

Original Article

PROFILE OF MEDICO-LEGAL CASES COMING TO CASUALTY OF GOVERNMENT MEDICAL COLLEGE, AKOLA

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Abstract:

Causality department of any hospital is an important area because most of medical emergencies and almost all medico legal cases report first to causality of hospital. The prime duty of doctor is to treat and save the life of patient, however once treatment is over then same doctor has to carry out exhaustive documentation of medico legal cases. This puts on extra burden on duty Doctor. The present study is carried out with a view to understand the pattern and magnitude of Medico legal cases in this region so as to identify methods to prevent and reduce incidences, if any. One year retrospective study was carried out between 1st July 2012 to 30th June 2013 from the in the causality data of Government Medical College, Akola.

Study revealed that Burns (21.87%) constituted majority of medico legal cases followed by assault (19.72%) and road traffic accidents (16.99%) with male preponderance (3:1); majority of victims were between 21-30 years (38.82%) followed by 31-42 years (19.53%) large number of victims were urban inhabitants (55.91%).

Key Words: Medicolegal cases, Casualty

Introduction:

The casualty department is backbone of every Hospital because almost all cases of Medical emergencies reported first to Casualty Department of Hospital, and apart from these Medical emergencies, Casualty Department also deals with the Medico legal cases more frequently than any other department of Hospital. So Medico legal cases constitute substantial proportion of workload. A medico legal case is a case of Injury or illness where attending doctor after eliciting, listing and examining patient; is of opinion that some investigation by law enforce agencies is essential to establish and fix responsibility for the case in accordance with the law of the land¹.

Profiling of Medico legal cases is an integral aspect for the prevention of preventable causalities in future and to study the crime rate in area².

In present study an attempt is made to know the burden of Medico legal cases.

Material and Methods:

This is a retrospective study, conducted in medico legal section and casualty of Government Medical College and Hospital Akola during the period from 1st July 2012 to 30th June 2013. Total 2053 medico legal cases recorded/admitted in medico legal register of casualty department were included in the study which comprised of information regarding various parameters obtained from medico legal register and hospital record of individual patient. The data thus obtained was analyzed, observations were presented in tables & graphs, discussed and compared with other studies.

Observations:

In this study it is observed as follows:

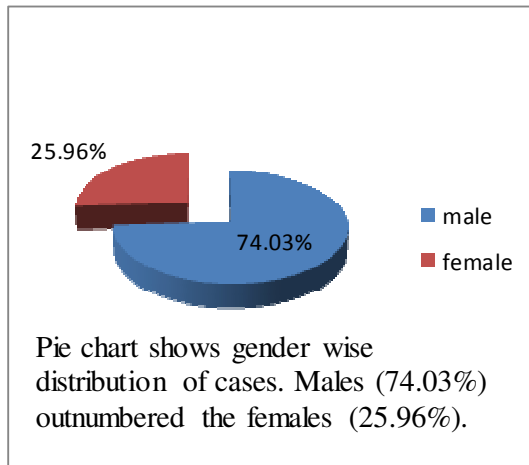


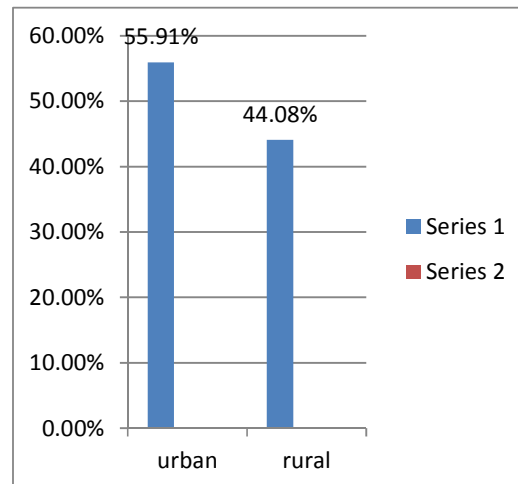
Table I shows that majority of victims (38.82%) from age group 21-30 years followed by 31-40 years (19.53%) and 11-20 years (13.78%).

Age groups	No. of cases	Percentage
0-10	024	01.16%
11-20	283	13.78%
21-30	797	38.82%
31-40	401	19.53%
41-50	336	16.36%
51-60	111	05.40%
61 & above	101	04.91%

Table II shows type of cases. Maximum number of cases were of burns (21.87%) followed by assault (19.72%) and poisoning (18.70%).

Category	No. of cases	Percentage
Burns	449	21.87%
Assault	405	19.72%
Poisoning	384	18.70%
RTA	349	16.99%
Alcohol intoxication	177	08.62%
Sexual assault	41	01.99%
Brought dead	141	06.86%
Near drowning	007	00.34%
Near hanging	003	00.10%
Electric injury	015	00.73%
Other accidents	082	03.99%

Graph shows residence wise distribution. Large number of medico legal cases reported to casualty were from urban area (55.91%) followed by rural area (44.08%).



Discussion:

In the present Study 2053 Medico legal cases reported to casualty department of Government Medical College Akola during study period.

Present study shows maximum number of victim were males (74.03%) as compared to males (25.96%) Similar findings reported by Garg vishal et al¹, Malik yogendra², and marrimurad³. This is to because males are more involved in outdoor activities and usually the main bread winner for the family, so this makes them more vulnerable to accident or injury.

In present study great number of victims were from age group between 21-30 years (38.82%) followed by 31-40 years (19.53%). Similar finding are also reported by Marri Murad³ and other workers. This may be due to fact that individuals of these age groups lead more active life, involve themselves in outdoor and sports and recreation activities and they

take risk for work during this period which leads to more injuries and accidents among these groups.

Present study revealed that maximum number of cases were of burns (21.87%) followed by assault (19.72%) and poisoning (18.07%) Garg Vishal et al¹ reported in his study that road traffic accidents cases were highest. Malik Yogendra² reported that maximum number of cases were of poisoning and Marri Murad³ reported maximum number of cases of assault. This discrepancy may be due to fact that later study is conducted in rural set up where people are more involved in agricultural activities, while Garg Vishal¹ conducted study in Punjab where cases of burns usually doesn't report to casualty like Malhotra⁴ reported in his study but at Akola all medico legal cases report first to casualty and also due to fact that there are very few private burn care unit in Akola and surroundings District; so that all such cases report to casualty of Government Medical College Akola.

Study revealed that maximum number of victims (55.91%) belonged to urban areas as compared to rural areas (44.08%). These findings of our study differ from the findings of other similar studies. This may be due to fact that study was conducted in rural area and people residing in urban areas are more prone to fall due to traffic accidents, industries, railway mishaps, fall from high rise buildings and other factors.

Present study shows maximum number of medico legal cases reported during rainy season (41.11%) followed by summer (32.19%) and winter (24.74%). Similar findings reported by Garg vishal¹. This may be due to fact that people around Akola of rural region are involved in harvesting during this season and as this region is draught affected since last decade, so there are more instances of suicides during this season. Also, instances of quarreling, bad weather, poor conditions of roads also contribute to increase in the number of accidents.

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 casualty department. Present study shows maximum number of cases of injuries were accidental among young individuals (21-40 years) and urban inhabitants. Injuries can be prevented by proper education, awareness and training of safety standards which are required to be implemented strictly. The doctors who are involved in handling medico legal cases need to be more trained. Also, due to increase in violence and accidents, the need for round the clock availability of medico legal experts, in as much number needed, in casualty and emergency departments to deal with medico legal cases is felt.

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