



CODEN [USA]: IAJPB

ISSN: 2349-7750

INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES

<http://doi.org/10.5281/zenodo.3386694>Available online at: <http://www.iajps.com>

Research Article

ANALYZE THE ANTOPSY DISCOVERIES IN CASES OF DEADLY HEAD WOUNDS DUE TO STREET ACTIVITY MISCHANCES

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Article Received: July 2019

Accepted: August 2019

Published: September 2019

Abstract:

Objective: To analyze the antopsy discoveries in cases of deadly head wounds due to street activity mishances.

Material and Methods: This research was carried out at Mayo Hospital, Lahore from October 2017 to December 2018. Information was analyzed utilizing SPSS. Mean, middle and mode were calculated for quantitative factors like age and clinic remain. Frequencies and rates were calculated for subjective factors like time of the mishap, design of head damage, cranium bones were broken, and other related wounds, traveller status of perished and term of healing centre remain.

Results: Out of 550 after death cases got amid the research period, 57 (10.4%) deaths were due to head wounds. The age extended from 19 to 51 years with a mean age of (35.6 ± 7.9) years. Most (50%) of the deaths happened in the 4th decade and amid daytime 34 (59.6%). Majority of subjects kicked the bucket on spot 40 (70.1%). Most of the expired endured from more than one compartment haemorrhage 30 (52.6%) and different cranium bone breaks 24 (42.1%). November was the month in which most of the deaths happened 13 (23.1%) taken after by September 7 (17.5%). Majority (63.1%) of subjects were voyaging as travelers.

Conclusion: Head harm is one of the foremost visit causes of death in street activity mishances. Most of the deaths happen on spot sometime recently any life back can be provided to these subjects. The design of cranium breaks watched was very comparable to other research. It demonstrates that street activity mishances lead to comparable sorts of lethal head wounds all through the world. The frequencies of such wounds are more visit in creating world due to the need for activity security controls.

Keywords: Head wounds, Street activity mishances, cranium breaks.

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Please cite this article in press Nabila Kausar et al., *Analyze the Antopsy Discoveries In Cases Of Deadly Head Wounds Due To Street Activity Mishances*, Indo Am. J. P. Sci, 2019; 06(09).

INTRODUCTION:

Street activity mishaps are one of the major causes of death in created as well as creating countries [1]. In spite of the fact that this issue has been controlled exceptionally much in created nations but in creating nations like Pakistan, the condition is still declining. Street activity mishaps still stay one of the driving causes of death in youth. The major reason is that it is one of the ignored wellbeing issues in Pakistan. Around 1.2 million individuals are murdered and 50 million individuals are harmed due to street activity mishaps each year around the world [2]. In 2002, street activity mishap positioned 9th among the driving causes of malady burden bookkeeping for 2.6% of generally worldwide incapacities. In the event that expanded motorization proceeds to take after the same patterns, it is evaluated that by 2020, street activity mishaps will rank as a third driving cause of illness burden all-inclusive [3]. Concurring to a report discharged by World Wellbeing Organization on April 7th, 2004, street activity mishaps slaughter at slightest 5000 and harm 12,000 people in Pakistan each year [4]. In spite of the fact that there are numerous causes of fatalities in street activity mishaps, head damage is one of the major causes. Head harm may lead to cranium breaks, different degrees of brain parenchymal wounds and traumatic vascular wounds [5]. The last mentioned incorporates an arrangement of epidural and subdural hematomas and intracerebral haemorrhages [6]. Death due to head damage depends upon different variables counting escalated of effect on head, degree of deceleration, design of cranium bones broken, degree and destinations of parenchymal and vascular wounds, time went through from the time of damage to the specialized wellbeing care at healing center and how proficiently life bolster measures were given [7]. Unless a few security and preventive measures are entirely executed death, toll will proceed to extend and will cause noteworthy misfortune of valuable lives. The show research was conducted to find out the designs of deadly head wounds due to street activity mishaps in northern regions.

MATERIAL AND METHODS:

This research was carried out at Mayo Hospital, Lahore from October 2017 to December 2018. Out of 550 dissections carried out amid these 5 years, a add up to of 57 comprised deaths auxiliary to head wounds coming about from street activity mishaps. All cases gotten due to death auxiliary to causes other than head wounds were avoided. Since we perform post-mortem examinations on serving officers and male representatives of defence powers as they were, all cases were male. Factors were the age of the

expired, time of mishap, design of vascular damage (extradural, subdural, intracerebral or combination of these), cranium bones were broken, single or numerous with portrayal of anatomical destinations, other related wounds, status of the perished (whether traveller or driver), length of clinic remain, calendar month of mishap. Information was analyzed utilizing SPSS. Mean, middle and mode were calculated for quantitative factors like age and healing centre remain. Frequencies and rates were calculated for subjective factors like time of mischance, design of head harm, cranium bones were broken, other related wounds, traveller position, the status of perished and length of healing centre remain.

RESULTS:

Out of 550 dissections gotten amid the research period, 57 (10.4%) deaths were due to head wounds. All cases were males. The age extended from 19 to 51 years with a mean age of (35.6 ± 7.9) years. The healing centre remains extended from 1 hour to 14 days with a mean of (2.7 ± 3.8) hours. Out of add up to of 57 cases, 34 (59.6%) deaths happened amid day time and 23 (40.4%) deaths happened amid the evening. Most deaths happened in 4th decade (50.9%), taken after by third (26.3%) and fifth decades (21%) of life (Figure). There was as it were one (1.8%) individual who passed on at the age of 19 years. A add up to of 40 (70.2%) harmed people passed on on spot. The remaining 17 (29.8%) were gotten lively in different adjacent clinics. Seven (12.3%) patients kicked the bucket inside 5 hours, 2 (3.5%) between 5-10 hrs, 4 (7%) might remain lively for 21-24 hrs and 1 (1.8%) each for 2 days, 5 days, 10 days and 14 days individually. Concurring to history all these patients who were gotten lively were given full life bolster. Fifteen (26.3%) cases had no cranium bone breaks at all, 10 (17.5%) patients maintained more than 2 cranium bone breaks and rest 14 (24.6%) had two cranium bone breaks (Table 1). Out of 18 (31.6%) subjects which gotten single cranium bone break, the foremost visit bone broken was worldly (44.4%), taken after by occipital (27.8%), frontal (16.7%) and parietal and sphenoid (5.6%) each. Out of these 57 cases, more than half 30 (52.6%) subjects displayed with haemorrhage in more than one vascular compartment. The foremost visit design was a combination of extradural and intracerebral hematomas i.e: 18 (60%). This was taken after by extradural and subdural 6 (20%), extradural and subarachnoid 3 (10%) and subdural and intracerebral 3 (10%). (Table 2). Out of 27 (47.4%) single compartment haemorrhage, the foremost visit was extradural 15 (55.6%), taken after by subdural 7 (25.9%), subarachnoid 3 (11.1%) and intracerebral 2 (7.4%). There were no wounds to

other body parts in 14 (24.6%) cases. Out of the remaining 43 (75.4%) cases, there were 12 (28%) with rib breaks, 5 (12%) cases with lung gashes, 4 (9%) with facial bone breaks, 5 (12%) with spinal wounds and 1 (2%) each for pelvic, lower appendage, liver and tracheal wounds. A add up to of 13 (30%) cases gotten more than two wounds other than head wounds. Around 36 (63.2%) subjects were voyaging as travellers and 19 (33.3%) as drivers. Two (13.5%) subjects were people on foot when they experienced mischances. Most deaths happened on November 13 (23%) and September 7 (12%), taken after by October 5 (9%). Other calendar months did not appear noteworthy with respect to mischance recurrence. Out of add up to of 8 subjects experiencing transient bone breaks, 4 passed on spot

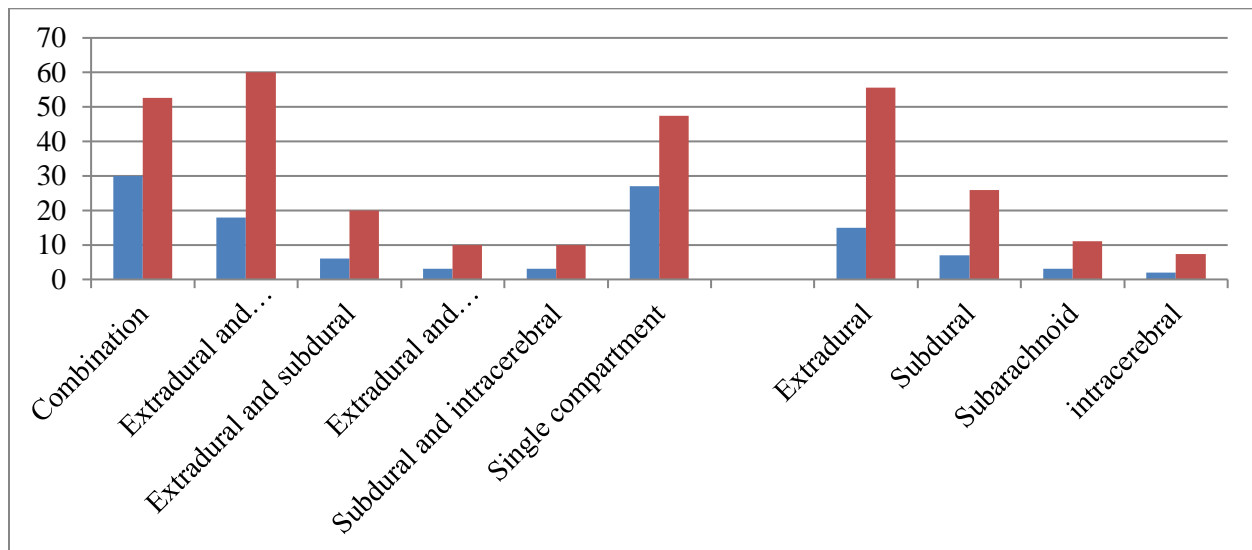
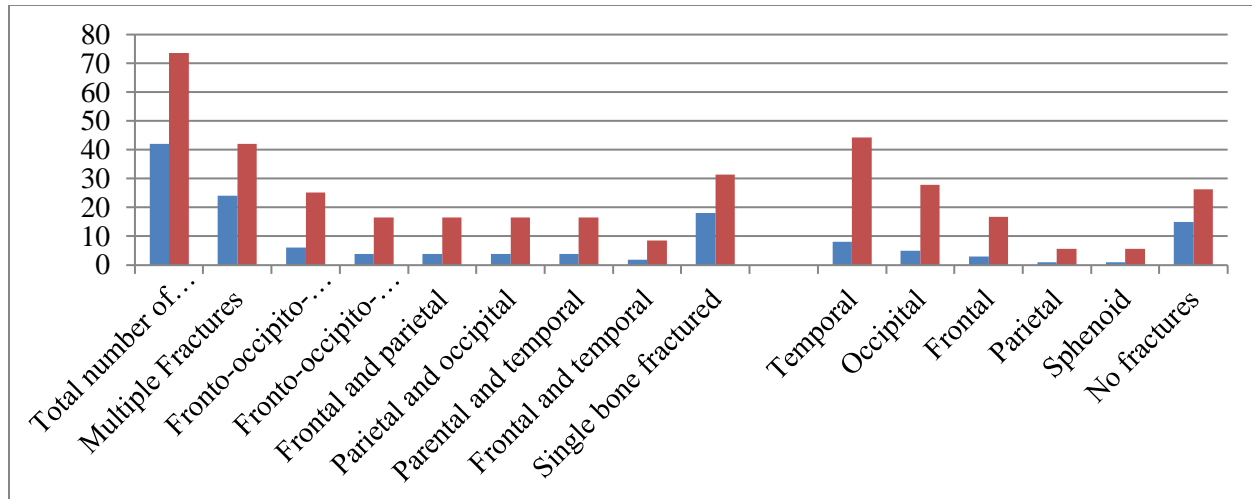
and 4 were gotten lively in clinics. Of the afterwards, 2 remained lively for 24 hrs, 1 for 5 days and 1 for 14 days. All of the 5 subjects with occipital bone breaks kicked the bucket on spot. Out of 24 subjects getting different cranium breaks, 20 kicked the bucket on spot. Of the remaining four, 2 seem to remain lively for less than 5 hrs and other two for 24 hrs. There were 15 cases which did not experience any break but however, 7 kicked the bucket on spot. Out of the remaining 8 which were gotten lively, 4 might remain lively for less than 5 hrs, 2 for 1 day, 1 for 2 days and 1 for 10 days. Out of 19 subjects which were drivers, most visit haemorrhage was extradural taken after by different hematmata. Of 36 subjects voyaging as travellers, most had more than one vascular harm on after death examination.

Table-1: Skull bone fractured (n=57)

Fracture	Number	Percentage
Total number of cases fractured	42	73.6
Multiple Fractures	24	42.1
Fronto-occipito-temporal	6	25.1
Fronto-occipito-parietal	4	16.6
Frontal and parietal	4	16.6
Parietal and occipital	4	16.6
Parietal and temporal	4	16.6
Frontal and temporal	2	8.5
Single bone fractured	18	31.5
Temporal	8	44.4
Occipital	5	27.8
Frontal	3	16.7
Parietal	1	5.6
Sphenoid	1	5.6
No fractures	15	26.4

Table-2: Pattern of cranial hemorrhage (n=57)

Type of hemorrhage	Number	%
Combination	30	52.6
Extradural and intracerebral	18	60
Extradural and subdural	6	20
Extradural and subarachnoid	3	10
Subdural and intracerebral	3	10
Single Compartment	27	47.4
Extradural	15	55.6
Subdural	7	25.9
Subarachnoid	3	11.1
Intracerebral	2	7.4



DISCUSSION:

In this study, fatalities due to head harm comprised 10.4% of all deaths. All the perished were males as we dissection male warriors as they were. In research based on the common populace, most of the patients are males since the sexual orientation uncovered more to activity risks on urban roads [7, 8]. Subsequently, in spite of the fact that our research had a solid sex inclination, our comes about are still reliable with accessible information [7, 8]. The foremost common age groups influenced in this study was the fourth decade taken after by the third. These come about were congruous with thinks about from other countries [9, 10]. This age bunch comprising breadwinners for their families travel more. This research was carried out on armed force troopers but most of the mischances happened when they were voyaging in open or private vehicles on their way to homes to visit their families or returning to their units

after occasions. As most of the deaths happened whereas voyaging in open transport, they were uncovered to the normal activity conditions fair as connected to the common populace. Most of the deceased suffered from multiple skull bone fractures (n=24, 42.1%). There was no skull bone fracture in 26.4% of cases. Out of the cases which suffered from single bone fractures, the most frequent bone fractured was temporal bone (n=8, 44.4%), followed by occipital bone (n=5, 27.8%). The results were identical to an Indian study [11]. The probable reason for multiple skull bone fractures is the very high speed at which vehicles move on highways. So, accidents which occur at high speeds cause a great impact on the head when it strikes by forcible contact with a broad resisting surface. and intracerebral haemorrhage. Out of the remaining cases with single compartment haemorrhages, the most frequent were extradural haemorrhage followed by subdural

haemorrhage. In other studies, the combination of haemorrhages was less frequent [12]. When frequencies of single compartment haemorrhages were compared, an expansive number of research uncovered subdural haemorrhage as the visit gather which was not steady with our research where the visit single compartment haemorrhage was extradural taken after by subdural [13, 14]. Most of the subjects (n=40, 70.1%) kicked the bucket on spot. The remaining 17 (29.9%) cases were gotten lively in different adjacent healing centres and remained lively for a least of 1 hour to a greatest of 14 days as specified in comes about. These come about were coordinated with a couple of worldwide studies [12 – 13]. In our study, as in other full life bolster was accessible at the healing centres in which these subjects were gotten lively. The larger part of these subjects was voyaging as travellers. Most (n=34, 59.5%) of the mishaps happened during the day time in our study, within the months of October (9%) and November (23%). These come about were comparable with a number of studies and were diverse from other studies distributed. The most extreme number of deadly mischances took put amid the month of November in one Indian report [11]. In Nepal, most extreme numbers of cases were detailed within the month of July taken after by January. In other thinks about conducted in India, the comes about shown greatest numbers of casualties amid the month of January with the top time of street activity mishaps between 3 PM to 6 PM [15, 16]. The studies conducted in Mangalore and Kathmandu (Nepal) demonstrated that most of the mischances happened amid the evening and evening hours [17, 18].

CONCLUSION:

Head harm is one of the vital causes of death in street activity mischances. Most of the deaths happen on spot sometime recently any life bolster can be grant to these subjects. It is critical to progress pre-hospital as well as clinic offices to bargain with lethal head wounds. The design of cranium breaks watched in our study was very comparable to other studies. it demonstrates that street activity mishaps lead to comparable sorts of deadly head wounds all through the world. The frequencies of such wounds are more visit in creating world due to the need for activity security controls. Huge scale studies are required to form suggestions for making strides the vehicle plans, street security measures and centring on executions of activity legislations covering all the angles of street activity mischances. These thinks about the will to give rules for building up conceivable crisis, to begin with, help giving restorative and protect offices.

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