Infanticide

Dr. Sharad Porte M.D.(Ayu) **Apta-Vira-:** Refer to a female, capable of

Definition

The killing of the new-born infant with willful act of omission or act of commission by mother or relatives or any other person

Primary issues in Infanticide

- 1. The child was capable of survival after birth (degree of maturity).
- 2. The child was born alive & had a separate existence outside the mother's body.
- 3. The death was caused by willful act of commission or omission.

Secondary issues in Infanticide

- 1. Probable duration of life of the child after Birth
- 2. It may also be necessary to prove that the mother has recently delivered.
- 3. Connection between the newborn infant & mother

1. Probable duration of intra-uterine life of the child (Degree of maturity)

- 1. Intra-uterine Age of Neonate/ Fetus:- > 210 day = 30 week = 7 month
- 2. Weight of Neonate/Fetus:- > 1.3 kg
- 3. Crown-heel length of Neonate/ Fetus:- 35 cm (Haase's Rule)

- 1. Probable duration of intra-uterine life of the child (Degree of maturity)
- 4. Centre of Ossification of bone:Intra-uterine age of Neonate/Fetus
 a) 28th week- Calcaneum & Talus
 b) 30th week- All Sacral Vertebra
 c) 36th week- Lower end of Femur

1. Probable duration of intra-utering life of the child (Degree of maturity)

- 5. Scalp Hair -: about 2.5 cm long
- 6. Nails almost reaches the tip of finger.
- 7. Left kidney in Scrotum & Right near external ring.

2. The child was born alive & had a separate existence outside the mother's body.

Difference between born alive & Dead born

Sr.	Feature	born alive	Dead born
1	Shape of Chest	Drum like	Flat
2	Position of Diaphragm	6th – 7th Rib of level	4th - 5th Rib of level
3	Volume of Lung	Large	Small
4	Margin of Lung	Rounded	Sharp
5	Pleura of Lung	Thin, Tense	Wrinkled loose
6	Consistency of Lung	Spongy, Elastic & Crepitate	Dense, Firm, Non- crepitate like liver
7	Colour of Lung	Marble like	Reddish-Brown like liver
8	Blood in Lung	Froathy	Little Froathless
9	Weight of Lung	60 – 70 gm	30 – 40 gm
10	Hydrostatic Test	Squeezed pieces of lung float on water	Squeezed pieces of lung sink in water

Difference between born alive & Dead born

Sr.	Feature	born alive	Dead born
11	Anatomical position of Thoracic Cavity	Occupies almost whole cavity	Not Occupies almost whole cavity
12	Vessels within Lung	Prominent with increased circulation	Not Prominent & not increased circulation
13	Alveoli	Expanded & rises	Not So

above the surface

& lined with flat

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Prominent

cells, Vascularity

Alveolar sacs dilated

Microscopy

Intestine

Stomach

Milk/ Feed in

Air in Stomach &

14

15

16

Alveolar sacs closed

columnar/cuboidal

& lined with

cell

Hydrostatic Test

- 1. Definition:- Squeezed pieces of lung float on water in infant in case of respired lungs (live born) & sink in water in infant in case of non-respired lungs (dead born) is c/as Hydrostatic Test.
- 2. Principle:- Specific gravity of respired lungs (live born) is 0.94, while non-respired lungs (dead born) varies from 1.04 1.05 (Water:- 1.00)

Hydrostatic Test

1. Procedure:-

- a) Remove the lungs along with trachea, by tying at the laryngeal end & place them in a jar water & note for their floatation.
- b) The lungs are then separated & each is tested separated for presence or absence of floatation.
- c) Then each pieces of lung tested for presence or absence of floatation.
- d) Then Squeezed pieces of lung tested for presence or absence of floatation.

False positive Hydrostatic Test

A] Expanded Lungs:-

- 1. Death due to Acute oedema of the lungs
- 2. Death due to Aspiration Pneumonia
- 3. Death due to Bronchopneumonia

B] Non Expanded Lung:-

4. Atelectasis may be due to obstruction by alveolar duct membrane or due to extreme feeble respiration.

False Negative Hydrostatic Test

- 1. Presence of putrefactive gases due putrefaction
- 2. Artificial Respiration

Hydrostatic Test is not necessary

- 1. The foetus is born before 180 days of gesttation
- 2. The foetus is a monster & thereby in capable of leading a separate existence
- 3. The foetus shows signs of intra-uterine maceration.
- 4. The umblical cord has separated & the umblicus has cicatrised.
- 5. The stomach contains milk showing active digestive function

3. The death was caused by willful act of commission or omission.

The death was caused by willful act of commission

- 1. Smothering
- 2. Strangulation
- 3. Drowning
- 4. Head Injury
- 5. Multiple Injury
- 6. Poisoning
- 7. Live Burial

The death was caused by willful act of omission.

- 1. Omission to make the necessary preparation for the birth of the child (e.g. arrangement for medical aid)
- 2. Omission to tie the cord after dividing it
- 3. Omission to remove the child from the mother's discharge
- 4. Omission to protect the child from exposure to cold or heat
- 5. Omission to supply proper feeding

Secondary issues in Infanticide

Probable duration of life of the child after Birth

1. Umbilical cord

Sr. no.	Feature	Duration
1	Dry & Shrinks	12 to 24 hrs
2	Inflammatory Ring (Redness)	36 to 48 hrs
3	Shrivels up	48 to 72 hrs
4	Mummifies & falls off	5 th to 6 th days
5	Heals & Cicatrizes	10th to 12th days

Probable duration of life of the child after Birth

2. Changes in Skin

Sr.no.	Feature	Duration
1	Bright Red & covered with Vernix Caseosa	Newly born
2	Vernix Caseosa removed	1 to 2 days
3	Skin darken	2 to 3 days
4	Yellowish of Skin	3 to 6 days
5	Normal Skin	Within week

Probable duration of life of the child after Birth

3. Changes in Caput Succedaneum

Sr. no.	Feature	Duration
1	Oedematous Swelling of Scalp	Newly born
2	Caput Succedaneum disappear	After 24 hrs

Postmortem Appearance 1. External & 2. Internal

Postmortem Appearance:-1. External

Depends on Manner of Death of Infant

- 1. Clothing & Wrapping:-
- 2. Measurements:- Weight + Crown-Heel length + Crown-Rump lengths + Head Circumference
- 3. Changes of Decomposition:-
- 4. Presence/Absence of Vernix Caseosa:-
- 5. Umbilical Cord & Placenta:-

Postmortem Appearance:-1. Internal

Depends on Manner of Death of Infant

- 1. Head :-
- 2. Neck :-
- 3. Thorax:-
- 4. Abdomen:
- 5. Limbs & Sternum :- for Ossification centre.

THANK YOU