

Profile Study Of Unknown Dead Bodies Brought For Postmortem Examination At Mortuary Complex Of Sir T. General Hospital, Bhavnagar

Dr. K. S. Lad*, Dr. A. P. Parmar**, Dr. A. D. Modi***, Dr. V.N. Parmar*

*3rd year Resident in M.D. (F.M.), ** Associate Professor & Head, ***Tutor

Department Of Forensic Medicine, Government Medical College, Bhavnagar, Gujarat.364001

Abstracts: Introduction: The aim of this study was to find out the profile of cases of unknown dead bodies, to evaluate the present situation at Bhavnagar region of Gujarat in India. **Material and methods:** A retrospective descriptive study was carried out on 104 cases of unknown dead bodies, brought for postmortem examination at Sir T. General Hospital and Government Medical College Bhavnagar, during the period of April 2010 to March 2013. **Observation:** This study throw some lights on the emerging trends that incidence of unknown dead bodies brought for post-mortem examination is increases in particular season, more in male and most of the victims were from the age more than 60 years. **Conclusion:** In unidentified dead bodies' cause of death are variable. In some instances death due to natural cause may occur, but there are incidences of unnatural death also. [Lad K NJIRM 2014; 5(3) :76-79]

Key Words: Unknown dead bodies, Identification, Bhavnagar.

Author for correspondence: Dr. K.s.Las Department Of Forensic Medicine, Government Medical College, Bhavnagar, Gujarat Pin-364001; Email:ladkamlesh13@gmail.com

Introduction: The current Indian population is estimated to be 1.27 billion which contain many races and cultures coexist within the country. 1.27 billion people living in India are dispersed amongst country with 6.27 crore people living in Gujarat. In Bhavnagar current population is estimated to be 28.77 lacs.¹

The current death rate in India is estimated to be 7.43 deaths/1,000 population². The high death rate as seen in India cannot be attributed unnatural causes alone, as an increase in the natural death rate over the past few years is also observed.

In medicolegal sense it refers to the determination of individuality of a person based on certain physical characteristics, or fixation of personality. The identification of cadavers is key issue in any forensic investigation, but is equally important for ethical, criminal and civil reasons. All human beings have the right to cremation or bury and mourn their loved ones after death, and without identification of a cadaver there are many civil procedures which cannot be completed. Conclusion of a post mortem examination requires that the body is to be identified, so that a death certificate may be issued. This death certificate in turn facilitates the funeral arrangements, burial or cremation of the individual, life insurance benefits, disposition of instructions in the decedent's last will and testament, and matters of inheritance.^{3,4,5,6,7,8,9}

Management of human remains poses a challenge following large natural disaster in early relief and rescue operation phase. Management of human remains becomes even more challenging in absence of any technical guidelines. Consequences of such mismanagement include increased psychological distress for survivors and legal problems affecting inheritance, compensation, insurance.¹⁰

Thus it is important to conduct research into number of unidentified dead bodies in India, who were brought for postmortem examination, in order to estimate the No. of unidentified death on annual basis, to identify demographic characteristics and, to know types of data and efforts which required for determination of identity of a person and to know pattern of cause of death in such cases.

Material And Methods: The materials of the present study comprised 104 autopsy cases, out of total 3436 medicolegal autopsies which were done in the mortuary of Department of Forensic Medicine and Toxicology at Government Medical College and Sir T. General Hospital Bhavnagar during the period from April 2010 to March 2013. The Bhavnagar Medico-Legal Autopsy Admission Register was use to identify cases and retrieve specific research data. In addition, individual case files were examined in order to obtain detailed data related to each individual case. The data

obtained was then recorded on data capture sheets to allow the collection and analysis thereof. In medicolegal autopsies, consent is not required and the doctor can remove from the cadaver anything that is essential for purposes of examination.

Observation:

Table 1 : Distribution Of Cases Of Unknown Dead Bodies According To Year.

Time period	Cases	Percentage (%)
April 2010 to March 2011	37	35.58
April 2011 to March 2012	33	31.73
April 2012 to March 2013	34	32.69
Total	104	100

Table 2: Tribution Of Cases Of Unknown Dead Bodies According To Month And Year

Month	Year				Total	Percentage%
	2010	2011	2012	2013		
January	-	6	2	3	11	10.59
February	-	0	4	1	5	4.81
March	-	2	2	4	8	7.69
April	3	1	5	-	9	8.65
May	2	3	3	-	8	7.69
June	6	2	5	-	13	12.5
July	6	1	1	-	8	7.69
August	1	0	5	-	6	5.76
September	2	6	0	-	8	7.69
October	1	4	3	-	8	7.69
November	5	4	1	-	10	9.62
December	3	4	3	-	10	9.62
Total	29	33	34	8	104	100

Note: January to March months of the year 2010 and April to December months of the year 2013 were not included in this study.

Table 3 :Distribution Of Cases Of Unknown Dead Bodies According To Body Status

Body status	No. of cases	Percentage (%)
Fresh	77	74.04
Decomposed	24	23.08
Skeletonised	3	2.88
Total	104	100

Table 4: Distribution Of Cases Of Unknown Dead Bodies According To The Scene From Where The Body Was Recovered

Scene From Where The Body	No. of	Percentage
Railway tract / ST stand	15	14.43
On road / Side of road	56	53.84
Well /sea sore / River / Pond	17	16.34
Devastated Place / Car	8	7.69
Mountain	4	3.85
Drainage Line	1	0.97
Home	3	2.88
Total	104	100

Table 5: Distribution Of Cases Of Unknown Dead Bodies According To Sex

Sex	Cases	Percentage (%)
Male	89	85.58
Female	15	14.42
Total	104	100

TABLE 6: DISTRIBUTION OF CASES OF UNKNOWN DEAD BODIES ACCORDING TO AGE

Age group	No. of cases	Percentage (%)
0-4	5	4.80
5-9	0	0
10-14	0	0
15-19	3	2.88
20-24	4	3.84
25-29	7	6.73
30-34	14	13.46
35-39	9	8.65
40-44	13	12.53
45-49	7	6.73
50-54	7	6.73
55-59	3	2.88
>60	32	30.77
Total	4	100

Discussion: Unidentified dead bodies brought for postmortem examination comprises a very significant and important role in every autopsy surgeon’s career. These cases really test the skill and expertise of the specialist and the investigative agencies.

In the present study, unidentified dead bodies comprised 3.026% of the total autopsy load of the

Department of Forensic Medicine during the period under consideration.

Table 7: Comparison Of Unknown Dead Body Cases Month Wise

Month	Ajay Kumar (1 year study) %	Present study (3 year study) %
January	0	10.59
February	0	4.81
March	5.2	7.69
April	0	8.65
May	0	7.69
June	5.2	12.5
July	0	7.69
August	0	5.76
September	15.8	7.69
October	36.8	7.69
November	15.8	9.62
December	21	9.62
Total	100	100

In our 3 years study of autopsy of unidentified dead bodies, majority of cases were brought in the month of June, followed by January, November & December. That is because of extreme heat experienced in the month of June (summer season) & that may cause death due to dehydration or due to sun stroke mostly in the beggars. While in the month of January, November & December (winter season) extreme cold was experienced & that may aggravates diseases affecting the respiratory system and circulatory system. So during this period most of beggars and patients suffered from diseases of respiratory system & circulatory system may die, this finding consistent with Ajay Kumar et al.¹¹

Table 8: Comparison Of Unknown Dead Body Cases Sex Wise

Gender	Ajay Kumar (1 year study) %	Lucinda Evert (3 year study) %	Present study (3 year study) %
Male	95	75	85.58
Female	5	17	14.42
Unknown	-	8	-

In this study, maximum no. of cases of unidentified dead body was of male sex (85.58%) which is consistent with Ajay Kumar et al¹¹ and Lucinda Evert et al¹² that is because males were the dominant in working, migrating and earning group & females were mostly doing house hold work and less migrating group.

In our study, majority of unidentified dead body cases were above 60 years age group (31.73%), because of they are mostly the neglected people in the family, as well as beggars found in the city were also of old age.

In this 3 years study of unidentified dead body cases, majority of cases were found on roads/streets/highways (53.84%) that were suggested of road traffic accidents; this was followed by well/seashore/river/pond (16.34%) suggestive of some foul play, Railway tract/ST stand (14.43%) suggestive of suicide/ accident, devastated place (7.69%), mountain (3.85%), home (2.88%) and drainage line (0.97%).

In our 3 years study of unidentified dead body cases, the major cause of death that could be revealed were natural cause (47.11%) including coronary artery disease, tuberculosis, dehydration, starvation, heat stroke, gangrene, lung pathology, and peptic perforation. Those because of beggars and persons suddenly died due to disease and were brought as unknown person. This was followed by death due to various bodily injuries (head, chest, crush, multiple & decapitation) (22.12%). That is because of majority of cases were found on/ side of road suggestive of road traffic accidents, as well as injuries were may be due to an assault. Other cause of death were Asphyxial death (7.69%) that includes hanging & drowning, Foetal death (3.84%), Burns (1.93%) and Poisoning (1.93%). In our study 4.8% cases were remained undetermined cause of death, while in 10.58% cases, cause of death was not opined due to non availability of various investigation up till now.

In our study, maximum cases of unidentified dead body were brought in fresh state (74.04%), followed by decomposed state (23.08%) followed by state of skeletonisation (2.88%). That is because of cases of unidentified dead body found on road/

sides of the road were more in number in our study. That mostly suggested of road traffic accident cases and those cases were probably unidentified at the time of treatment as well as during autopsy. While decomposed and skeletonised dead bodies were found mostly in summer season due to very hot & humid environment in Bhavnagar region.

Conclusion: In our 3 years study of 104 autopsy cases of unidentified dead body, 24.04% cases were identified during/ after the autopsy by various efforts made by autopsy surgeon & police department. While 75.96% cases were remained unidentified even after various efforts made by autopsy surgeon & police department. From the present study, following suggestions are derived. Efforts made for identification of the unidentified dead bodies are need to be increased by the Police Department. Bodies that are unknown/ unclaimed/ unidentified should be presented for autopsy without any delay so that decomposition and other artefacts do not set in and obscure the findings of the post-mortem examination, particularly those that might throw some light as regards of identification. Thus, valuable data regarding the cause and manner of death can be established, besides data regarding identification. Modern techniques are to be used for the purpose of identification.

References:

1. India's Population 2013
<http://www.indiaonlinepages.com/population/india-current-population.html>.
2. India Demographics Profile 2013.
http://www.indexmundi.com/india/demographics_profile.html.
3. Dr.Krishan Vij ,Textbook of Forensic Medicine & Toxicology, , 5th Edition, Chapter 2.Medicolegal autopsy pp-17, Chapter 3. Identification. pp- 35-64.
4. Dr.K.S.Narayan Ready, The Essentials of Forensic Medicine & Toxicology, 32th Edition 2013, Chapter -4 Identification. pp-57-96.
5. Dr. V.V.Pillay, Textbook of Forensic Medicine & Toxicology, 16th Edition, Chapter -4 Identification. pp-48-85.
6. Dr. P.C.Dikshit, The Textbook Of Forensic Medicine & Toxicology, First Edition 2007, Chapter -5 Identification. pp 47-80.
7. Dr.Nageshkumar G. Rao, The Textbook Of Forensic Medicine & Toxicology, 2nd Edition 2010, Chapter -11. Forensic Identity. pp-65-117.Chapter 12. Forensic DNA Profiling, pp-117-119.
8. Modi's Medical Jurisprudence And Toxicology, 22nd Edition, Chapter -3 Personal Identification. pp- 37-88.
9. Dr. R.K.Sharma, Concise Textbook of Forensic Medicine & Toxicology, 2nd Edition, Chapter -3 Identification. pp-11-21.
10. Binod Kumar Patro, Chittaranjan Behera, Tabin Millo, O.P.Murty Management Of Human Remains Following Disaster A Public Health Approach. Journal of Forensic Medicine And Toxicology Vol. 24 No.2, July –Dec 2007.pp-20-23.
11. Dr. Ajay Kumar, Dr. K.H. Chavli, Dr. Dasari Haris, Dr. Amandeep Singh Pattern of Cause of Death in Unknown Death Bodied: A One Year Prospective Study. Journal of Punjab Academy Forensic Medicine and Toxicology .2012 vol.12(2). pp-92-95.
12. Lucinda Evert, Dr.S.H.Rossouw, Unidentified Forensic Pathology in South Africa, Thesis Study, September 2011.

Conflict of interest: None
Funding: None