

A Profile of Medico Legal Cases in a Tertiary Centre of Rural Karnataka

Sham Kishore K^{1a}, K H Thippeswamy^{2b}, K B Suryakumar^{3b}

Abstract

Medico legal cases are integral to medical practice and no doctor can shy away from it. The present study aimed to find out the profile of MLC cases coming to the casualty of KVG Medical college hospital which happens to be a rural tertiary centre.

The study showed that majority (72.18%) of medico legal cases involved male sex. Age group 21-40 years made up for 47.3% of medico legal cases. 56.4% of medico legal cases were road traffic accident (RTA), and among RTA's 46.7% of cases involved 2 wheelers. Maximum number of poisoning cases was suicidal in nature.

Key words: Medico legal, rural, tertiary centre, RTA, suicide

© 2016 Karnataka Medico Legal Society. All rights reserved.

Introduction:

India is a country facing acute shortage of doctors in rural areas. The few doctors who practice in such areas are facing problems not only regarding treatment of patients but also regarding completion of formalities in medico legal cases. Finding a small hospital in rural India is difficult, let alone a tertiary centre. But Sullia is one of the very few rural areas which is endowed with a well-established tertiary hospitals which caters to all kinds of patients and also handles medico legal cases.

Any unnatural event resulting in bodily damage seeking medical intervention and legal answer is called medico legal case. These kinds of cases are usually unnatural, unexplained, unexpected and suspicious in nature. Examples being accident, assault, poisoning, brought in gasping condition & failure to diagnose, brought dead, suspicious history, snakebite/wild animal injury, and sexual offences/perversions.

In many hospitals of our country maintenance of records pertaining to medico legal cases is poor. It is advisable to maintain an incident/accident register in casualty of each hospital in which all the details of a medico legal case, whether admitted or treated as outpatient has to be entered. Some of the important points to be entered are;

- Date and time of examination
- Brought by person name and his relation to Patient / PC number & Police station
- Informant – Self / others (Name and his relation to patient)
- Two I D marks
- Brief history as furnished by informant
- Police intimation sent/not sent

Proforma for an ideal Medico legal register can be seen as annexure 1.

Material and methods

This is a retrospective observational and descriptive study involving medico legal cases which came to the casualty of KVG Medical college hospital Sullia India from 1st January to 31st December 2013. The data was collected from the Medico legal register, case sheets and

^{1a} Assistant Professor, ^{2b} Associate Professor, ^{3b} Professor
Department of Forensic Medicine & Toxicology, ^a Kanachur
Institute of Medical Sciences, Deralakatte, Mangalore 575018,
^bKVG Medical College and Hospital, Kurunjibagh, Sullia
574327

Correspondence: Dr. Sham Kishore K,
Cell: 9449740775 Email ID: shamkishorebhat@gmail.com

hospital case records. The data collected was tabulated and analysed using Statistical Package for Social Sciences (SPSS) 16.

Results

Out of 133 medico legal cases studied, 72.18% (96) were male and 27.82% (37) were female (Table 1).

Maximum number of patients (63) belonged to age group 21-40 years, followed by patients (44) who belonged to 41-60 years and patients (16) belonging to 01-20 year age group. 10 patients belonged to age group 61 years and above (Table 1).

Table 1 showing age and sex wise distribution of MLC cases

Age in years	Male	Female	Total	% of total
1-20	10	6	16	12.1
21-40	52	11	63	47.3
41-60	29	15	44	33.1
61 & <	5	5	10	7.5
Total	96	37	133	100

Cause of MLC in 56.4% cases was RTA (75), followed by assault (26) in 19.5% cases and poisoning (23) in 17.3% cases. 5.2 % cases were fall from height (7), burns and animal injury accounted for 1 case each. Out of the total 75 RTA cases 61 victims were male and 14 victims were female. Out of 26 assault cases, 17 were males and 9 females. Out of 23 poisoning cases, 13 were female and 10 male. Out of 7 cases of fall from height 6 were male & 1 female (Table 2). Of all the RTA's, Victims riding 2 wheelers (35) accounted for 46.7% out of which 32 were male and 3 were female. 25.3% victims (19) were in a 3 wheeler or 4 wheeler, out of which 16 were male and 3 female. Pedestrians (14) were the victims in 18.7 % cases, out of which 9 were males and 5 females (Table 3).

Table 2 showing cause of MLC

Cause of injury	Male	Female	Total	% of total
RTA	61	14	75	56.4
Poisoning	10	13	23	17.3
Assault	17	9	26	19.5
Fall from height	6	1	7	5.2
Burns	1	0	1	0.75
Animal injury	1	0	1	0.75
others	0	0	0	0

Table 3 showing pedestrian/vehicle involved in RTA

Pedestrian/ vehicle	Male	Female	Total	% of total
Pedestrian	9	5	14	18.7
2 wheeler	32	3	35	46.7
3-4 wheeler	16	3	19	25.3
Heavy vehicle	2	2	4	5.3
Unknown vehicle	2	1	3	4
Total	61	14	75	100

Most common manner of poisoning was suicidal (19) followed by accidental (4) (Table 4).

Table 4 showing manner of poisoning

Manner of poisoning	Number
Suicidal	19
Accidental	4
Homicidal	0

Discussion

A case is made medico legal by the Medical officer whenever an injured, poisoned, burnt cases are brought to the casualty for treatment irrespective of the history of the case. This is done on the presumption that it is the duty of the doctor to assist the police in the proper investigation of the case, to help catch the accused, and also to prevent any untoward incident in society.

The law does not say that doctor is duty bound to inform each and every case of injury or poisoning to the legal authorities, some cases like injuries sustained by self-fall need not be informed to authorities.

To avoid complications a Medical officer can report each and every case of injury and suspected case of poisoning to the police and the

question of suicide/accident/homicide can be solved by them ⁽¹⁾.

In every case of injury all observations must be entered in an accident/incident register with appropriate sketches and diagrams. An accident register is a register maintained in hospitals in which details of examination of the injured person are recorded by the medical officer ⁽²⁾.

Annexure



A similar study done by group of workers in Akola, India has shown that, burns constituted the majority of medico legal cases followed by assault and road traffic accidents. This finding is in contrast to our findings. In their study, majority of the victims were males and majority

of victims belonged to age group 21-30 years followed by 31-40 years ⁽³⁾. These findings are similar to our study findings.

Study done by researchers in Tumkur, India on MLC's has shown that males were the dominant group (67.6%), most victims were in the age

group 21-30 years (45.1%), and road traffic accidents (50.55%) amounted to the majority of MLC's coming to casualty ⁽⁴⁾. All these findings are similar to the present study.

In a study done in Jamnagar, India, male cases (72.77%) predominated over female cases. The maximum numbers of cases were in the age group of 21-30 years (32.10%). Maximum numbers of cases were of road traffic accidents (31.97%), it was followed by assault cases (24.20%). These findings are similar to the present study ⁽⁵⁾.

A similar study done in rural area of Faridabad, India showed, males were the dominant group (67.6%). Most of the victims were of the age group 21-30 years (45.1%). These findings are similar to the present study. Poisoning cases had the highest incidence in relation to the cause of admission (36.9%). This point is in contrast to the present study ⁽⁶⁾.

Study done by a group of workers in rural Haryana, India showed, maximum numbers of cases were reported in the age group of 21-30 years followed by 31-40 years. In respect to gender distribution, 148 were male as compared to 54 female. These findings are similar to the present study. Maximum cases reported were of poisoning (84) followed by road traffic accident (74). This is in contrast to the present study ⁽⁷⁾.

The common point in our study and the above mentioned studies is most of the victims were males and most of the victims were belonging to age group 21-40 years. The possible reason for the same in our country can be that males compared to females may be sole bread winners of the family and may be employed in more dangerous works which may lead to accidents/incidents. People in their youth also tend to travel more and take more risks compared to young or elderly hence the statistics pertaining to Medico legal cases may show more number of youth.

Proper maintenance of records pertaining to medico legal cases will make the job of the doctor easy in court. Duty doctors and medical officers should not shy away in seeking help from Medico legal experts pertaining to medico legal cases. It is best to play safe by following the guidelines put forth by Honourable Supreme court while treating a medico legal case⁸.

Conclusion

Maintenance of medico legal records may be difficult in rural areas but KVG Medical college hospital is doing a very good job at it. The department of Forensic Medicine & Toxicology works closely with the Emergency department so that Medico legal cases are aptly handled. The following conclusions can be drawn from the data collected.

- Majority of medico legal cases involved male sex.
- Majority of medico legal cases involved age group 21-40 years.
- Majority of medico legal cases were RTA's.
- Majority of the victims of RTA's were involved in 2 wheeler accidents.
- Most common manner of poisoning was suicidal.

References

1. Vij K. Textbook of Forensic Medicine and Toxicology. 5th Ed. New Delhi: Elsevier; 2011: p.448
2. Parikh CK. Parikhs's Textbook of Medical Jurisprudence, Forensic Medicine and Toxicology. 6th Ed. New Delhi: CBS publishers; 1999: p.4.56
3. Hussaini SN, Kulkarni CS, Batra AK. Profile of medico-legal cases coming to casualty of Government medical college, Akola. Journal of Forensic Medicine, Science and Law. 2013 jul-dec; 22(2)
4. Raju K, Hemanth Raj MN. Profile of Medico-legal cases at tertiary care centre. International journal of recent trends in science and technology. 2015 May; 15(1): p.68-70
5. Trangadia M, Mehta R, Rada N, Gupta B.D. Profile of medico-legal cases in tertiary care hospital in Jamnagar, Gujarat: Retrospective study of one year. JRMD. 2014 Oct-Dec; 2(4): 57-62
6. Yadav A, Singh N.K. Pattern of Medico-legal cases in rural area of Faridabad, Haryana. J Indian Acad Forensic Med. 2013 Jan-Mar; 35(1): p.60-62
7. Malik Y, Chawla R, Sharma G, Malik P, Rajendra. Profile of Medico-legal cases in casualty of a rural Medical college of Haryana. J Indian Acad Forensic Med. 2013 Oct-Dec; 35(4): p.367-368.
8. <http://judis.nic.in/supremecourt/imgs1.aspx?filename=7839> Accessed on 14/07/2016