

# JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR FACULTY OF HOMOEOPATHIC SCIENCE

Name of Faculty	:	JV'n Dr Richa Sharma, Asst. Prof.
		(Deptt. Of FMT)
Program	:	BHMS II Year
Course Name	:	FORENSIC MEDICINE AND TOXICOLOGY
Session No. & Name	:	1. MLI OF INFANT DEATH

#### **Program Outcome-**

• The important objective of the BHMS course is to impart through and comprehensive training to the candidate in various aspects of homoeopathy during completion of course students shall be able to perform with proper skill and knowledge of homoeopathy

## **Course Outcome-**

- Able to understand the basic concept of the subject and its importance.
- Aware of inquest, legal and court procedures applicable to medicolegal and medical practice, code of ethics, duties and rights of medical practitioner, duties towards patients and community, punishment on violation of code of ethics, various forms of medical negligence, medico legal post-mortem.
- To understand the relationship of Forensic Medicine & Toxicology with other Homoeopathic subjects like Homoeopathic Pharmacy,

Homoeopathic Materia Medica, Organon of Medicine and Homoeopathic Philosophy & Psychology, along with allied subjects like Anatomy, Physiology, Surgery, Obstetrics & Gynaecology, Practice of Medicine due to integrated way of teaching the subject.

#### **INFANT DEATH**

Definition :- Infanticide – Killing of infant (birth to 12 months).

Feticide – Killing of foetus at any time prior to birth.

Filicide – Deliberate killing of Child by own parents.¬ 1. Maternal Filicide 2. Paternal Filicide

Neonaticide – Killing of an infant within 24 hours of birth. Killing of an entirely dependent child under one year of age who is killed by mother, parents or others in whose care the child is entrusted.

## Medico Legal Aspects :-

- Infanticide is charged under Sec. 302 IPC which is punishable by death or imprisonment for life and fine. The causing of the death of living child in the mother's womb may amount to culpable homicide, if any part of that child has been brought forth, though the child may not have breathed or completely born (Sec. 299 IPC).
- Any person who does an act with intent to prevent the child being born alive or to cause it to die after birth (except done in good faith for the purpose of saving the life of mother) is punished with imprisonment up to 10 years with/without fine (Sec. 315 IPC).
- Any person who does an act causing death of quick unborn child would be guilty of culpable homicide, and punished with imprisonment up to 10 years and fine (Sec. 316 IPC). For example, a person knowingly injures a

pregnant woman that causes the death of an unborn quick child; he is guilty of the offence defined in this section.

• Infanticide does not include the death of fetus during labor, when it is destroyed by craniotomy or decapitation whether the fetus was born alive Viability or capacity to lead a separate life outside the body of mother, depends on many biological and physiological factors. The acceptable age of viability of a foetus is 210 days. Whether it was viable when born Two other condition of newly born foetuses are recognized, when they are not born alive.

These are: 1..Still born foetus 2..Dead born foetus

**STILL BORN FOETUS-** According to WHO- "A still born child as one, which has issued forth from the mother , after 28 weeks of pregnancy and didn't at any time after being completely expelled, breathe or show any sign of life." In contrast to general conception, some still born foetuses may show signs of respiration, when they are still in the vagina or uterus. (Vagitus vaginalis or Vagitus uterinus) Frequency of still birth rate is calculated as 1 in 18 births. Medico legal aspects of still birth Charge of infanticide will not stand in still birth cases. In India, killing after live birth is considered as murder (302 IPC) and to¬ prevent live birth under 315 IPC.

**DEAD BORN FOETUS** - Death of a foetus inside the uterus.

Sign of Dead Born Foetus

- 1. Rigor mortis May occur in dead treats before birth. The most common cause is antenatal hemorrhage in the mother.
- Intrauterine maceration (Autolytic decomposition) Overlapping of skull bones (Spalding sign) Soft tissue oedema: skin >5 mm. This is process of aseptic autolysins of a foetus dead in utero. It occurs when the dead foetus remains in uterus for 3-4 days surrounded by liquor

amni, but with the exclusive of air. It does not occur if the dead foetus is born within about hours. It is characterized by softening & degeneration of foetus.

**LIVE BORN FOETUS** - The foetus is alive, complete birth or at least one part of its body comes out of the mother's body.

# Sign Of Live Birth - As Recognized By Civil Law

- 1. Cry of the baby- Vagitus vaginalis and Vagitus uterinus
- 2. Movement of any part of body
- 3. Sneezing and yawning
- 4. Heartbeat
- Acts of Omission or deliberate neglect : Intentional failure to extend those cares to the newborn that may
  lead to its death and may amount to infanticide. Examples. failure to tie the cord ii. Failure to protect the child from being suffocated by linens iii. Failure to protect it from exposure of cold or other adverse site.
- 2. Acts of Commission to cause infant death : i. Suffocation by Smothering, Gagging, pressure over chest wall ii. Strangulation iii. Drowning iv. Poisoning v. Head injury 24 vi. Concealed punctured wound-may be caused by nail or needle through fontanelle, inner canthus of eye. vii. Cut throat injury viii. Burying of newborn alive ix. Burning x. Twisting of neck fracture dislocation of cervical vertebrae

Textbook of Forensic medicine and Toxicology by Dr. K.S. Narayan Reddy Suggestions to secure good marks to answer in exam-

Explain answer with key point answers

- Questions to check understanding level of students-
  - 1. What are Medico legal aspects of Infanticide?
  - 2. Explain in detail the sign of live birth?