

## Profile of Homicidal Deaths in Jamnagar Region

Alpesh B. Bambhaniya<sup>1</sup>, Mehul C. Upadhyay<sup>2</sup>

### Abstract

Wilful killing of human being as result of conduct of the other human found in all civilization. In spite of all available law there is increase rate of homicidal death day by day due to modernization, life style change, industrialization etc. No matter what is the pattern of homicide but object for these are financial conflict, love affair, revenge, arguments and property conflict. This study done from Jan 2013 to Dec 2015 for a period of 3 years in the forensic and toxicology department M.P. Shah Govt. Medical College, Jamnagar studied in various aspect like vulnerable age group, sex, time of death, seasonal variation, survival period, type of injury, organ involvement etc. This study we found that homicidal deaths incidence was 2.25% of autopsies and male to female ratio was 2.4:1 and most affected age group was 3<sup>rd</sup> decade constituted 35% of cases. In 13.75% of cases police did not suspect homicide prior to autopsy. Maximum homicides took place at victim's residence (28.5%) and remote from public (23.75%). The main motive was financial conflict (26.25%). Physical assault by sharp weapon injuries (45%) was the commonest pattern followed by blunt weapon injuries (27.5%) and 63.75% of victims died on the spot. The common site of body part involved was chest region (26.25%) followed by head and face (21.25%) injuries. The most common cause was haemorrhagic shock followed by asphyxia.

**Keywords:** Homicidal Death; Cause of Death; Survival Period; Sharp Weapon.

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### Introduction

There is blinking headlines about the rising incidence of social crimes and violence taking place in different parts of the country especially in cities areas. Level of violence in the society reflected by homicidal rate per year. Wilful killing of one human

being by another human being is homicide [1-4]. Homicide is grave crime against society and is as old as origin empire and is one of the leading causes of unnatural deaths [2-3]. To commit murder, two elements ("Mens rea" which means preplanning or afore thought and "Actus reus" which means the actual execution) should work together to constitute the crime [3,4]. The various patterns of homicidal deaths include physical assault by sharp weapon, blunt weapon, firearms, strangulation, burns, poisoning, homicidal hanging, smothering, drowning, etc. The rate homicide is increasing worldwide and the pattern is also changing because of modernization, increased population, life style, modern needs of the man and easy availability of various type of weapons [2-4].

Considering this increased frequency of such deaths and its impact on the society, the present study is carried out so as to find the most vulnerable age group, sex incidence, motive, pattern of

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**Authors Affiliation:** <sup>1,2</sup>Assistant Professor, Dept. of Forensic Medicine, M.P. Shah Govt. Medical College, Jamnagar, Gujarat 361008, India.

**Corresponding Author:** Mehul C. Upadhyay, Assistant Professor, Dept. of Forensic Medicine, M.P. Shah Govt. Medical College, Jamnagar, Gujarat 361008, India.

**E-mail:** dralpeshb@gmail.com

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homicide, place of occurrence of crime, period of survival, and an attempt is also made to throw light on cases which were brought with history of suicidal, accidental or natural deaths but which were registered later as homicidal deaths by the police based on autopsy report and investigation during the study period. It's very challenging for police and investigating agencies to know the exact nature of incidence and for judiciary to punish the actual guilty accused.

### Material and Methods

This study done from Jan 2013 to Dec 2015 for a period of 3 years in the Forensic Medicine & Toxicology Department, M.P. Shah Govt. Medical College, Jamnagar. All the cases brought to the dept for medico legal autopsy with alleged history of homicide and also the cases which were later registered as homicide were studied. Police and accompanying person of the victims of the homicidal death were asked for the general information like age group, time of death, survival period, hospitalization, detail of incidence, type of weapon etc. The information about the time since death, type of fatal injuries, cause of death, body part and organ involvement etc were noted during post mortem finding. All data of alleged history and post mortem findings were collected and filled in the performa and analyze.

### Observation and Discussion

During this study total 3542 autopsies were conducted, of which homicidal deaths constituted 80 cases (2.25%). In present study incidence of homicide in year 2013 was 2.35% which decrease from 2.31 in 2014 to 2.1% in 2015. There is no any definite correlation between number autopsies and homicidal death per year [Table 1].

Most affected age was between 21-30 (35%) followed by 31-40 (27.5) least common in extremity of age, highest incidence in the 21-30 age groups were due to stress, marriage disputes, love affairs, infidelity unemployment and dowry. Male to female ratio was 2.4:1 higher on male side is due to stress, unemployment, gang rivals were the reasons in males. Similar findings were observed in the most of the studies [5-14]. In this studies the most of the victims belonged to the age group 21-30 years and is in contrast to the observation made by by Mohanty et al. [15] where most of the victims belonged to 31-40 years, by Wahlsten et al. [16] belonged to 30-39 years and by Kominato et al. [17] where

most of the victims belonged to 50-59 years. Males constituted more than half (71.25%) of the victims which can be due to the aggressive nature and stress of male than females. Similar observation made by most of authors [8,9,12,13,17] while in a study conducted by Mohanty et al. [18] male to female ratio of the victims was 1:1. [Table 2].

Maximum number of cases were seen in summer 51.25%. this is due to festival, marriage and family gathering. Similar findings observed in the study conducted by [5-10,19] [Table 3].

Maximum number of the homicides took place in the evening (38.75%) and late night (15%) which can be attributed to the factors like night fall or in darkness the chances of assailant being recognized is reduced, at evening and night family and friends gathering are high. A similar observation made in studies conducted by Shah P et al. [5], Vinay et al. [8], Angam et al. [9] and Prajapati et al. [19] where as in study conducted by Nayak et al. [10] and Aggrawal et al. [20] maximum number of cases (26.9%) occurred during noon [Table 4].

Most of the victims (82.5%) died on the spot. This could be due to weapon lethality and determination on the part of assailant to kill the victim, since most of these cases were premeditated [Table 5].

Of the 80 cases in the study, 61 cases (76.25%) were registered as homicides at the time of autopsy. 6 cases (7.5%) were registered as accidental deaths as the victims were found dead by the road side or by the railway tracks with injuries and in 4 cases the reasons were the history of natural death and absence of external injuries lead them to register it as natural death and in 8 cases the investigating officer suspecting foul play based on the alleged history by the deceased relatives or the injuries present on the body but later upon autopsy were registered as homicides, which indicates the importance of scene examination and meticulous autopsy. In a study done by Bamdale et al. [21] police did not suspect homicide prior to autopsy in 2.5% of the cases. [Table 6].

Maximum number of victim (28.75%) were died at their residence only, which implies that these homicides were mostly premeditated as the assailants were aware of the victim's routine and followed by remote from public place in 23.75% of cases which were due to revenge murders and arguments arising while under the influence of alcohol followed by those in shared residence which were mostly infidelity related. This study is similar to the study conducted most of the authors [6-9,13,20]. where in desert area or place close to agricultural side was place of occurrence

in majority of homicides accounting for 46.2% and Mohanty et al. [18] majority of homicides took place out doors. [Table 7].

In most of the homicides (30%) the motive was any form of revenge. Financial conflicts were responsible for the 18.75% of homicides, most of them occurring in the domestic homicides and dowry related. Similar observations were made by Vinay et al. [8], Prajapati et al. [19] where in the main motives were conflicts (23.1%) and revenge (23.1%) Mohanty [18], where in the revenge (29.2%) was the commonest motive followed by argument (17.1%) and is in contrast to studies conducted by Bamidale et al. [21] and Gangale et al. [22] where in the argument was the most frequent cited circumstance among those that were known. [Table 8].

In most of the cases alleged accused was the near relative. Least number of homicides was committed by strangers (7%) for the robbery or argument. This is similar to observations made by Vinay et al. [8] and Mohanty [18] while contrast to Wahlsten et al. [16], where in the stranger committed maximum number of homicides. Death due to sharp weapon injuries (45%) was the commonest pattern followed by blunt weapon injuries (27.5%) which can be due to the easy availability of various sharp weapons.

Most of the sharp weapon injuries were planned and mainly involved in revenge or love affairs whereas most of the blunt weapon injuries were unplanned and assailants used the blunt weapon available at the scene of occurrence. 5 (6.25%) cases were of asphyxia death. Only 3 (3.75%) cases were due to fire arm injury as the law in India is strict as compared to western countries where gun licensing is taken easily. This study is in similar to the studies conducted by Wahlsten et al. [16] where in sharp weapon injury was the most common cause of death (39%), Buchde et al. [12] where in sharp weapon injuries accounted for 57.4% of homicides and is in contrast to the studies by Kaminato et al. [17], where in Firearms were the most common means used for homicides [Table 9].

The common site of body part involved was chest region (26.25%) followed by head and face (21.25%) injuries this site are the common as they are easily assessable and injuries to them cases fatal injuries to vital organs. Similar findings were observed by most of the author [6,7,9,14] While in Kaminato et al. [17], Aggrwal et al. [20] and Ghangale et al. [22] head and face involve more than 1/4<sup>th</sup> cases followed by chest. [Table; 10, 11]

**Table 1:** Year wise distribution of case

Sr. No.	Year	Cases	%	Total Autopsy
1.	2013	27	2.35%	1147
2.	2014	24	2.31%	1166
3.	2015	29	2.1%	1229
	Total	80		3542 (2.25%)

**Table 2:** Age and Sex wise distribution of case

Sr. No.	Age	Male	Female	Total	%
1.	0-10	0	2	2	2.5%
2.	11-20	3	1	4	5%
3.	21-30	22 (27.5%)	6 (7.5%)	28	35%
4.	31-40	17	5	22	27.5%
5.	41-50	10	7	17	21.5%
6.	51-60	3	2	5	6.25%
7.	>60	2	0	2	2.5%
	Total	57 (71.25%)	23 (28.75%)	80	100%

**Table 3:** Season wise distribution of case

Sr. No.	Season	Cases	%
1.	Summer	41	51.25%
2.	Rainy	21	26.25%
3.	Winter	18	22.5%
	Total	80	100%

**Table 4:** Season wise distribution according to time of day

Sr. No.	Time	Cases	%
1.	Morning	6	7.5%
2.	Noon	15	18.75%
3.	Evening	31	38.75%
4.	Late night	12	15%
5.	Not known	16	20%
	Total	80	100%

**Table 5:** Distribution of case according to survival period

Sr. No.	Season	Cases	%
1.	Spot death	51	63.75%
2.	<12 hrs	12	15%
3.	12-24 hrs	6	7.5%
4.	1-2 days	3	3.25%
5.	2-3 days	3	3.25%
6.	3-7 days	2	2.5%
7.	7-30 days	1	1.25%
8.	>30 days	2	2.5%
	Total	80	100%

**Table 6:** Distribution of cases according to alleged history

Sr. No.	History	Cases	%
1.	Homicide	61	76.25%
2.	Accidental	6	7.5%
3.	Suicide	1	1.25%
4.	Natural	4	5%
5.	Suspicious	8	10%
	Total	80	100%

**Table 7:** Distribution of cases according to place of incident

Sr. No.	Place	Cases	%
1.	Remote from public place	19	23.75%
2.	Public place	2	2.5%
3.	Open field	11	13.75%
4.	Dumping area	3	3.75%
5.	Highway side	8	10%
6.	Around victim house	23	28.75%
7.	Unknown	14	17.5%
	Total	80	100%

**Table 8:** Distribution of cases according to motive

Sr. No.	History	Cases	%
1.	Revenge	24	30%
2.	Argument	6	7.5%
3.	Property Dispute	7	8.75%
4.	Love affair (Infidelity)	11	13.75%
5.	Financial conflict	15	18.75%
6.	During robbery	3	3.25%
7.	Psychological	2	2.5%
8.	Not Known	12	15%
	Total	80	100%

**Table 9:** Distribution of cases base on type of weapon

Sr. No.	Type of Weapon	Cases	%
1.	Sharp	36	45%
2.	Hard & Blunt	22	27.5%
3.	Sharp + Hard & Blunt	6	7.5%
4.	Asphyxia	5	6.25%
	Ligature Strangulation	2	2.5%
	Manual Strangulation	1	1.25%
	Drowning	1	1.25%
	Smothering	1	1.25%
	Hanging	0	0%
5.	Asphyxia + Sharp	2	2.5%
6.	Firearm	3	3.75%
7.	Burns	1	1.25%
8.	Not Known	1	1.25%
	Total	80	100%

**Table 10:** Distribution of cases base on body part involved

Sr. No.	Body part	Cases	%
1	Only Head & Face	17	21.25%
2	Only Neck	12	15%
3	Only Chest	21	26.25%
4	Only Abdomen	14	17.5%
5	Chest+Abdomen	7	8.75%
6	Extremity	3	3.75%
7	Multiple	6	7.5%
	Total	80	100%

**Table 11:** Distribution of cases base on organ involved

Sr. No.	Organ	Cases*	%*
1	Brain	23	28.75%
2	Larax & Deep Neck	18	22.5%
3	Lung	28	35%
4	Heart	12	15%
5	Spleen	3	3.75%
6	Liver	11	13.75%
7	Kidney	8	10%
8	Major Vessels	12	18.75%
9	Other	9	11.25%

\* = Multiple response

### Conclusion

Homicidal deaths constituted 2.25% of autopsies conducted. Maximum number of homicides occurred in the age group 21-30 years in both sexes constituting 35%. 13.75% of the cases were registered as homicides after the opinion of the autopsy surgeon, which were brought as accidental, suicide or natural deaths and another 10% of the cases were also registered as homicides after the autopsy where the police officer was suspecting a foul play or suspicion. Maximum homicide took place at the victim's residence (28.75%) and remote area (23.75%). The main motive behind the homicide was revenge (30%). Maximum numbers of homicides were committed by relatives (47%). Sharp weapon injuries (45%) were the commonest pattern followed by blunt weapon (27.5%). Most of victims (67.75%) died on the spot. Fatal injuries were mostly on chest (26.25%) followed by head (21.25%) Lung (35%) and brain (28.75) involved in more than 50% cases.

For improving the homicidal death rate in the community the affected age group should be taken care, most of affected victims were in 21-30 years age this group of people have the problems of like unemployment, education and social status. The local authorities, government and NGO should provide proper employment opportunities among youth in this community. The affected youth should be proper council and teach about how to handle the stress and increase the tolerance to overcome any problems. Family, friends and marital dispute should be solve by giving guidance by an appropriate counsellor. Government and NGO should be trained to social problems of their locality which are lead to violence at home and should be teach to overcome of that problems. Law and order situation should be maintained for antisocial activity and possession of weapons.

In the Indian setting the investigating officer, the forensic expert, pathologist and the judiciary system work individually and not as in the western countries where the all unit is constituted in investigation who share their knowledge in solving a crime. Thus investigating officer should work along with the forensic expert and pathologist in solving homicides. There should be Psychological counselling centres for criminals and psychiatric criminals.

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