Real Medical Cause of Death

# Article Suspected Medico legal Cases Turned out to Be Real Medical Cause of Death

Ejaz Ahmed Awan<sup>1</sup>, Pardeep Kumar<sup>1</sup> and Abrar-ul-Hasnain Memon<sup>2</sup>

### ABSTRACT

**Objective:** The purpose behind this study was to determine the real medical cases among all autopsies performed on the basis of suspected medico legal cases at Peoples Medical College Hospital, Nawabshah, and Sindh, Pakistan. **Study Design:** Prospective observational study.

**Place and Duration of Study:** This study was conducted at the Department of Forensic Medicine, tertiary care Peoples Medical College Hospital Nawabshah Sindh Pakistan. From January 2014 to December 2018.

**Materials and Methods:** The prospective observational study has been conducted through a convenience sampling technique on autopsied 134 males and females between the periods of four years from 2014 to 2018 to observe the real medical cause of death such as cardiovascular or cereberovascular to fill the statistical gap present at our area of a tertiary care Peoples Medical College Hospital, Nawabshah, Sindh, Pakistan. Ethical consent was taken from family member and hospital before doing autopsy and use of its findings for study purpose. A structured questionnaire was used to collect the objective specific data and we used SPSS version 21 for data entry and analysis.

**Results:** Our study has male predominance (77.61%, N = 104 / 134) with more autopsied were performed in rural areas (85.52, N = 115 / 134). The mean age of the autopsied performed was  $41.31 \pm 13.51$  years and the age ranges between 20 to 60 years. The prevalence of medical cause of death was 60.44% (N = 81 / 132). The most common cause of death was due to cardiovascular disease (69.13%, N = 56 / 81) and cereberovascular disease (20.98%, N = 17 / 81).

**Conclusion:** Besides medico legal causes of deaths ascertained during autopsy, the burden of actual medical causes of deaths which were suspected as medico legal cases impose a huge burden. Hence, suspected medico legal cases most often turned out to be actual medical cause of death that our study findings have shown.

Key Words: Autopsy findings, Medical Cause of Death, Pakistan

# Citation of article: Awan EA, Kumar P, Memon AH. Suspected Medico legal Cases Turned out to Be Real Medical Cause of Death. Med Forum 2019;30(11):24-26.

## **INTRODUCTION**

Medico legal cases are the most important and least documented form in the field of medical sciences that is why the actual burden and consequences from these cases are limited worldwide and very few studies are available in developing countries Including Pakistan<sup>1,-2</sup>

<sup>2.</sup> Department of Forensic Medicine & Toxicology, Liaquat University of Medical & Health Sciences, Jamshoro Sindh Pakistan.

Correspondence: Dr. Ejaz Ahmed Awan Associate Professor & Chairman Forensic Medicine & Toxicology, Peoples University of Medical & Health Sciences for Women Shaheed Benazir Abad Sindh Pakistan. Contact No: 0332 2840244 Email: forensicawan@outlook.com

Received:	July, 2019
Accepted:	September, 2019
Printed:	November, 2019

Sometimes, these suspected medico legal cases are turned out to be true medical diagnosis due to false allegations or selfish desire of interest to take money from the people. In a nation, where crime ratio is higher due to illiteracy and poor socioeconomic background people most often blame other persons to gain some money from them but such cases are exposed during autopsy<sup>3-5</sup>.

The documented causes of medico legal cases in Pakistan is still unknown but in a study published in Pakistan has shown that more than 40% of the medico legal cases are caused by road traffic accident while blunt trauma and physical assault were less common 32% and 19%, respectively<sup>6-7</sup>.

Deaths from poison, snake bite, scorpion bite, sudden cardiac deaths, and deaths from cereberovascular accidents causes suspicion in a family that person is killed rather died from other cause. These types of statistical observations are limited and no study has been conducted in Pakistan which shows true burden of medico legal causes and medical cause of deaths during autopsies performed. That is why this study has been conducted to fill the scientific gap and ascertain how

<sup>&</sup>lt;sup>1.</sup> Department of Forensic Medicine & Toxicology, Peoples University of Medical & Health Sciences for Women Shaheed Benazir Abad Sindh Pakistan.

much of the suspected medico legal has been turned out to be medical causes of natural deaths.

#### MATERIALS AND METHODS

This study is a prospective observational study which was conducted through a convenience sampling technique on autopsied 134 males and females between the periods of four years from January2014 to 2018 December in a tertiary care hospital of Nawabshah, Peoples Medical College Hospital in a Department of Forensic Medicine.

### RESULTS

The mean age of the autopsied performed was  $41.31 \pm 13.51$  years and the age ranges between 20 to 60 years. Among all the 134 autopsies performed mostly the autopsied persons were belongs to rural areas (85.52, N = 115 / 134) and among them most of them were males (77.61%, N = 104 / 134), shown in Chart number 1 &2.



Figure No.1: Gender Wise Distribution of Study Subjects (N = 134)

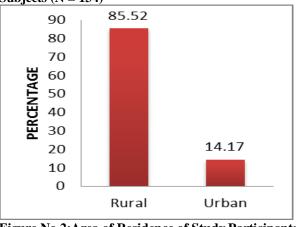


Figure No.2:Area of Residence of Study Participants (N = 134)

The main objective behind conduction of this study was to evaluate the determine the real medical cases among all autopsies performed on the basis of suspected medico legal cases at Peoples Medical College Hospital, Nawabshah, Sindh, Pakistan. Interestingly 60.44% (N = 81 / 132) autopsied persons were died from real medical causes rather than medico legal cause Chart 3. Among them, the most common cause of death was due to cardiovascular disease (69.13%, N = 56 /

81) and cereberovascular disease (20.98%, N = 17 / 81). Descriptive statistics shown in Table No. 1.

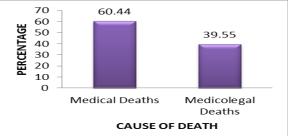


Figure No.3: Prevalence of Medical Cause of Deaths (N = 134)

Table No. 1: Clinical Spectrum of Autopsied Bo	dies
(N = 81)	

Medical Causes of Deaths	Percentage	Number
Cardiovascular Disease	69.13	56
Cereberovascular Disease	20.98	17
Respiratory Disease	6.17	5
Kidney disease	3.7	3
Miscellaneous	2.46	2

## DISCUSSION

Any case of injury or ailment where some criminality is involved is called a Medico Legal Case (MLC). A medico legal case is where a person is injured or harmed in any way and needs medical attention for it. That is why; sometimes people use medical cases and file a case against someone to gain some ransom. The actual burden of medico legal cases in Pakistan is still unknown but some of the smaller local studies have shown scattered data from different areas of Pakistan<sup>8,9</sup> In our study we have observed mean age of the autopsied performed were  $41.31 \pm 13.51$  years and the age ranges between 20 to 60 years. Among all the 134 autopsies performed, mostly the autopsied persons were belongs to rural areas (85.52, N =  $115^{-1}/134$ ). Our study's mean age showed that most of the persons belonged to middle aged population and higher number of autopsies performed from rural area represents people were not so illiterate and belongs to socioeconomic backgrounds. The findings of our study are similar to the findings shown in both international and national data published 10, 11

The main objective behind conduction of this study was to evaluate the determine the real medical cases among all autopsies performed on the basis of suspected medico legal cases at Peoples Medical College Hospital, Nawabshah, Sindh, Pakistan. Interestingly 60.44% (N = 81 / 132) autopsied persons were died from real medical causes rather than medico legal cause. The reason behind false accusation could be due to they want some money from them. But there is no study has been conducted in Pakistan or even internationally to compare our findings with them.

Worldwide cardiovascular diseases are considered to be responsible for approximately 17 million deaths every

#### Med. Forum, Vol. 30, No. 11

year and about 25% are sudden cardiac deaths (SCD) <sup>12-14</sup>. Any person who died without any noticeable cause should be evaluated for cardiovascular disease. The similar findings are observed in our study in which we have also observed that the most common cause among such persons were due to cardiovascular disease (69.13%, N = 56 / 81). Previous literature have suggest that in adolescents and young adults (<35 years), the approximate incidence of death is 0.01 per 1000 per year caused by cardiovascular related deaths such as cardiomyopathies, myocarditis, premature coronary artery disease, congenital coronary artery anomalies, and channelopathies. The incidence of SCD then increases, reaching about 1 per 1000 per year in the subjects 35-45 years, 2 per 1000 per year by 60 years, and 200 per 1000 per year in the elderly. This indicates a global burden of cardiovascular disease is a major concern that needed to be accounted on a larger scale particularly in our area based on autopsy findings<sup>15-17</sup>.

### CONCLUSION

Besides medicolegal causes of deaths ascertained during autopsy, the burden of actual medical causes of deaths which were suspected as medicolegal cases impose a huge burden. Hence, suspected medicolegal cases most often turned out to be actual medical cause of death that our study findings have shown.

#### Author's Contribution:

Concept & Design of Study:	Ejaz Ahmed Awan	
Drafting:	Pardeep Kumar	
Data Analysis:	Abrar-ul-Hasnain	
	Memon	
Revisiting Critically:	Ejaz Ahmed Awan	
	Pardeep Kumar	
Final Approval of version:	Ejaz Ahmed Awan	

**Conflict of Interest:** The study has no conflict of interest to declare by any author.

#### REFERENCES

- 1. Niaz K, Shujah IA. Civilian perspective of firearm injuries in Bahawalpur. J Pak Med Assoc 2013;63(1):20-4.
- Yang Q, Zhang C, Hines K, Calder LA. Improved hospital safety performance and reduced medicolegal risk: an ecological study using 2 Canadian databases. CMAJ Open 2018;6(4):E561-E566.
- 3. Byrne P, Todd NV. The timing of surgery may influence causation in medicolegal cases. Br J Neurosurg 2017;31(6):749-50.
- Muniraman H, Cascione M, Ramanathan R, Nguyen J. Medicolegal cases involving periviable births from a major United States legal database. J Matern Fetal Neonatal Med 2018;31(15):2043-9.

- Jina R, Kotze JM. Improving the recording of clinical medicolegal findings in South Africa. S Afr Med J 2016 Aug 2;106(9):872-3.
- Manzoor MA, Hassan N, Ahmed A. The applicability of the Greulich & Pyle Atlas for bone age assessment in primary school-going children of Karachi, Pak. Pak J Med Sci 2014;30(2):409-11.
- Mujtaba G, Shuib L, Raj RG, Rajandram R, Shaikh K, Al-Garadi MA. Automatic ICD-10 multi-class classification of cause of death from plaintext autopsy reports through expert-driven feature selection. PLoS One 2017;12(2):e0170242.
- Fitzmaurice C, Allen C, Barber RM, Barregard L, Bhutta ZA, Brenner H, et al. Global, Regional, and National Cancer Incidence, Mortality, Years of Life Lost, Years Lived With Disability, and Disability-Adjusted Life-years for 32 Cancer Groups, 1990 to 2015: A Systematic Analysis for the Global Burden of Disease Study. JAMA Oncol 2017;3(4):524-48.
- Mustufa MA, Sheikh MA, Taseer IU, Raza SJ, Arshad MS, Akhter T, et al. Trajectory of cause of death among brought dead neonates in tertiary care public facilities of Pakistan: A multicenter study. World J Pediatr 2017;13(1):57-62.
- 10. Maixenchs M, Anselmo R, Zielinski-Gutierrez E, Odhiambo FO, Akello C, Ondire M, et al. Willingness to Know the Cause of Death and Hypothetical Acceptability of the Minimally Invasive Autopsy in Six Diverse African and Asian Settings: A Mixed Methods Socio-Behavioural Study. PLoS Med 2016;13(11):e1002172.
- 11. Loomba RS, Ahmed MM, Spicer DE, Backer CL, Anderson RH. Manifestations of bodily isomerism. Cardiovasc Pathol 2016;25(3):173-80.
- 12. Neef M, Berndt K, Spies C, Laufs U, Metze M. Cardiac arrhythmias in patients with chronic autoimmune diseases. Herzschrittmacherther Elektrophysiol 2019.
- 13. Bob-Manuel T, Jenkins JS, Morin DP. Nonarrhythmic causes of sudden death: A comprehensive review. Prog Cardiovasc Dis 2019; 62(3):265-71.
- Haukilahti MAE, Holmstrom L, Vahatalo J, Kentta T, Tikkanen J, Pakanen L, et al. Sudden Cardiac Death in Women. Circulation 2019;139(8):1012-21
- Zhao D, Post WS, Blasco-Colmenares E, Cheng A, Zhang Y, Deo R, et al. Racial Differences in Sudden Cardiac Death. Circulation 2019; 139(14):1688-97.
- 16. Krokhaleva Y, Vaseghi M. Update on prevention and treatment of sudden cardiac arrest. Trends Cardiovasc Med 2019;29(7):394-400.
- 17. Mitrani RD, Myerburg RJ. Editorial commentary: Ethnic and racial disparities and differences in sudden cardiac death burden and survival: How do we close the gap? Trends Cardiovasc Med 2019; 29(2):127-8.