

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/272509827>

# MORBID AUTOPSY FINDINGS DO REVEAL MOTIVE OF THE CRIME

Article · January 2014

CITATIONS

0

READS

143

6 authors, including:



**Mandar Sane**

All India Institute of Medical Sciences (AIIMS) Nagpur

58 PUBLICATIONS 53 CITATIONS

[SEE PROFILE](#)



**Anand Mugadlimath**

S.Nijalingappa Medical College & H.S.K.Hospital & Research Centre

81 PUBLICATIONS 64 CITATIONS

[SEE PROFILE](#)

Some of the authors of this publication are also working on these related projects:



Identification [View project](#)



Extention of consent [View project](#)

## Case Report

### MORBID AUTOPSY FINDINGS DO REVEAL MOTIVE OF THE CRIME A CASE REPORT

Dr. D Ingale, Dr A Kanaki, Dr M Sane, Dr. A Mugadlimath,  
Dr N Gupta, Dr. B Chandrashekhar

#### Authors

Dr. Dharmaraya Ingale, Professor & HOD, Dept of FMT, Shri B M Patil Medical College, Bijapur

Dr Ashok Kanaki, Associate Professor, Dept of FMT, Ashwini rural Medical College, Solapur

Dr Mandar Sane, Assistant Professor, Dept of FMT, Govt Medical College, Aurangabad

Dr. Anand Mugadlimath, Associate Professor, Dept of FMT, Ashwini rural Medical College, Solapur

Dr Neeraj Gupta, PG Student, Dept of FMT, Shri B M Patil Medical College, Bijapur

Dr. Bhuyyar Chandrashekhar, PG Student, Dept of FMT, Shri B M Patil Medical College, Bijapur

Number of Pages: Three

Number of Tables: Nil

Number of Graph: Nil

Number of Photographs: Nil

**Corresponding Author:** Dr. Dharmaraya Ingale, Professor & HOD,  
Dept of FMT, Shri B M Patil Medical College,  
Bijapur

## Case Report

### MORBID AUTOPSY FINDINGS DO REVEAL MOTIVE OF THE CRIME A CASE REPORT

Dr. D Ingale, Dr A Kanaki, Dr M Sane, Dr. A Mugadlimath,  
Dr N Gupta, Dr. B Chandrashekhar

#### Abstract

A 45 year old widow was brought to community health centre with h/o sudden onset of chest pain, breathlessness at midnight from nearby village. The doctor on duty referred the case to District headquarters for further treatment after first aid. The case was later admitted and treated for alleged organophosphorus poisoning for 4 days in a private hospital. She was declared dead on 5<sup>th</sup> day early morning. Medico Legal post mortem examination was held at the request of Police, on the same day at noon. This case is reported for its unique findings contradicting the history furnished by the police and the relatives, revealing motive of crime.

**Key words:** Motive of the crime, Organophosphorus, decidual reaction

#### Introduction

Objectives of the medico legal autopsy are, to assist the investigating agencies in establishment of identity of the unknown deceased, to find exact cause of death, time since death, mode & manner of death and in case of newborns to decide live birth or dead birth<sup>(1)</sup>. Often in routine practice of the medico legal autopsy, concern is to opine as to the exact cause of death & time since death. However the doctor should not volunteer to opine as to the manner of death on autopsy findings alone. Also, it should be remembered that detection of the motive of the crime is not within the purview of the doctor. Nevertheless, careful & complete medico legal autopsy and recording of all the wounds, diseases, anomalies, abnormalities, condition or the state of the organs do help in deciding motive of the crime.

Criminal abortion comprises the deliberate ending of pregnancy outside legal provisions. Hippocratic Oath banned the involvement of a doctor in abortion. In 1970, Oslo declaration modified Geneva declaration as allowing the doctor in abortion only when this was sanctioned by the laws of their native country<sup>(2)</sup>. Here is a case report of 45 year old widow, who had sudden onset of breathlessness at mid night and treated for suspected poisoning by organo-phosphorous compound for 4 days, declared dead at private hospital. The case was registered under 174 Cr PC and the dead body was subjected for medico legal post mortem examination, which revealed the facts.

#### Case report

The dead body of 45 year old widow was subjected for medico legal post mortem examination under Section 174 CrPC. As per the history furnished by the police in the requisition for the autopsy, the deceased had sudden onset of breathlessness & chest pain, she was rushed to government hospital nearby, from where she was referred to District headquarters for further treatment. As per the summary of treatment given by the hospital, she died 4 days after being treated for suspected organophosphorus poisoning. On enquiring, the relatives provided the information that there is family history of malignancy of uterus.

#### External examination

Moderately built & nourished female body, rigor mortis established all over, post mortem lividity present on the back of the trunk, nail beds were bluish. Intravenous injection

marks present over the back of the hands, Central venous catheterization present over the neck. There was froth around mouth & nostrils. There were multiple hemorrhages under the skin all over the body even amidst the post mortem staining. Eyes were congested, ischemic necrosis & blebs filled with serous fluid were present over the distal phalanx middle finger of left hand.

### Internal examination

Brain was congested & edematous. Both the lungs were congested, edematous & consolidated patchily. Heart was congested & edematous, large vessels contained dark fluid blood. Stomach had 25 ml of brown color fluid without any abnormal smell, mucosa was congested & hemorrhagic. Liver showed macro nodular changes over its surface, spleen was enlarged and covered by white exudative material. Both the kidneys were congested. The peritoneal cavity contained two liters of straw color fluid. All the internal organs showed hemorrhagic areas on their surface and substance with hemorrhagic areas in the serosal layers & mesentery.

The uterus was congested, enlarged measuring 13x8x5cms containing blood and blood clots, the endometrium was thickened & hemorrhages were present over bilateral fundal and infundibular areas. Cervix was edematous, hemorrhagic & external os showed irregular inflamed areas. Both ovaries had serous cysts of 4 to 5 cms size on both side, which collapsed on cutting.

Chemical analysis of viscera revealed organophosphorus insecticide compound.

Histopathology revealed edema in lungs. Endometrium showed proliferative endometrial glands with deciduas reaction. Both the ovaries showed changes suggestive of enlarged follicles. Ovaries revealed presence of enlarged follicles

### Discussion

Incompetent abortionists lack in hygiene, skills, aseptic procedures, literacy and safety. About 8000 deaths occur every year due to septic abortion<sup>(3)</sup>.

Suicide amongst females may be due to various reasons including family problems, love affairs, illness, illicit relation etc<sup>(4)</sup>. However, unusual reasons like illegitimate pregnancy may also creep up, as in present case. Finding a motive for suicide may not be prime objective of an autopsy, but ascertaining a reason behind suicide should be attempted for a greater social cause. In the present case, decidual reaction was noted in uterus and enlarged follicles in ovaries were noted. Decidual reaction is completed only with blastocyst implantation, which occurs not earlier than 6-7 days after fertilization<sup>(5)</sup>.

Looking at the morbid autopsy findings in the uterus and ovaries, it is certain that the widow woman had aborted in recent past, preceding the last illness. Now the question arises as to whether the abortion was induced or spontaneous. In absence of injuries to cervix, the autopsy findings are not specific to decide manner of expulsion of products of conception. However her last illness could be sequel to these findings in the form of disseminated intravascular coagulation as a complication of abortion. Alternatively, it could be of consequent to abortion notwithstanding infamy the widow could have resorted to commit suicide by consumption of poison and which is beginning of all the events. Not many deaths consequent to criminal abortion are reported. Biswas H reported a case of 28 year old widow, who died due to perforation of uterus due to unskilled abortionist<sup>(6)</sup>. On the other hand the treatment summary do not mention of signs of disseminated intravascular coagulation<sup>3</sup> or bleeding per vagina etc. The CA report was positive for the poison even after 4 days of indoor treatment for poisoning. This proves consumption of poison by the deceased. The

signs of abortion in the form of decidual reaction, is the motive for her to attempt to end her life by consuming poison to avoid infamy.

Prior to abortion Act (1967) in England, there occurred 30 deaths from criminal abortion each year. In 20 of these cases the abortionist was the patient herself<sup>(7)</sup>. By assessment of menstruation, destruction of embryos is deliberately done. The diagnosis of pregnancy from menstrual calculations is an ethical as well as legal query as pregnancy starts from the time of impregnation of zygote into the endometrium and interruption of normal pregnancy without indication contravenes both ethics and law<sup>(8)(9)</sup>.

Vital organic causes for suicides may prove as a starting point for police investigations. Though attempting a suicide is an offence, but other ancillary offences related to suicide like abetment of suicide may need a vital clue for further investigations.

### Conclusion

Role of autopsy surgeon does not end with mere determining identity, know the cause of death, time since death, mode & manner of death or opinion about live born or dead born fetus, but every morbid anatomical findings in the dead body do reveal the disease or the condition that the person lived with, which indicate not only cause & manner but also motive of crime.

### References:

1. Reddy KSR. Medicolegal autopsy. Essentials Forensic Med. Toxicol. 29th ed. Hyderabad: K.Suguna Devi; 2010. p. 93.
2. Parikh CK, Prabhakar PE. Text book of Medical Juris Prudence and toxicology. Mumbai: CBS publishers & distributors; 1992. p. 465.
3. Azim A, Begume N. Septic Abortion a major problem in Bangladesh. Int. Conf. Obstet. Gynaecol. 1992. p. 197–203.
4. Accidental deaths and suicidal deaths 2012 [Internet] <http://ncrb.nic.in> [Accessed on 26/03/2014].
5. Cunningham FG et al. Implantation, embryogenesis and placental development. William's Obstet. 22nd ed. New York: Mcgraw Hill; p. 49–52.
6. Biswas H, Das RK, Talukder SI. Death of a Case of Criminal Abortion by an Unskilled Abortionist. Dinajpur Med Col J. 2012;5(1):72–5.
7. Jeffcoate N, Tindal VR. Principles of Gynaecology. 5th ed. London: Buterworth and Co. Ltd; 1987. p. 624.
8. Islam A. MCH Programme in Bangladesh. Int. Conf. Obstet. Gynaecol. 1992. p. 53.
9. Nandi A. Principles of Forensic Medicine. 1st ed. New Central Book Agency; 1995. p. 395.