International Journal of Allied Medical Sciences and Clinical Research (IJAMSCR)

ISSN:2347-6567

IJAMSCR |Volume 6 | Issue 3 | July - Sep - 2018
www.ijamscr.com

Case Report *Medical research*

Homicidal stab injury over an extremely rare site: a case report

Dr. Bedanta Sarma*, Dr. Pankaj Suresh Ghormade, Dr. Lekheshwar Yadav

[1]*Senior Resident, Department of Forensic Medicine and Toxicology, All India Institute of Medical Sciences (AIIMS), Raipur, Chhattisgarh.*

[2]*Assistant Professor, Department of Forensic Medicine and Toxicology (AIIMS), All India Institute of Medical Sciences, Raipur, Chhattisgarh*

[3]*Postgraduate trainee, Department of Forensic Medicine and Toxicology, All India Institute of Medical Sciences (AIIMS), Raipur, Chhattisgarh*

***Corresponding Author: Dr. Bedanta Sarma**

Email id: bedantanalbari@gmail.com

ABSTRACT

Introduction

Stab injury is a three dimensional mechanical injury, most of which is located over the chest and abdomen. Fatal stab injury of extremity especially over anterior aspect of thigh is a rare entity. It directly causes injury to the femoral vessel if the stroke can be placed exactly over its anatomical landmark. Hence, to execute such type of site specific injury, the victim or the accused must have anatomical knowledge. Few such rare incidences have been reported till now with possibility of all the manners.

Case presentation

Such a victim was brought to the mortuary of tertiary care centre, Dibrugarh (Assam) on 4th March 2014 with a stab injury over anterior aspect of upper thigh by an acquaintant under the influence of alcohol. Both the victim as well as the accused was illerate and farmer by occupation. The victim became unconscious in a pool of blood and was declared dead after reaching hospital.

Conclusion

The uniqueness of the case is that the victim chose an extremely rare site for stabbing In spite of not having anatomical knowledge. In this paper the case has been described in the light of autopsy findings.

INTRODUCTION

Stab injury is a three dimensional mechanical injury where depth is more than its length. It is the depth and site that makes it fatal by causing injury to vital organs or major vessels leading to exsanguinations. [1, 2] Although, such sharp force injuries are declining; they are still in use for causing injuries in areas where firearm supply is strictly regulated by governments.

Most of the stab injuries are homicidal in manner; although suicidal and accidental are not uncommon. They are usually more than one in number, situated anywhere in the body even in self unapproachable areas; although chest and abdomen are the preferred area to inflict. In case of self

harm, the individual usually exposes the area before stroke and some hesitation marks are seen alongside the main injury. [2, 3, 4]

Stab injury over extremities, especially thigh is a rare entity. It causes injury to femoral vessels which lie unsupported by muscles in the femoral triangle over upper part of the thigh. In virtually all such cases victims are intoxicated and do not realize the lethality of the wound. Instead, they keep on walking around, bleeding copiously before collapse. [2, 5] Choosing an atypical area to stab usually points towards the anatomical knowledge of the victim or the accused irrespective of the manner of injury. Such a case with stab injury over mid thigh brought to the mortuary of the tertiary care centre, Dibrugarh, Assam has been described in this paper with respect to the autopsy findings found during the examination.

CASE PRESENTATION

On the day of the incident i.e. on 03/03/2014, the victim; a farmer by occupation went to a nearby market place after completing farming activities. He along with another person of the same village entered into a bar where locally made alcohol is served, the place they very often gather. While they were taking alcohol, another farmer of a different locality known to each other came to meet him. They had an altercation regarding some monetary issue and the later threatened him and left. He was also under the influence of alcohol. After about half an hour both the friends winded up. The victim left his friend on the bar and went out towards the market. It was around 6:30 evening. All of a sudden, the assailant came from backside in a by-cycle; stopped suddenly and stabbed the victim over his right thigh and flied. A vendor selling paan just outside the bar rushed to the spot but could not hold the assailant. The victim was bleeding severely but he was still in standing position. He was then brought to the nearest home by the shopkeeper for help. After few minutes arrangement was done to take him to the nearest hospital. He lost consciousness on the way and was declared brought dead by the duty doctor. Later on the police arrested the accused from his paddy field along with the weapon.

AUTOPSY FINDINGS

Autopsy was conducted on next day morning i.e. on 04/03/2014 and findings are as described below

Deceased was an average built male wearing a half sleeved T-shirt and brown colored Gamcha (A cloth used by Indian wrapped over waist like a towel). A cut mark seen over the gamcha corresponding to the right thigh which was blood stained. A stab wound of size 3.5 cm X 1.5 cm muscle deep seen over anterior medial aspect of right upper thigh, 18 cm below the mid inguinal point (photograph 1). It was elliptical in shape and margins were clean cut. Few dried marks of streaking of blood noted over both the lower limbs up to sole (photograph 2). On dissection, it has pierced the fat, muscle and ultimately the femoral artery. Blood clots were seen throughout the tract (photograph 3). No other injury noted over the body. On opening body cavities, all the organs were found to be pale. Micro nodules along with fatty streaks noted over the surface of liver which gave gritty sensation on dissection. Stomach filled with around 250 ml liquid substance with smell of alcohol, which was later confirmed by toxicological report of FSL (Forensic Science Laboratory).

Photograph 1



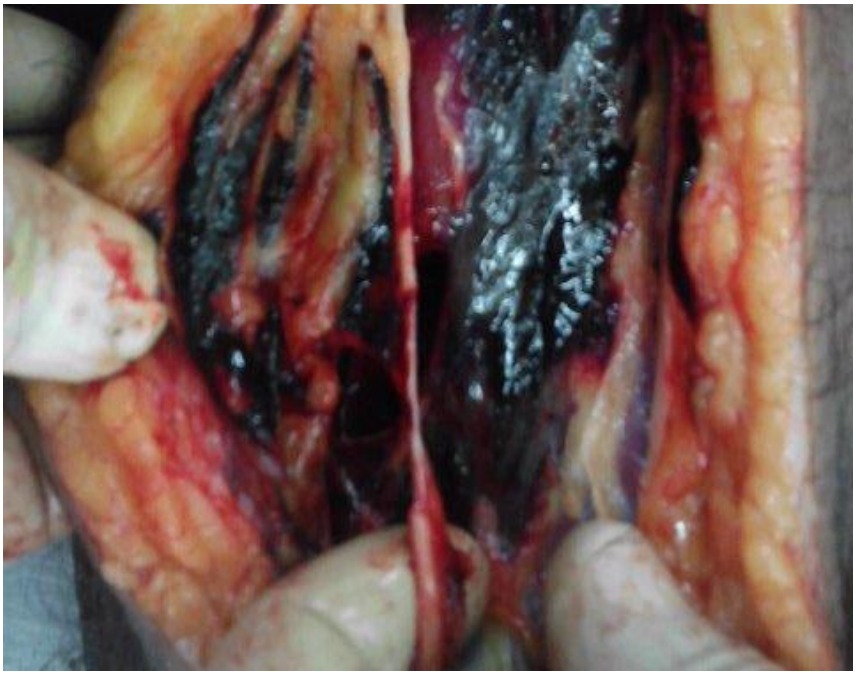
PHOTOGRAPH 1: Showing the stab injury over anterior aspect of the right thigh.

Photograph 2



PHOTOGRAPH 2: Showing dried mark of blood over the soles.

Photograph 3



PHOTOGRAPH 3: Showing clotted blood underneath the injury.

DISCUSSION

Although, most of penetrating injuries are homicidal, other manners (suicidal and accidental) are not uncommon. [2] Where the number of injuries are more than one, located anywhere in the body (although, chest and abdomen are the preferred sites); it usually points towards homicidal nature. [4, 6, 7] Covering cloths too bears corresponding cut marks or tears in most of the homicidal injuries. [4] On the other hand, suicidal penetrating injuries are usually confined to the accessible area of the body, mostly over left side of chest because of the popularly held belief of anatomical placement of heart in a right handed person or vice versa. This primary injury may be associated with some hesitation cuts. [2, 8, 9] But in some situations if the individual is suffering from some psychiatric illness or is under the influence of alcohol or some other drugs, he may choose some atypical site to commit suicide. Accidental penetrating injury is the the most uncommon type, possible only when the victim falls over any sharp object. [2] Whatever may be the manner, fatality of stab injury depends on the area as well as depth of the penetration, and even 1.3 cm can be a fatal one in case the injury is seen over the anterior thigh corresponding to femoral vessels. [1, 10]

Stab injury over anterior aspect of thigh is an extremely rare entity. It may cause death of the victim following torrential bleeding due to transaction of femoral vessels, which lie unprotected superficially in the femoral triangle. [5] There are few such incidences that have been reported yet. Upon death, it becomes a tedious task for the autopsy surgeon to reach a final decision regarding manner of injury solely based on autopsy findings. A case was reported by Edirisinghe PA, Busuttil A where he found suicidal stab injury over anterior aspect of thigh in a medico. Possibility of choosing such an exceptional area to kill him was explained by his anatomical knowledge of femoral vessels. [11] In another case reported by Rautji R and Kumar A, a software engineer committed suicide by stabbing himself over the same location under the influence of alcohol after a heated argument with wife. [12] Probably his intention was not to end his life but to give suffering so he chooses this unusual site in spite of lacking any anatomical knowledge. Moreover, he could not judge the nature and consequence of injury inflicted because he was under the influence of alcohol. In another case reported by Babu YPR et al a farmer was accidently cut over the femoral vessels by a bottle of alcohol when he felt down after losing balance. [13] Hence, along with the injury circumstantial evidence plays pivotal role in such cases to deal with manner of injury. Avaro JP et al reported a case of homicidal sharp force injury where the victim died following a stab injury over right groin leading to transaction of common femoral artery. [14]

In our case the deceased was brought with a single stab injury over the anterior aspect of upper third of right thigh. It directly injured the femoral artery and there was extensive bleeding from the site. In upper thigh injury the stroke must correspond to the anatomical landmark of femoral vessels. Hence, such type of rare site specific sharp force injury is prevalent amongst assailants or victims if they have enough knowledge of anatomy. Here, the accused was an illiterate person; hence his choice of injury site cannot be explained by his ordinary knowledge. Probably, the accused tried to hurt him in a sudden fit of anger and homicide was not his intention. Absence of any defense wound on the victim can also be explained by the influence of alcohol and suddenness of the act. Although, there was absence of multiple wound, presence of eye witness helped in ruling out possibility of accidental or suicidal manner. The uniqueness of this case is that the accused chose an unusual site for stabbing, In spite of not having anatomical knowledge irrespective of his motive.

CONCLUSION

This atypical stab wound highlights few important points which never satisfy the traditional criteria such as its unusual position, single in number and committed by an ordinary assailant having no medical knowledge. In such scenario, if there is no eye witness; it often creates confusion regarding manner of death. Hence, to give justice to the victim such type of cases warrants crime scene visit, proper interrogation of the nearby locality; other than a meticulous post mortem examination.

REFERENCES

[1]. Shepherd R. The Examination of the Wound. In: Simpson's Forensic Medicine. London: Arnold; 12, 2003, 65.
[2]. DiMaio VJ, DiMaio D. Forensic pathology. Wounds caused by pointed and sharp-edged weapons. United States of America: CRC Press; 2, 2001, 187–212.
[3]. Swann IJ, MacMillan R, Watson AA. A Study of Stab Wounds. Arch Emerg Med 2(1), 1985, 31-6.
[4]. Begum A, Huq R, Begum M, Alam A, Akhter G, Tasmin T. A case report on stab injury. Delta Med Col J 2(1), 2014, 36-38.
[5]. Snell RS. Clinical anatomy. The lower limb. United States of America: Lippincott Williams Wilkins 7, 2004, 626–629.
[6]. Muataz A, Qazzaz A, Abbas ZA. Medico-Legal Study of Fatal Stab Wounds in Baghdad. The Iraqi Postgraduate Medical Journal 12(1), 2013, 104-110.
[7]. Ambade VN, Godbole HV. Comparison of wound patterns in homicide by sharp and blunt forces. Forensic Science International 156, 2006, 166–70.
[8]. Karlsson T. Homicidal and suicidal sharp force fatalities in Stockholm, Sweden. Forensic Sci Inter 93, 1998, 21–32.
[9]. Oshima T, Kondo T. Eight cases of suicide by self cutting or stabbing: consideration from medico-legal viewpoints of differentiation between suicide and homicide. J Clin Forensic Med 4, 1997, 127–32
[10]. Connor SEJ, Bleetman A, Duddy MJ. Safety standards from stab resistant body armour: a computer tomographic assessment of organ to skin distances. Injury 29(4), 1998, 297–9.
[11]. Edirisinghe PA, Busuttil A. Medical suicide - groin stabbing. J Clin. Forensic Med 13(2), 2006, 92-5.
[12]. Rautji R, Kumar A. A Case of Suicide or Accidental Death Due To Self Stabbing. J Indian Acad Forensic Med. 36(4), 2014, 437-38.
[13]. Babu YPR, Fahad S, Atreya A, Bakkannavar S, Kumar GNP, Acharya J. An unusual case of fatal transection of femoral Vessels. Egyptian Journal of Forensic Sciences 6(3), 2015, 307-9.
[14]. Avaro JP, Biance N, Savoie PH, Peycru T, Bonnet PM, Balandraud P. Isolated common femoral artery injury caused by blunt trauma. Acta Chir Belg 108(6), 2008, 744–6.

How to cite this article: Dr. Bedanta Sarma, Dr. Pankaj Suresh Ghormade, Dr. Lekheshwar Yadav. Homicidal stab injury over an extremely rare site: a case report. Int J of Allied Med Sci and Clin Res 2018; 6(3): 761-766.
Source of Support: Nil. **Conflict of Interest:** None declared.