



FORENSIC MEDICAL EXAMINATION OF SEVERE BODILY INJURY IN LIVING PEOPLE

Lochinov Farhod Nazarovich

*Senior Lecturer, Department of Forensic Medicine and Medical Law, Tashkent
Medical Academy; Candidate of Medical Sciences;*

Ganieva Nilufar Khamroevna

*Senior Lecturer, Department of Forensic Medicine and Medical Law, Tashkent
Medical Academy;*

Akhmedov Zafar Khamroevich

*Assistant, Department of Forensic Medicine and Medical Law, Tashkent Medical
Academy*

Kholiyorov Navruzjon

*Assistant, Department of Forensic Medicine and Medical Law, Tashkent Medical
Academy*

Abstract: The expert conclusions conducted at the Kibray District Department of the Tashkent Regional Branch of the Republican Scientific-Practical Center of Forensic Medical Examination regarding the identification of severe bodily injuries during the years 2020–2021–2022 were studied, and statistical indicators were analyzed.

Keywords: Severe degree, bodily injury, living individuals.

Relevance of the topic: In the Republic of Uzbekistan, the rule of law is recognized as one of the fundamental principles of the country's development. In the activities of law enforcement agencies, when the issue concerns human health, life, or death, particularly in cases of serious crimes such as murder, sexual assault, intentional bodily harm, and traffic accidents, conducting forensic medical examinations is of great importance in resolving questions regarding the presence of bodily injuries, their location, mechanism of occurrence, duration, and severity.

Although the forensic medical examination service is part of the healthcare system, its main function is to resolve medical and biological issues that arise during the investigation and judicial proceedings of criminal and civil cases — that is, to conduct forensic medical examinations.

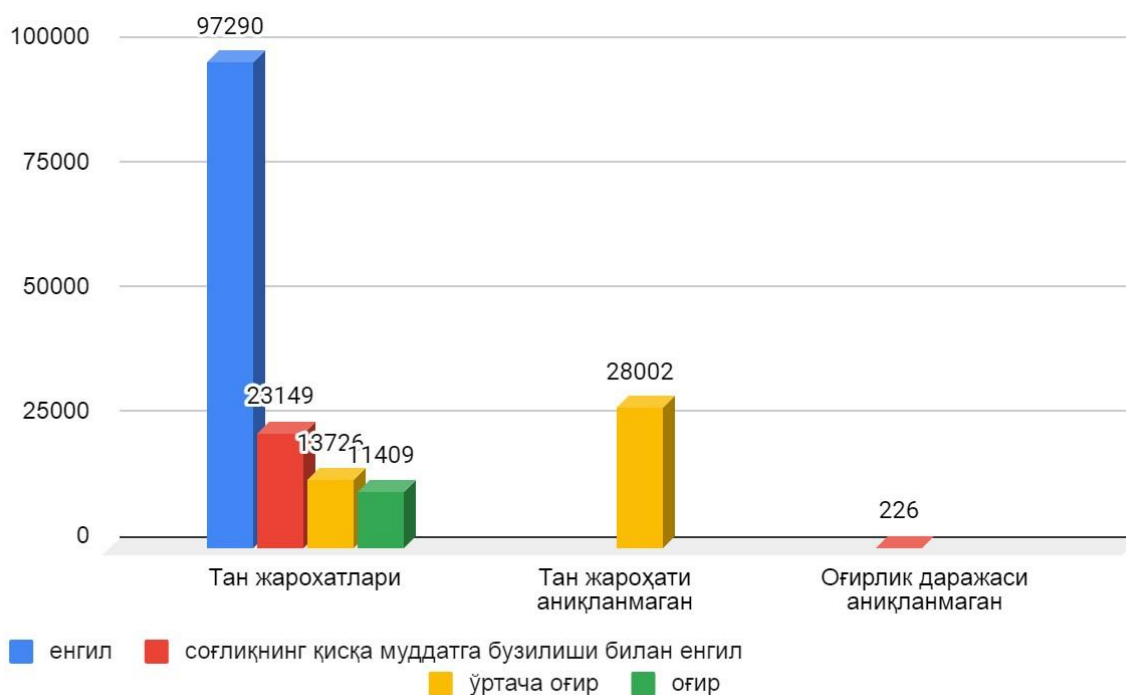




At present, it is of great importance for forensic medical institutions to develop recommendations aimed at improving the quality of medical assistance provided to the population based on examination materials, and at preventing various forms of trauma, poisoning, sudden death, and other accidents.

In criminal law, the concept of bodily injury refers to harm caused to a person's health as a result of unlawful actions committed intentionally or through negligence. Accordingly, in forensic medicine, bodily injury is assessed as a disruption of the anatomical integrity or physiological function of an organ or tissue of the body due to an external influence that leads to health impairment or death. [1, 2, 3, 4, 5]

In forensic medical practice in general, and particularly in the examination of corpses and living individuals, mechanical injuries occupy a leading position. In recent years, mechanical injuries have ranked after cardiovascular and oncological diseases in the structure of causes of death. Across all countries of the world, there has been a growing trend in recent years of an increase in injuries and, in particular, in the share of cases involving complex trauma. [6, 7, 8, 9, 10, 11, 12]



According to statistical data, in 2022, a total of 179,585 forensic examinations related to bodily injuries in living individuals were conducted across the Republic. Of these, 11,409 cases were identified as involving **severe bodily injuries**, 13,726 cases





as **moderate bodily injuries**, and 23,149 cases as **minor injuries resulting in short-term health impairment**. In 97,290 cases, **slight bodily injuries** were diagnosed. In 28,002 cases, **no bodily injury** was identified. In 226 cases, the **severity of the injury** could not be determined.

Research Objective: To conduct a forensic medical evaluation of cases involving severe bodily injuries among living individuals based on forensic medical examination materials, by means of investigation and statistical analysis.

Results and Discussion: Expert conclusions related to the identification of severe bodily injuries, conducted in 2020–2021–2022 at the Qibray District Branch of the Tashkent Regional Department of the Republican Scientific-Practical Center of Forensic Medical Examination, were studied and statistical indicators were analyzed.

In 2020, a total of 993 forensic medical examinations related to living individuals were conducted. Among all conducted examinations, 973 (98.0%) were related to bodily injuries, of which 71 (7.3%) were identified as severe bodily injuries. Specifically, of these severe injuries, 24 cases (33.8%) were determined based on signs of life-threatening conditions, and 47 cases (66.2%) were based on signs of permanent loss of more than thirty-three percent of general working capacity. Of these, 58 cases (81.7%) were caused by blunt objects and 13 cases (18.3%) by sharp objects. No severe bodily injuries caused by firearms were recorded. Among the injuries, 41 cases (57.7%) resulted from traffic accidents, 3 cases (4.2%) from industrial accidents, 19 cases (26.8%) from domestic incidents, and 8 cases (11.3%) occurred in public places. Regarding the anatomical regions of the injuries: in 28 cases (39.4%) the injuries involved the head and brain, in 10 cases (14.1%) the chest organs, in 12 cases (16.9%) the abdominal organs, in 3 cases (4.2%) the pelvic organs, and in 18 cases (25.4%) the bones of the limbs.

Severe bodily injuries were found in 61 cases (85.9%) among males and 10 cases (14.1%) among females.

When analyzed by age:

- 3 cases (4.2%) were in the 0–7 age group,
- 4 cases (5.6%) in the 7–12 age group,
- 4 cases (5.6%) in the 12–18 age group,
- 15 cases (21.1%) in the 18–30 age group,
- 17 cases (23.9%) in the 30–40 age group,
- 16 cases (22.5%) in the 40–50 age group,





- 11 cases (15.6%) in the 50–60 age group,
- and 1 case (1.5%) was above 60 years old.

Seasonal analysis showed that 24 cases (33.8%) occurred in winter, 16 cases (22.5%) in spring, 12 cases (16.9%) in summer, and 19 cases (26.8%) in autumn.

In 2021, a total of 1,294 forensic medical examinations related to living individuals were conducted. Among all conducted examinations, 1,259 (97.3%) were related to bodily injuries, of which 100 (7.9%) were identified as severe bodily injuries. Specifically, among these severe injuries, 24 cases (24.0%) were determined based on signs of life-threatening conditions, and 76 cases (76.0%) were based on signs of permanent loss of more than thirty-three percent of general working capacity. Of these, 92 cases (92.0%) were caused by blunt objects and 8 cases (8.0%) by sharp objects. No severe bodily injuries caused by firearms were recorded.

Among the injuries, 41 cases (41.0%) resulted from traffic accidents, 6 cases (6.0%) from industrial accidents, 18 cases (18.0%) from domestic incidents, and 35 cases (35.0%) occurred in public places.

Regarding the anatomical regions of the injuries: in 38 cases (38.0%) the injuries involved the head and brain, in 15 cases (15.0%) the chest organs, in 12 cases (12.0%) the abdominal organs, in 6 cases (6.0%) the pelvic organs, and in 29 cases (29.0%) the bones of the limbs.

Severe bodily injuries were found in 72 cases (72.0%) among males and 28 cases (28.0%) among females.

When analyzed by age:

- 3 cases (3.0%) were in the 0–7 age group,
- 4 cases (4.0%) in the 7–12 age group,
- 7 cases (7.0%) in the 12–18 age group,
- 22 cases (22.0%) in the 18–30 age group,
- 29 cases (29.0%) in the 30–40 age group,
- 18 cases (18.0%) in the 40–50 age group,
- 12 cases (12.0%) in the 50–60 age group,
- and 5 cases (5.0%) were above 60 years old.

Seasonal analysis showed that 29 cases (29.0%) occurred in winter, 18 cases (18.0%) in spring, 32 cases (32.0%) in summer, and 21 cases (21.0%) in autumn.





In 2022, a total of 1,083 forensic medical examinations related to living individuals were conducted. Among all conducted examinations, 1,052 (97.1%) were related to bodily injuries, of which 101 (9.6%) were identified as severe bodily injuries. Specifically, among these severe injuries, 37 cases (36.6%) were determined based on signs of life-threatening conditions, and 64 cases (63.4%) were based on signs of permanent loss of more than thirty-three percent of general working capacity. Of these, 91 cases (90.1%) were caused by blunt objects and 10 cases (9.9%) by sharp objects. No severe bodily injuries caused by firearms were recorded. Among the injuries, 56 cases (55.4%) resulted from traffic accidents, 7 cases (6.9%) from industrial accidents, 20 cases (19.8%) from domestic incidents, and 18 cases (17.9%) occurred in public places. Regarding the anatomical regions of the injuries: in 37 cases (36.6%) the injuries involved the head and brain, in 17 cases (16.8%) the chest organs, in 10 cases (9.9%) the abdominal organs, in 9 cases (8.9%) the pelvic organs, and in 28 cases (27.7%) the bones of the limbs.

Severe bodily injuries were found in 74 cases (73.3%) among males and 27 cases (26.7%) among females.

When analyzed by age:

- 4 cases (4.0%) were in the 0–7 age group,
- 7 cases (6.9%) in the 7–12 age group,
- 8 cases (7.9%) in the 12–18 age group,
- 31 cases (30.7%) in the 18–30 age group,
- 23 cases (22.7%) in the 30–40 age group,
- 12 cases (11.9%) in the 40–50 age group,
- 11 cases (10.9%) in the 50–60 age group,
- and 5 cases (5.0%) were above 60 years old.

Seasonal analysis showed that 34 cases (33.7%) occurred in winter, 18 cases (17.8%) in spring, 21 cases (20.8%) in summer, and 28 cases (27.7%) in autumn.

According to the analysis results, a total of 3,370 forensic medical examinations related to living individuals were conducted over the past three years. Among all the conducted examinations, 3,284 (97.4%) were related to bodily injuries, of which 272 (8.3%) were identified as severe bodily injuries. Specifically, among these severe injuries, 85 cases (31.3%) were determined based on signs of life-threatening conditions, and 187 cases (68.0%) were based on signs of permanent loss of more than thirty-three percent of general working capacity. Of these, 241 cases (88.6%) were caused by blunt objects, and 31 cases (11.4%) by sharp objects. No severe bodily





injuries caused by firearms were recorded. Among the injuries, 138 cases (50.7%) resulted from traffic accidents, 16 cases (5.9%) from industrial accidents, 57 cases (21.0%) from domestic incidents, and 61 cases (22.4%) occurred in public places. Regarding the anatomical regions of the injuries: in 103 cases (37.8%) the injuries involved the head and brain, in 42 cases (15.4%) the chest organs, in 34 cases (12.5%) the abdominal organs, in 18 cases (6.7%) the pelvic organs, and in 75 cases (27.6%) the bones of the limbs.

Severe bodily injuries were found in 207 cases (76.1%) among males and 65 cases (23.9%) among females.

When analyzed by age:

- 10 cases (3.7%) were in the 0–7 age group,
- 15 cases (5.5%) in the 7–12 age group,
- 19 cases (7.0%) in the 12–18 age group,
- 68 cases (25.0%) in the 18–30 age group,
- 69 cases (25.4%) in the 30–40 age group,
- 46 cases (16.9%) in the 40–50 age group,
- 34 cases (12.5%) in the 50–60 age group,
- and 11 cases (4.0%) were above 60 years old.

Seasonal analysis showed that 87 cases (32.0%) occurred in winter, 52 cases (19.1%) in spring, 65 cases (23.9%) in summer, and 68 cases (25.0%) in autumn.

Based on the above data, it was determined that 97.4% of all forensic medical examinations assigned for living individuals were conducted in relation to bodily injuries, of which 8.3% concerned severe bodily injuries. In particular, 31.3% of the severe injuries were identified based on life-threatening signs, and 68.0% were determined based on signs of permanent loss of more than thirty-three percent of general working capacity. Of these injuries, 88.6% were caused by blunt objects, and 11.4% by sharp objects. No cases of severe bodily injuries caused by firearms were recorded. The majority of the injuries were due to traffic-related trauma. When analyzing the anatomical distribution of the injuries, it was found that in 37.8% of the cases, the head and brain were affected. Furthermore, 76.1% of the severe injuries were observed in males, particularly among individuals aged 18–30 (25.0%) and 30–40 (25.4%). The highest incidence of injuries was recorded during the winter (32.0%) and spring (19.1%) seasons.





Conclusion: Based on the above, to prevent unfortunate events related to severe bodily injuries, it is crucial to study the factors contributing to such incidents and develop preventive measures. These measures should involve regular awareness campaigns on various forms of trauma at local communities, workplaces, schools, and higher education institutions. Cooperation with law enforcement agencies and healthcare workers is vital to ensure effective implementation.

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