

FORENSIC MEDICAL ANALYSIS OF THE NATURE AND SEVERITY OF MECHANICAL DAMAGE TO THE EXTERNAL GENITAL ORGANS IN VICTIMS

Mavlyanov Sanjar Norbutaevich, Mustafaeva Gulnara Konisbaevna
Karakalpak Branch of the Republican Scientific and Practical Center for
Forensic Expertise. Nukus, Uzbekistan

ANNOTATION

The article systematizes mechanical injuries to the genitals and genital organs in victims. In order to objectify forensic medical reports to establish the severity of injury to the genital organs of victims, the authors analyzed the most common states of injuries to these structures, providing for clinical and morphological aspects of the injuries. It is noted that, in accordance with the current forensic medical rules, qualifying medical criteria for injuries to the victims genital organs can be: duration of health disorder; volume of permanent loss of general ability to work; loss of an organ or its function; danger to life; mental disorder.

Keywords: external genitalias, women, femal, injuries, morphology, consequences, forensic significance, forensic aspects.

К СТАТЬЕ О СУДЕБНО-МЕДИЦИНСКОЙ АНАЛИЗ ХАРАКТЕР И СТЕПЕНЬ ТЯЖЕСТИ МЕХАНИЧЕСКИХ ПОВРЕЖДЕНИЙ НАРУЖНЫХ ПОЛОВЫХ ОРГАНОВ У ЛИЦ ПОСТРАДАВЩИХ

АННОТАЦИЯ

Мавлянов Санжар Норбутаевич, Мустафаева Гулнара Конисбаевна.

Каракалпакский филиал Республиканского научно-практического центра судебно-медицинской экспертизы МЗРУз, г.Нукус, Узбекистан

В статье систематизированы механические травмы гениталий и половых органов у лиц пострадавших. В целях объективизации судебно-медицинских заключений по установлению степени тяжести травмы половых органов у лиц, авторами проанализированы наиболее распространенные состояние травм этих структур, предусматривающие клинические и морфологические аспекты повреждений. Отмечено, что в соответствии с действующими судебно-

медицинскими правилами, квалифицирующими медицинскими критериями травм половых органов пострадавших могут быть: длительность расстройство здоровья; объем стойкой утраты общей трудоспособности; потеря органа или его функции; опасность для жизни; психическое расстройство.

Ключевые слова: наружные половые органы, мужчины, женщины, повреждения, морфология, последствия, судебно-медицинское значение, судебно-медицинские аспекты.

FORENSIC MEDICAL ANALYSIS OF THE NATURE AND SEVERITY OF MECHANICAL DAMAGE TO THE EXTERNAL GENITAL ORGANS IN VICTIMS

Mavlyanov Sanjar Norbutaevich, Mustafaeva Gulnara Konisbaevna
Karakalpak Branch of the Republican Scientific and Practical Center for
Forensic Expertise. Nukus, Uzbekistan

Introduction. Damage to the external genitalia from mechanical factors can be isolated, affecting only the structures of the external genitalia, or combined - in combination with trauma to the structure and organs of the pelvis, most often with fractures of the pelvic bones or trauma to the structures of the perineum [9]. Isolated injuries to the external genitalia occur as a result of a direct blow to the genital area with blunt hard objects or from direct exposure to sharp objects. Forensic medical aspects of genital injuries are not sufficiently covered in the literature [2, 6]. In this regard, at present, when establishing a mechanism for the formation and qualification of the severity of damage to these structures in the process of forensic medical examination of living persons, significant difficulties arise.

Purpose of the study - establishing the nature and severity of isolated damage to the external genitalia from exposure to mechanical factors.

Materials and Methods. An analysis of educational and scientific literature on this problem and practical observation related to trauma to the genital organ in a male person was carried out.

Results and Discussion. It has been noted that with a direct blow to the perineum, women develop bruises in this area and ruptures of the vaginal walls.

Under these circumstances, damage to the urethra in women is rare, compared with men, which is explained by the short length of these structures in women [1, 3].

Injuries to the testicles and their appendages are a fairly pure type of injury from blunt objects. There are bruises, compression, concussions, dislocations, ruptures and separations of the testicles and appendages. Bruise, concussion and compression lead to the formation of hemorrhages in the testicular parenchyma, which is accompanied by impaired blood circulation in the testicular tissue. Spermatogenic testicular tissue is most sensitive to hypoxia caused by circulatory disorders. In addition, after testicular trauma, epididymitis orcho, hydrocele and funiculocoele often develop. All these conditions lead to secondary infertility [4, 5, 7]. Post-traumatic fibrosis involving the spermatic cord can also lead to persistent and azoospermia. In this case, it is also necessary to take into account the possibility of developing a traumatic painful shock when struck with blunt objects in the area of the scrotum and testicles. Consequently, the above conditions can cause loss of the ability to fertilize, which allows the severity of the injury to be classified as grievous bodily harm. In this case, it is also necessary to take into account the possibility of developing a traumatic painful shock when struck by blunt objects in the area of the scrotum and testicles [8].

As can be seen from the above, damage to the external genitalia caused by blunt objects is characterized by polymorphism. They often pose a danger to life, for example, with the development of painful (traumatic) and hemorrhagic shock. In addition, the consequences of injury significantly reduce productivity, especially in males. Damage to the structure of the genital organs caused by sharp objects is not sufficiently covered in the literature. Below is an example where a penile injury was sustained as a result of exposure to a sharp object.

Example. M. 31 years old, being in a drunken state, at the request of his illegitimate wife, he agreed to have sexual intercourse and before copulation he felt a sharp pain in the tense penis and noticed bleeding from it. It turned out that his illegitimate wife cut his penis with a knife and ran away. I went to the nearest medical facility myself. Complaints of a bleeding wound in the penis and general weakness. When examined along the front surface of the body of the field member,

there is a crescent-shaped wound, measuring 6.0x0.7 cm, with equal, smooth edges and sharp ends, the wound is actively bleeding. At the bottom of the wound, a complete incision of the urethra and cavernous body of the penis is revealed. Under general anesthesia, a PSO operation was performed to close the wound of the urethra and corpus cavernosum. A Foley catheter was installed in the bladder. Homostasis was created and an aseptic dressing was applied. Clinical diagnosis: Incised wound of the penis with damage to the urethra and corpus cavernosum. Hemorrhagic shock 1-2 degrees. He was in the hospital for 8 days, outpatient treatment was prescribed. As a long-term consequence of the injury, a scar was found on the skin of the penis with a smooth surface; no deformations of the penis, disturbances in sensitivity or urination were detected. Taking into account the duration of the health disorder, the above-mentioned injury to the penis was classified by a forensic expert as a minor bodily injury, resulting in a short-term health disorder.

The rule for forensic medical determination of the degree of severity of bodily injuries (Appendix № 2 to the order of the Ministry of Health of the Republic of Uzbekistan № 153 dated June 1, 2012), in relation to the qualification of the degree of severity of injuries to the genital organs, reflects the following data.

A. 15 section III. The medical criteria for grievous bodily injury are: 15.21. damage (crushing, separation, rupture) of the pelvic organs: open and (or) closed injury to the bladder or membranous part of the urethra, or ovary, or fallopian tube, or uterus, or other pelvic organs (prostate, seminal vesicles, vas deferens); 15.22. a wound to the wall of the vagina or rectum, or perineum, penetrating into the cavity and (or) pelvic tissue; 15.27. blunt trauma to reflexogenic zon: the area of the larynx, the area of the carotid sinuses, the area of the solar plexus, the area of the external genitalia in the presence of life-threatening conditions specified in paragraph 16 (clinical and morphological data); loss of productive capacity, expressed in men in the ability to copulate or fertilize, in women - in the ability to copulate or conceive, or bear fruit, or bear children; 20.3. loss of one testicle (ovary), kidney.

Based on the above and other data set out in the “Rule”, the qualifying criteria for forensic medical qualification of the severity of isolated mechanical injuries of

the external genitalia may be danger to life, loss of an organ or complete loss of its function by an organ, as well as the duration of the health disorder.

Conclusions.

1. Isolated mechanical damage to the external genitalia is most often observed from the impact of blunt and sharp objects, which may be accompanied by injury to internal and adjacent structures. The impact of blunt objects in females in the area of the external genitalia most often causes bleeding (hematomas) and ruptures of the vaginal walls, and sometimes ruptures of the urethra.

2. Injuries to the testicles, appendages and penis (bruises, compression, concussion, dislocations, ruptures, separations of the testicles, appendages and wounds) are some of the types of injuries in males that can cause loss of the ability to copulate and fertilize. In addition, when struck with a blunt object in the area of the scrotum and testicles, painful traumatic shock can develop, and when damaged by sharp objects, hemorrhagic shock can develop.

3. Consequently, the criteria for forensic medical qualification of the severity of damage to the external genital organs may be danger to life, loss of an organ or complete loss of an organ's function and duration of health disorder.

REFERENCES

1. Pavlenko N.I., Pisklakov A.B. Injuries of the external genitalia in girls. Russian Bulletin of Pediatric Surgery, Anesthesiology and Reanimatology. Volume 12, №. 1, 2022. p 31-40. doi: <https://doi.org/10.17816/psaic1019> (In Russ.).

2. Forensic medicine: national guide / ed. Yu. I. Pigolkina. — 2nd ed., revised. and additional — Moscow: GEOTAR-Media, 2021. — 672 p (In Russ.).

3. Urology. National leadership. Ed. acad. N.A. Lopatkina. Moscow. Geotar-Media, 2009, pp. 751-783. UDC 616.6(08313) BBK 56.9 (In Russ.).

4. Fesenko V.N., Mikhailichenko V.V., Aleksandrov V.P., Vavilov V.N. Phallorethroplasty with a free flap for traumatic loss of the penis // Urology. - 2006. - №. 2. — p. 79–81 (In Russ.).

5. Yarovoy S.K., Khromov R.A., Voskanyan Sh.L. Epidemiological aspects of scrotal and testicular trauma in a modern metropolis. Research and practice in

medicine 2018, vol. 5, no. 3, art. 85-95 Doi: 10.17709/2409-2231-2018-5-3-8 (In Russ.).

6. A Kbirou, I Jandou, M Sayah, H Benhadda, A Moataz, M Dakir, A Debbagh, R Aboutaieb/ Forensic aspects of trauma to the male external genitalia (TMEG), analysis of a series of 84 cases/ Ann Med Surg (Lond). 2022 Jun 6;79:103916. doi: 10.1016/j.amsu.2022. 103916.eCollection 2022 Jul.

7. Bertrand L.A., Warren G.J., Voelzke B.B. et al. Lower urinary tract pain and anterior urethral stricture disease: prevalence and effects of urethral reconstruction. J Urol 2015;193(1): 184–189. Doi: 10.1016/j.juro.2014.07.007.

8. Joseph S. Dolina 8 Joey, Lee Ryan Q. Griswold, Margot J. Pont, Michael Croft, Stephen P. Schoenberger, Show all authors, Show footnotes, Article| Volume 31, ISSUE 1, 107249, April 07, 2020

9. Merritt D. Genital trauma in children and adolescents // Clin Obstet Gynecol. 2008. Vol. 51. No. 2. P. 237–248, doi: 10.1097/GRF.0b013e31816d223c;