

Frequency of Non-Firearm Fatalities in Interior Sindh

Pardeep Kumar¹, Nadia Aslam¹ and Ejaz Ahmad²

ABSTRACT

Objectives: To observe the frequency of non-firearm fatalities in interior of Sindh.

Study Design: Observational / descriptive study.

Place and Duration of Study: This study was carried out in the Mortuary of Liaquat University Hospital Hyderabad (LUH) from 1st January, 2015 to 31st December, 2015.

Materials and Methods: Fatality records were obtained from mortuary of (LUH) Hyderabad, which comprises of police inquest reports and postmortem reports. During study period 217 cases of Medico legal deaths were brought for postmortem examination in the mortuary of LUH. All cases were sorted according to age, sex and cause of medico legal / unnatural deaths and data was analyzed.

Results: The most common type of unnatural death found in every age group was homicide. Among 155 homicidal deaths, road traffic accidents seen in 57 cases (36.77%) as the major cause of death mostly accidental but sometimes may be homicidal. Next cause is sharp weapons which engulf lives of 30 (19.35%) humans. Only 02 (1.29%) cases of suicide were brought to medico legal section. In 05 (3.22%) cases cause of death remains undetermined. Out of total 155 cases, 118 were males (76.12%) and females were 37 (23.87%). The age group most commonly involved was of 21-40 years; next group with majority is between ages of 41-60 years while death in 01-20 years of age is equal to deaths in age group of 61-80 years.

Conclusion: Our study concludes that among the homicidal deaths non firearm fatalities are predominately due to road traffic accidents followed by sharp weapons.

Key Words: Medico Legal Deaths, Homicide, Accidents, Firearm, Unnatural Deaths.

Citation of article: Kumar P, Aslam N, Ahmad E. Frequency of Non-Firearm Fatalities in Interior Sindh. Med Forum 2016;27(5):40-43.

INTRODUCTION

Death is universal truth but no human being like this bitter fact. According to our Holy books every living thing must taste the death. A natural death occurs because of any disease or ageing and is unnatural when caused by other reasons rather than aging or disease. Unnatural deaths may be accidental, suicidal, homicidal or undetermined. According to UNODC (United Nations Office on Drugs and Crime) reported a global average intentional homicide rate of 6.2 per 100,000 populations for 2012 with Pakistan having homicidal rate highest in South Asia. The statics of unnatural deaths is the best parameter to assess the position of law and order in specific area. Mode of unnatural deaths reflects the social, moral and mental status of people of each locale. This is strongly believed by all religions that time & place of death is fixed, but deaths which is unnatural, unexpected and especially resulting from

violence are creating panic and grief in the family members of deceased but also have unhealthy and depressive effects among relatives, friends and even on the society.^{1,2,3}

Every Human being is born free, being citizen of an independent democratic country has legal and religious right to live free and let leave the others to be free. History of crime and violence dates back since life on earth begins probably, but investigation and strategies to control them is the feature of civilization which is improving day by day. Violence results in revenge which may effects the innocents more than the real culprits. Nowadays because of decline in economy and morals ratio of crime and fatalities increased.⁴ Many studies were conducted on different parameters of unnatural deaths, in different parts of our country but no such study is conducted in best of our knowledge to determine the fatalities by others than firearm in our setup. The results of this study will bring attention in people about deaths due to others reasons not by firearm like road traffic accidents which are worldwide common causes of unnatural death may be due to homicidal intentions. Prompt strategies and rules and regulations should be implicated for prevention of such mishaps.

MATERIALS AND METHODS

This observational / descriptive study was conducted at the mortuary of LUH Hyderabad which is a tertiary

¹. Department of Forensic Medicine, Liaquat University of Medical and Health Sciences, Jamshoro, Sindh.

². Department of Forensic Medicine, Peoples University of Medical and Health Sciences, Nawabshah, Sindh.

Correspondence: Pardeep Kumar, Asstt. Prof. of Forensic Medicine, Liaquat University of Medical and Health Sciences, Jamshoro, Sindh.

Contact No.: 0333-2727337

E-mail: pusharamesh1998@gmail.com

care Hospital attached with Liaquat University of Medical and Health Sciences for a period of one year from January 2015 to December 2015. This study included all the cases of unnatural deaths brought for autopsy in the mortuary. Cases in which cause of death is firearm injury were excluded.

As per rules only authorized medical officer conduct medicolegal autopsies in the mortuary. The examination of dead bodies were begins with examination of clothing, thorough examination of body before and after dissection of the body to rule out the cause, type, time of death, the weapon/cause responsible for death. If cause of death could not be determined, suspected tissues and body fluids were collected for detailed, histological and toxicological diagnosis. Dissection of body was carried by Robert Virchow's technique. All the body cavities i.e. Cranium, thoracic and abdominal cavities were dissected; organs were examined grossly. Data regarding age, gender and cause of death was noted. The relatives of the victims were also inquired for circumstances in suspected cases of suicidal deaths. The data entered on Performa, statistically analyzed and the results were summarized in tables and charts.^{5, 6, 7}

Ethical Considerations: Permission was obtained from police surgeon at LUH Hyderabad.

RESULTS

Among 155 victims of Medico legal deaths, 148 (95.5%) deaths were homicidal, suicidal deaths was in 02(1.29%) cases while in 05 (3.22%) cases cause of death was unknown.

Males were victimized more 118(76.12%) while females were 37 (23.87%) out of 155. According to age majority of the deaths were in age of 21-40 years, next group with majority is between ages 41-60 years while death in 01-20 years of age is equal 61-80 years. The detailed distribution of age & gender is shown in Table 1

Table No.1: Age and sex wise distribution of Medico legal deaths (155)

Age group (Years)	Male	Female	Total	% age
01-20	14	07	21	13.54%
21-40	53	18	71	45.8%
41- 60	32	10	42	27.09%
61-80	19	02	21	13.54%
81-100	00	00	00	00
	118 (76.12%)	37 (23.87%)	155	99.97%

Among 155 cases of homicidal death, as we exclude gunshot injuries which was common weapon used by the offender next commonly used weapon in interior Sindh is axe which usually present in every home of villages. Sharp forces like axe and knives took lives of 18 males and 12 females, whereas blunt weapons cause the death of 14 victims 09 males and 05 females.

Strangulation kill 19 persons; while death due to throttling / smothering was seen in 09 cases while another 02 victims died of hanging.

Death due to poison is seen in 04 cases whereas 12 died of drowning. The poor victims of accidental fatalities including road traffic accidents in 57 as the major cause of non-firearm fatality while in train accidents 05 persons lost their lives. Electric shock was seen in 01 case due to short circuiting. 04 died because of intake of poison mixed with food given in enmity. Among total 02 suicidal deaths both females ended their life by burning themselves with petrol on clothes.

Table No.2: Distribution of Medico legal death cases (n=155)

Types	Male	Female	No. of cases	% age
Sharp Force	18	12	30	19.35%
Blunt Force	09	05	14	9.03%
Strangulation	15	04	19	12.25%
Throttling/Smothering	06	03	09	5.80%
Hanging	01	01	02	1.29%
Burning	00	02	02	1.29%
Poisoning	03	01	04	2.58%
Drowning	11	01	12	7.74%
Electric shock	01	00	01	0.64%
Road traffic accidents	51	06	57	36.77%
Train accident	03	02	05	3.22%
Total	118	37	155	100%

DISCUSSION

Out of 46 million population of Sindh, 50% are rural dwellers mostly uneducated and belonging to low socioeconomic statuses. Many people beside illegal firearm possession possess other sharp and blunt tools in their daily house hold usage like axe, spade, sickle, hammers etc. In this study we tried to find out the cause of deaths other than firearm in cases of unnatural deaths brought for medico legal autopsies in the mortuary of LUH.

Out of total 155 Medico legal deaths, 148 (95.5%) cases were of homicides, suicidal deaths were in 02(1.29%) cases while in 05 (3.22%) cases cause was undetermined seen in graph 1. These findings are similar with findings of studies conducted by Muhammad Umar and Muhammad Hamayun, who found homicidal deaths predominant in all unnatural deaths.^{8, 9}

The most targeted gender is the male who is caring taker of family mostly whose loss impact badly on emotion and economy of the family. Among 155 cases, 118 males were (76.12%) and females 37(23.87%) which is probably similar globally. Muhammad Zahid Bashir and Sachidananda also reported the same as males are more exposed to outdoor activities, more aggressive and in South Asia still females are more confined to home and respected more than other parts

of world which may be a safety factor to them to some extent. Similar results showing male victimized more is also seen in study conducted at Bahawalpur.^{10,11,12}

Regarding age group our results correspond with the studies in different regions of Pakistan and other countries reporting medico legal deaths more in age group of 21-40 years. This is may be due to more active period of individual's life when everyone is full of energy and aggression in this age with short temperament and no botheration for end results.^{13,14,15}

Among 155 cases of homicidal death the poor victims of accidental fatalities including road traffic accidents in 57 as the major cause of non-firearm fatality while in train accidents 05 person lost their lives. According to Pakistan Bureau of Statistics data on traffic accidents in Pakistan from 2004 to 2013, deaths in road accidents in Sindh was recorded the highest at up to 86 percent. Train deaths are not seen in big track accidents but unfortunately all five expired either crossing unmanned level crossing or road with no railway phataks on bikes.^{16,17}

Sharp forces like axe and knives took lives of 18 males and 12 females, whereas blunt weapons cause the death of 14 victims 09 males and 05 females which is contrasting to study conducted by Umar Memon who find blunt object is more frequently used by assailant as compared to sharp weapon/tool.⁸

Killing of 19 victims was by manual strangulation; while death caused by asphyxia due to throttling / smothering in 09 cases, 02 victims died of hanging. More or less similar results were concluded by Farhat Mirza and Anjum Zia.^{18,19}

Death due to poison is seen in 04 cases whereas 12 died of drowning which is one of the difficult tasks for the forensic expert to decide on autopsy whether it is homicidal, suicidal or accidental. Decision is purely based on eye witness and circumstances. Most of the time it is accidental as teenagers without precaution swim and bath in summer in nearby canals. Cases of drowning are only reported by GM Yousfani and Umar Memon's study which shows drowning as second common cause of accidental death.⁸

Electric shock was seen in 01 case due to short circuiting. Among total 02 suicidal deaths both females ended their life by burning themselves with petrol on clothes. Belayat Hussain's study in Dhaka also shows the same. Poor females are tortured physically and mentally so they may commit suicide. Suicide due to dowry matters is very common in India.²⁰

CONCLUSION

This study concludes homicide was the commonest manner of death as compared to others. Road traffic accident followed by sharp object injury is the predominant non firearm fatality. The males belonging to age group between 21-40 years were commonly victimized. As Road Traffic Accidents was the major

cause of unnatural death, the law and order situation regarding this issue must be improved. Driving license especially for heavy duty vehicle is granted on just subscription of fee without any physical or mental test. There is no proper investigation of drunken or narcotic usage by drivers or pedestrians. Keeping this scenario in mind we assume road traffic accidents a conflict situation between homicide and accident very difficult to distinguish especially in high profile cases. Author intend that for homicidal assaults we need to improve behavioral and psychological attitudes but for God sake accidental unnatural deaths must be reduced just by strict implementation of laws especially in cases of road traffic accidents both for drivers and pedestrians like preliminary breath test for drivers and use of zebra crossings and overhead bridges for saving life not time and effort. It's our duty to make Road traffic act as part of practice not only for print and publication.

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

REFERENCES

1. Holy Quran, Surah Ankaboot no. 29, versus no. 57.
2. Global Study on Homicide - United Nations Office on Drugs and Crime. Available from: [http://www.unodc.org/documents/data-and-analysis/statistics/Homicide/Global_study_on_homicide_2011_\(Accessed: July 12, 2013\)](http://www.unodc.org/documents/data-and-analysis/statistics/Homicide/Global_study_on_homicide_2011_(Accessed: July 12, 2013))
3. Ahmed M. Rahman M. Hossain M. Pattern of unnatural death in two districts. TAJ 1992;5: 65-66
4. Marri MZ, Bashir MZ, Munawar AZ, Khalil ZH, Khalil IR. Analysis of homicidal deaths in Peshawar, Pakistan. J Ayub Med Coll Abbottabad 2006; 18(4):30-3.
5. Police Rules, 1934 XXV (25.2).
6. Criminal procedure code Act - V of 1898, section 174.
7. Dikshit PC. Autopsy procedures and Exhumation. Text book of forensic medicine and toxicology. 1st ed. New Delhi: Peepee Publishers; 2007.p.112-31.
8. Yousfani GM, Memon MU. Spectrum of Unnatural Deaths in Hyderabad: An Autopsy based Study. J DUHS Karachi 2010;4(2):54-7.
9. Humayun M, Khan D, Khan FJ, Khan O. Analysis of homicidal deaths in district DI Khan: an autopsy study. J Ayub Med Coll Abbottabad 2009;21(1)
10. Bashir MZ, Saeed A, Khan D, Aslam M, Iqbal J, Ahmed M. Pattern of Homicidal deaths in Faisalabad. J Ayub Med Coll Abbottabad 2004; 16(2):57-9.
11. Mohanty S, Mohanty S K, Patnaik KK Homicide in southern India—A five-year retrospective study. Forensic Med and Anat Res 2013;2(1):18-24
12. Ali SMA, Rizvi SIH, Ali MA, Chaudhry TH. Weaponry Patterns in the homicidal deaths in Bahawalpur. The Professional 2000; 7(4): 514 – 6.

13. Qadir G, Aziz K. The study of Homicidal deaths in Larkana. *Post Graduate Med J* 2000; 11 (2): 79-80.
14. Mandong BM, Manasseh AN, Ugwu BT. Medico legal autopsies in North Central Nigeria. *East Afr Med J* 2006; 83(11):626-30.
15. Bhupinder S, Kumara TK, Syed AM. Pattern of homicidal deaths autopsied at Penang Hospital, Malaysia, 2007-2009: a preliminary study. *Malays J Pathol* 2010;32(2):81-6.
<http://www.thenews.com.pk/print/58036-traffic-accidents-kill-an-average-15-people-in-pakistan-daily>
17. Naci H, Chisholm D, Baker TD. Distribution of road traffic deaths by road users group: a global comparison. *Int J Prev* 2009; 15:55-9.
18. Mirza FH, Hassan Q, Naz R, Khan M. Spectrum of Medico-legal Deaths in Metropolis of Karachi: An Autopsy Based Study. *Pak J Med Dent* 2013;2 (4):4-9
19. Munawar AZ, Faqirullah, Haq A, Jan A, Jahanzeb, Haq R. An audit of homicidal deaths caused by fire-arms an autopsy study *J Med Sci* 2014;22(4): 155-158
20. Khan BH, Hossain M. Study on Unnatural Death Patterns in Dhaka City. *AKMMC J* 2011;2(2): 18-20.