenge. The role of the White expert is central to what she calls the *racial laboratory*, that is, medical, legal, and criminological research practices that appear impartial but are rooted in racial science. The racial laboratory helps solidify time-worn tropes of Black and Brown criminality into empirical truths, and serves to “medicalize police violence” against Black and Brown people, shifting the focus away from the structures of racist violence.

The anthropologist uncovers a wider network of professionals that have built their careers on the racist assumptions underlying excited delirium. The fake diagnosis

did not only bolster Wetli's career as a medical examiner, trainer, and expert witness. It also helped police officers escape accountability when they used excessive force against unarmed Black men, as well as paramedics who administered ketamine to people who the police claimed were uncontrollable, sometimes in lethal doses.

Excited delirium also became a convenient scapegoat for private manufacturers of so-called less-than-lethal weapons. One of the most interesting pieces in the book retraces how Taser International, the company that manufactures and sells the electric shock weapon, relied on Wetli's made-up diagnosis to escape accountability. When a death occurred following police use of Taser, the company retained medical examiners like Wetli who they knew would write favorable reports. This strategy paid off; an investigation found that in almost a third of the hundreds of cases of deaths following the use of Taser, the autopsy report listed excited delirium. Taser International also recruited Wetli as an expert witness in several lawsuits, paying him as much as \$1000 for each court testimony. The diagnosis was used as a successful defense in 29 of the 30 wrongful death lawsuits against the company.

## **George Floyd and the Debunking of Excited Delirium**

It wasn't until the killing of George Floyd in 2020 that the made-up syndrome came to the spotlight, after Derek Chauvin's attorneys argued that the victim had developed excited delirium during his arrest. Many organizations started looking into the syndrome and calling it out for what it is: a medical scapegoat for police abuse. By 2023, the diagnosis was fully disavowed by every medical association, and some states banned its use as a cause of death.

Still, police officers who kill continue to be acquitted after using excessive force against unarmed Black men, based on the age-old narrative that White officers' fear of Black youth justifies lethal force. Beliso-De Jesús concludes her book by warning that the debunking of excited delirium syndrome will not be enough to stop the violent criminalization of Black and Brown men, and the legitimization of police violence. Excited delirium, she writes,

is not merely a fabricated genetic syndrome in which sweaty Black people with bulging eyes up and die spontaneously around police, as Charles Wetli had claimed. Excited delirium is the White racial fantasy of Black and Brown predatory violence that is sanitized through racial science. Through a complex network of

law enforcement practitioners, so-called experts, and medical personnel, this moral panic is medicalized – which is to say it is institutionalized through the racial laboratory (181).

## **Inside the Author’s Personal and Spiritual Journey**

One of the most intriguing aspects of the book is the author’s deeply intimate writing. Interspersed between each chapter are excerpts of her journal entries, in which she talks about the toll the research is taking on her, the dreams that haunt her at night, and the ways in which she deals with the trauma her research generates.

Beliso-De Jesús explains that she decided to share her journal entries as ethnographic data to reveal her process of discovering excited delirium syndrome. “The journals also illustrate how my Afro-Latiné cultural traditions are part of my own healing process – of being a scholar traumatized by what my research uncovered, of needing to find a way through this material”, she writes (9). Thus, the reader gets a rare, intimate look into the researchers’ journey, and into how she used her spiritual practice to help her through the process of researching and writing the book. This sets the stage for fascinating reflections on how we are trained to hide the ways in which we can be deeply impacted by our work, and how our cultural or religious practices can be an inherent part of how we do research.

## **Global Echoes of Racialized Medical Narratives**

While *Excited Delirium* focuses on the United States, the story it tells extends beyond American borders. Reading through it, I saw many echoes with patterns I encountered in France during my research with families of victims of police killings. Similar to the US, when Black or Brown men die in police custody following the use of restraining techniques or electric shocks, autopsy reports routinely attribute the cause of death to overdose, even when there are only miniscule traces of drugs, or to previously undiagnosed medical conditions. The diagnosis of excited delirium has also appeared in some of these reports, namely in cases of death following the use of restraining techniques that block airways.

In France like in the US, pathologists rely on police narratives describing unarmed Black men being highly excited or developing “superhuman strength” to justify officers’ use of excessive force. For example, when Lamine Dieng died during a police intervention in 2007, the police claimed that the 25-year-old had used cannabis and cocaine, which made him “highly excited,” and, combined with his “athletic build,” led him to develop “superhuman strength.” They said that several officers struggled to arrest him, until he suddenly “went limp” and died. The autopsy report legitimated this version of events, noting no signs of beating and concluding to a death by overdose. The case was closed, until the Dieng family filed a complaint. The investigation that followed revealed that eight police officers had been present at the scene, four of whom had maintained the victim in a face-down hold for thirty minutes with the weight of their bodies on his shoulders, while he was handcuffed with one arm above his shoulder and his feet tied together. A second autopsy attributed the death to mechanical asphyxiation caused by the restraining hold. Nevertheless, and despite a decade-long struggle for justice, the judiciary refused to indict the officers, arguing that the cause of death remained unclear, and that the officers’ use of force was reasonable and proportionate given Lamine’s aggressivity and highly excited state.

*Excited Delirium* is part of a burgeoning field of research in the United States, which analyzes how medical knowledge can contribute to the pathologization and criminalization of racialized bodies (eg. Oliver Rollin’s *Conviction*, Jonathan Metzl’s *the Protest Psychosis*). Future research could look at the international circulations of this science, and the role of international organizations in legitimating and disseminating the racial laboratory.

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