

Current Trends in Wound Fabrication at Rahim Yar Khan

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ABSTRACT

Objectives: To study the prevalence of wound fabrication in Rahim Yar Khan, to assess the mode of its infliction and pattern / distribution of fabricated wounds and relations of fabrication to age and sex of injured and to suggest measures to minimize the magnitude of this sin.

Methodology: It is an observational study where the reports by the District Sanding Medical Board were compared with 1st report of injury in all the challenged injured cases of medicolegal nature in the calendar year 2010 in Rahim Yar Khan.

Results: Total No. of medicolegal cases in 2010 in District Rahim Yar Khan is 7706. Only 277(3.59%) cases were challenged. Only 103(37.18% cases could be examined. The fabrication proved in 37 (37.92%) cases only. The most common fabricated wounds were incised, and the trends towards the involvement of long bone, nasal bone and firearm injuries were found towards rise, while the involvement of small bones of hands were relatively low (18.91%) in comparison to the data of the previous such studies. The main accused for creation of the fabricated wounds were found to be paramedics / hospital staff.

Conclusion: Most of the fabricated wounds were on scalp and sharp in nature (27.02%). Fractures of ulna(13.51%), nasal bone (8.10%) and teeth were fairly common. Trends towards friendly fire arm injuries on calf & buttocks was also on rise (8.10%).

Key words: Wound fabrication, Friendly hand, Paramedics, Quacks

INTRODUCTION

The element to rule over the others is an in born human instinct and often misleads the human to the criminal path ways. At situation where he found himself incapable of fulfilling his lust of over powering the others, he tends to adopt the false means, through which he wants to gain the sympathies of law and justice by deception. This is the situation where he produces false fabrication wound on his body/on his friends and blames the enemy for being culprit. Fabrication could be self inflicted, self suffered/friendly handed, Accidental injuries correlated to crime and change the nature and depth of the wounds by afterward manipulation.

Intention of the fabricator:

1. Alleged the enemy falsely.
2. To pose himself innocent by creating defense wound.
3. To destroy / alter the evidence by changing the nature of the wound.

MATERIAL & METHODS

This is an observational study conducted at Sheikh Zayed Hospital Rahim Yar Khan in collaboration with Forensic Department of Sheikh Zayed Medical College Rahim Yar Khan. The data resources

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included the medicolegal records of all the injuries, where the primary medicolegal certificates were challenged either by the accused or by the aggrieved party.

- The FIR of the cases.
- The 1st injury reports.
- Detail investigations including X-rays, C.T. Scan, MRI, reports from Histopathologist/ Bacteriologist.
- Available circumstantial evidences including clothes.
- Personal interview of the 1st examiner & the injured where needed.

Diagnostic criteria to label a wound as fabricated wound:

Established characteristics present in a wound like superficial nature, parallel to each other, multiple in number, at approachable sites and non vital parts. Discriminations in description regarding nature of the wound and its weapon in FIR and in wound appearance. Lack of coordination between insult to the clothes and site of injury on the body. Willful non appearance of the injured and non production of records by the police for three consecutive times.

RESULTS

The total no. of medicolegal cases in Rahim Yar Khan in calendar year 2010 were 7706. Out of these only 277(3.59%) were challenged. In 174(62.81%) re-examination could not be possible either because of

non completion of 1st examination report by the concerned doctor or non production of injured / his record by the police. Only 103(37.18%) could be examined. Out of the examined cases, fabrication could not be proved in 66 cases (64.7%) while the false nature was proved in 37 cases (35.92%) only. The split up of these 37 cases was:

1. 7(18.91%) cases were on scalp, incised in nature and of varying depth.
2. In 5(13%) cases teeth were involved and 7(18.9%) with small bones of the hands & feet
3. In 5(13.51%) cases with fracture of long bones.
4. In 3(8.10%) cases with fracture of nasal bone.
5. 3 cases were friendly fire arm (8.10%).
6. 1 case was peritoneum deep injury caused falsely by quack (2.70%).
7. In 3 cases the accidental injuries were tried to be correlated with the crime (18.10%).
8. In 3 cases teeth were involved (8.10%).

The accused for causing these false wounds were paramedics 13(35.13%) cases, other hospital staff 17(45.94%) and relatives 7(18.91%) cases.

The most common age group involved as injured were of 20 to 40 years (72.97%).

Age	=n	%age
Less than 20 years	03	8.10
20—40 years	27	72.97
40—60 years	05	13.51
60 years & above	02	15.40

The Trends of Fabrication wound

Nature of injury	=n	%age
Incised	7	18.91
Bruises	0	0
Laceration	0	0
Firearm	3	8.10
Nasal bone Fracture	3	8.10
Small bone fracture	7	18.91
Long bone fracture	5	13.51
Peritoneal deep injury	1	2.70
Accidental injuries posed as homicidal	3	8.10
Teeth injury	3	8.10

DISCUSSION

By definition wound is the disruption of the continuity of the tissues, wound could be sub typed as mechanical, burns, firearms, explosive and accidental. Mechanical wounds have been sub divided as abrasions, bruises, contusions, lacerations and sharp wounds while burns have been sub classified as dry burns, scabs, electrocutions and chemical injuries. The classification of the wound from the medicolegal angle could be suicidal, homicidal & accidental and fabricated.

Out of all these wounds the special injury which is produced with the mal intention to accuse some

one else is labeled as fabricated injury or false wounds. These are the problematic injuries of medicolegal importance and mislead in the delivery of justice. These fabrications occur because of multiple factors including deterioration of moral values, increasing crime rates, massive monetary corruption, poor knowledge and testing of forensic experts and opaque moral characters of the agencies involved including the doctors, police officials and judiciary. This issue has massive ill health effects both physical and psychological social on the society and needs to be addressed at priority.

There has been very little research on this angle of the injuries specially in our country, so not much data was available for the comparison. However the results of our study are almost consistent with the one conducted in the Districts of Larkana, Kashmore, Naseerabad and Ghotki. At Chandka Medical College in 2009 and a few other studies in India except the new dangerous and trends of involving the long bones, peritoneal deep injuries and firearm injuries caused by Fabrication.

Suggestion: The issue needs to be massively studied by a core group comprising of the Medicolegal experts, police investigating officers and the lawyers who could suggest to modify the existing laws (Hadood Ordinance) crime scene joint investigation by forensic experts and police.

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