

Profile of Medico Legal Cases in Hamdard Institute of Medical Institute and Associate Hospital New Delhi

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Abstract

The causality department plays a vital role in treating in emergencies as well as in handling of legal implications of the cases. Common medico legal cases include alleged cases of assault, road traffic accidents, burns, poisoning, industrial accidents etc. In present study 925 medico-legal cases were reported to the causality department of Hamdard institute of medical science New Delhi during the period from 1st January 2014 to 31 December 2014. Study shows maximum number of cases were of physical assault (46.05%) followed by road traffic accidents (27.56%) and poisoning (8.97%) with over all male predominance (67.46%) and most vulnerable age group being 21-30 years (39.89%) followed by 31-40 years (22.38%). These can be prevented by strict enforcement of law and order, proper education and awareness of road safety measures. Training of doctors who are involved in handling of medico legal cases is needed.

Keywords: Medico Legal Cases; Casualty; Incidence.

Introduction

Medico-legal case is a case of injury/illness where the attending doctor, after eliciting history and examine the patient, thinks that some investigation by law enforcement agencies is essential to establish and fix responsibility for the case in accordance with the law of the land [1,2]. Common medico-legal cases include alleged cases of assault, road traffic accidents, burns, poisoning, snake bite, insect bite, industrial accidents, alcohol intoxication etc. Medico-legal cases are an integral part of medical practice in emergency departments of major hospitals [3]. Profiling of medico-legal cases is an integral aspect for the prevention of preventable causalities in future and study the crime rate and pattern of crimes in that area.

Objectives

1. To study the Pattern of medico legal cases.
2. To study the epidemiology of such cases.

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Method

The present study was retrospect analysis of all Medico-legal cases came to casualty department of Hamdard medical institute of medical science and research, associated hospital, New Delhi from 1st January 2014 to 31 December 2014. A total of 925 cases were included in the study and the cases with no medico-legal prospective were excluded from the study. Information regarding gender, age, demography and manner of causation was collected from the medico-legal register. The collected data was analysed, observations discussed and compared with other studies.

Observations and Results

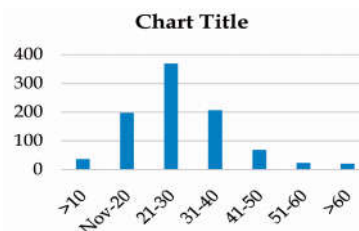


Chart 1: Age wise distribution of cases

Table 1: Age wise distribution of cases

S. No.	Age in years	No. of cases	Percentage (%)
1.	1-10	37	4
2.	11-20	198	21.41
3.	21-30	369	39.89
4.	31-40	207	22.38
5.	41-50	69	7.46
6.	51-60	24	2.59
7.	>60	21	2.27

Table 1 shows that maximum number of cases belongs to the age group of 21- 30 years followed by 31-40 years.

Table 2: Sex wise distribution of cases

S. No.	Sex	No. of cases	Percentage
1.	Males	624	67.46
2.	females	301	32.54

Table 2 shows the overall male predominance

Table 3: Pattern of cases

S. No.	Pattern of cases	No. of cases	Percentage
1.	Physical assault	426	46.05
2.	Rta	255	27.56
3.	poisoning	83	8.97
4.	unknown	31	3.35
5.	Hanging	30	3.24
6.	Fall from height	30	3.24
7.	Self inflicted	17	1.84
8.	Fall of heavy object	16	1.73
9.	Electrocution	15	1.62
10.	Domestic violence	11	1.18
11.	Self fall	5	0.54
12.	Burn	3	0.32
13.	Sexual assault	2	0.22
14.	Drowning	1	0.11

Table 3 shows that physical assault cases account for maximum number of MLC cases, followed by road traffic accidents and poisoning

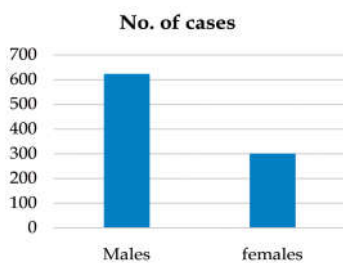


Chart 2: Sex wise distribution of cases

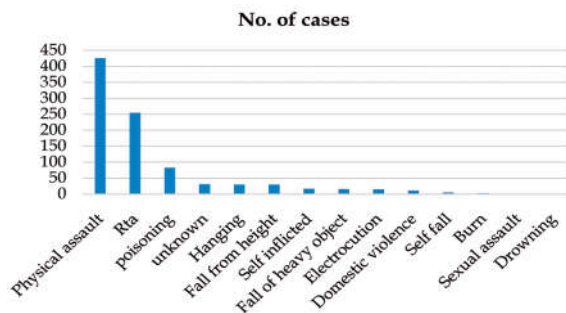


Chart 3: Pattern of cases

Discussion

In present study 925 cases were reported to the casualty department of Hamdard Institute of medical college and associated hospital New Delhi. During the period from 1st January 2014 to 31st December 2014. Study showed maximum number of cases were males (67.46%) as compared to females (32.54%). Similar finding were reported by Malik et al [4], Garge et al [5] and Dileep et al [3] this is to the fact that males are more involved in outdoor activities and ambulatory compared to females, so this makes them more vulnerable to accidents or injuries.

In this study majority of cases were from age group between 21-30years (39.89%) followed by 31-40 years (22.38%. similar finding were also reported by Garg et al [5], Sahadev et al [6], Harish et al [7], Sharma et al [8], Timsinha et al [9], Yadav et al [10] and Dileep et al [3]. As individuals of these age groups lead more active life, involve in outdoor activities, sports and recreation activities, there by exposing themselves to environmental factors.

In our study maximum number of medico-legal cases were due to were due to physical assault followed by road traffic accidents, poisoning. This is inconsistent with the studies conducted by Garg et al [5], Harish et al [7] and Dileep et al [3], in which road traffic accidents was most common cause followed by assault, mechanical injuries and poisoning.

In our study 3.35% cases were brought dead and or unconscious state and history given was insufficient to reveal the cause or manner of injury. In these cases even after the general examination, the cause and manner of death remained obscured.

Conclusion

The casualty department of any hospital not only caters to the needs of patients who reports in emergencies but also carry out legal responsibilities to examine, document and certify medico legal cases. This puts a lot of burden on causality department and on first contact doctor. The doctor those are involved in handling medico-legal cases need to be more trained.

Most of the time first contact doctor in causality is MBBS only. They are not experts in handling medico-legal cases so there is a need to increase time in practical training of the students during MBBS in the curriculum. The 15days posting under forensic medicine department during internship should be

mandatory for better exposure to medico-legal cases. Also, due to increase in violence and accidents, the need for round the clock availability of medico-legal experts is the need of the hour. This will provide great help to the law enforcing agencies, will safeguard the hospital from wrong or poor documentation and also will share the burden of work of causality doctors as documentation and certification of medico legal cases is a responsible and hectic job.

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