

# Non-vehicular homicides masqueraded as road traffic accidents

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## Abstract

Interfering with or planting evidence to disguise the cause of a death is not uncommon in forensic practice. Homicides staged as road accidents are, however, rarely encountered by crime scene investigators. We report two homicides which were presented as road traffic accidents. Case 1: Dead body of a 35-year-old male was brought for autopsy with history of road traffic accident. Primary police inquiry suggested that the victim was knocked down by a speeding four-wheeler, while walking by the side of a high way with his friends. On postmortem examination the deceased's death was found due to homicidal smothering staged as a road traffic accident. Case 2: Dead body of 40-year-old male was brought for autopsy with history of road traffic accident. It was an unwitnessed crush by a speeding four-wheeler. However, on postmortem examination, the deceased was found to have died from homicidal multiple stab wounds with his death staged as a road traffic accident. Importance of meticulous autopsy to determine accurately the cause of death is emphasized.

## Keywords

Manipulation of evidence, homicides presented as road traffic accidents, cause of death multiple stab injuries, smothering

## Introduction

Potential confusion which may arise in the investigation of known and unsuspected violent deaths derives from what have been called “medico-legal masquerades” due to deliberate planting or interference with the scene of the death.<sup>1</sup> A variety of staged crime scenes may be encountered by the death investigator. Homicides may be staged or even altered by perpetrators in an attempt to conceal a crime or there may be tampering with or deliberate removal or loss of vital evidence. We report two cases of homicide in which the perpetrators killed the victims by smothering (case 1) and stab injuries (case 2), and presented them as a traffic accident. No other cases could be found in the forensic literature (but many are found in detective fiction). We discuss the crime scene investigation and autopsy findings which demonstrated the cause of death as homicide.

Primary police inquiry suggested that the victim was knocked down by a speeding four-wheeler when he was walking by the side of a high way with his friends, after having dinner and alcohol from a nearby Dhaba (a roadside food stall in India). He was declared dead on arrival at hospital. External examination showed that he was well built, and cadaveric stiffness was well marked. Intense cyanosis in the form of bluish discoloration of the nails, lips and ear lobes was apparent.

## Case history

### Case 1

The dead body of a 35-year-old male was brought for autopsy with history of road traffic accident (RTA).

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Subconjunctival haemorrhages were noticed in both eyes. Two crescent, linear abrasions (nail marks) were noticed over the bridge of the nose. Four abraded contusions of size  $0.5 \times 0.5$  cm each were present on the lower lip and contusions involving the inner aspect of both upper and lower lips corresponding to the respective teeth were present. One postmortem abrasion without any vital reaction was seen on right malar eminence of size  $4 \times 1.5$  cm (Figure 1).

Internal examination revealed that the larynx contained blood-tinged frothy fluid. Both lungs were congested and oedematous. Petechial haemorrhages were present on the surface of the left ventricle. All the organs were intensely congested. Cause of death was opined as "Asphyxia as a result of smothering".

### Case 2

The dead body of a 40-year-old male was brought for autopsy with history of RTA. According to the police



**Figure 1.** Evidences of smothering on the nose and lips of victim with post mortem abrasion without any vital reaction seen on right malar eminence.



**Figure 2.** Crush injury to trunk and limbs.

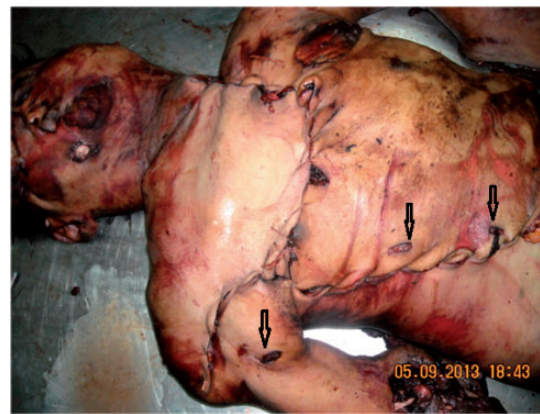
inquest, it was a unwitnessed crush by a speeding four-wheeler. External examination showed multiple crush injuries involving abdomen, chest and limbs (Figure 2). The face was deformed with multiple facial fractures. These injuries lacked vital reaction. There were also multiple spindle-shaped penetrating injuries present over chest and abdomen, all having vital reaction with sufficient depth to puncture the viscus. Penetrating injuries were better appreciated after stitching the body (Figure 3). Cause of death was attributed to "Multiple stab injuries to chest and abdomen".

### Discussion

Medico-legal masquerades may be attempted to present unnatural death as natural (or vice versa) or to conceal the true cause of death.<sup>1</sup> In a homicide case, the scene may be altered or rigged to suggest that the death resulted from suicide or accident.<sup>2</sup>

Concealment of a crime may include burning the corpse, running over by a train or motor vehicle, dropping from height or crushing by a heavy load.<sup>3</sup> Concealment of crime and masquerades to disguise the manner of death may involve the perpetrator fabricating evidence to create a false impression of accident or suicide. A case of manual strangulation was disguised as accidental electrocution.<sup>4</sup> However, in these cases two homicides were presented as traffic fatalities. RTAs form the bulk of deaths investigated at most autopsy centres,<sup>5,6</sup> and may be certified incorrectly due to apathy by the forensic pathologist.

Homicides may be staged, or vital evidence removed or tampered with if the aim is to disguise it as an accident. Medical evidence can assist when attempting to establish the intent of the accused at the time of the assault. In case 1, there were a number of factors which indicated that the victim did not die in a traffic



**Figure 3.** Penetrating injuries (indicated by arrows) over chest and abdomen, more appreciated after stitching.

accident. The key signs of road traffic fatality like bumper fractures, lack of any graze wounds or patterned abrasions were not present and autopsy findings of asphyxia all conflicted with a finding of death by RTA. Investigation revealed that the perpetrators had taken a loan from the victim for a business, but the business had failed and when the victim started asking for his money back they planned this cold-blooded murder. They took the victim to a party and induced him to drink alcohol heavily; once he was intoxicated they smothered him and then tried to present his death as caused by an accident.

In case 2, multiple “ante mortem” stab injuries were noted and though there were multiple crush lacerations, these were demonstrated to be postmortem in nature. The victim was stabbed multiple times by assailants after death and immediately run over by a vehicle used by the assailant, to make it look as if death was due to an RTA. It is important to take account of the normal number and variety of injuries in RTA victims: multiplicity and heterogeneity of traumatic wounds are the rule. While evaluating these injuries, the pathologist must check for wounds which do not “fit” into the constellation of wounds caused by an RTA.<sup>1</sup> The findings were considered in the light of the alleged circumstances of death and in both the cases medical evidence was the starting point for police investigations.

It is said that “only a small amount of suspicion is required to uncover most sinister crimes”. Forensic practitioners should always consider the possibility of faked evidence and the circumstances surrounding the case and meticulous review of the medical evidence should help to determine the truth. It should not be automatically presumed that those who are found dead in “auto-accidents” died from injuries sustained in the alleged accident. Failure to recognize the medico-legal evidence and clues may result in failure to investigate appropriately or lead to protracted and inappropriate investigations. Unbiased and careful forensic practice is essential.

## Conclusion

Forensic practitioners should always consider the possibility of manipulation or planting of evidence and the scene surrounding the case under review when the forensic evidence does not fit with it. These two cases demonstrate how medical evidence can reveal a murder presented as an accident; conversely, the failure to have regard for and give due weight to meticulous and unbiased forensic examination findings may trigger inappropriate lines of investigation and in rare cases a miscarriage of justice.

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## References

1. Adelson L. *The pathology of homicide*, 1st ed. Illinois: Charles C Thomas, 1974, p.12.
2. Reddy KSN and Murthy OP. *The essentials of forensic medicine and toxicology*, 33rd ed. New Delhi: Jaypee, 2014, p.17.
3. Mant A. Postmortem injuries. In: Tedeschi CG, Eckert WG and Tedeschi LG (eds) *Forensic Medicine: A study in trauma and environmental hazards*, 1st ed. Philadelphia: WB Saunders Company, 1977, p.1063.
4. Jambure MP, Tandle RM and Zine KU. Electrocution method to conceal homicide: a rare case report. *J Indian Acad Forensic Med* 2012; 34: 92–94.
5. Mohan Kumar TS, Kanchan T, Yoganarasimha K, et al. Profile of unnatural deaths in Manipal, Southern India 1994–2004. *J Clin Forensic Med* 2006; 13: 117–120.
6. Singh D, Dewan I, Pandey AN, et al. Spectrum of unnatural fatalities in the Chandigarh zone of north-west India – a 25 year autopsy study from a tertiary care hospital. *J Clin Forensic Med* 2003; 10: 145–152.