

Medico-legal Issues Leveled against Forensic Physicians in Pre-screening of Detainees

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Recording of statements without assessing the FTI is another medico-legal issue and such statements taken by the custodians become invalid in the court of law. FTI can be affected by under influence of alcohol, substance abuse, learning disabilities, psychiatric illnesses, physical illnesses such as epilepsy, head injury, migraine, hypothyroidism, diabetes mellitus, dementia etc. [2]. If the forensic physician's pre-screening for FTI was not performed properly, the detainees can challenge the forensic physician's opinion at the court of law.

Some detainees are under influence of alcohol and it can affect FTI. Severe alcohol intoxication is considered as unfit to be interviewed. Deterioration of short-term memory occurs at lower levels as 70 mg/100 ml but the ultimate decision of FTI in alcohol intoxication should be determined by the clinical assessment of the physician rather than the blood alcohol concentration. Further, alcohol withdrawal states such as "hangover" can affect interrogation [7].

Substance misuse also can affect FTI. Both drug intoxication and withdrawal states are considered as unfit for interview. Intoxication with substance misuse is easy to recognize. However, with the hallucinogenic substances such as LSD, the mental state may fluctuate. Further, the drug withdrawal states are vulnerable to provide false confessions and therefore, such withdrawal effects should be treated before recording a statement [8].

Learning disabilities of detainees also can affect FTI. If moderate or severe learning disability, it can be recognized but the mild learning disability may not be obvious. Further, the detainees with such disabilities are vulnerable in police custody and they show disabilities in understanding their legal rights and in communicating with custodians [9]. The psychiatric illnesses also can affect FTI. Of them, the functional psychiatric illnesses such as anxiety, depression are vulnerable to give false confessions [10]. The psychotic illness such as schizophrenia does not necessarily mean that the detainee is unfit for interview and such an opinion would depend on functional assessment of the physician. The physical illnesses such as epilepsy, head injury, migraine, hypothyroidism, diabetes mellitus, and dementia also can affect FTI. Most epileptic patients are mentally normal. However, during aura, the detainees may have distorted perceptions or hallucinations. In absences or petit mal epilepsy, several such absences may occur in quick succession, producing significant gaps in memory [2]. During Post-ictal period, the recollection may be unreliable [10].

could be done by the custodians. Further, some medico-legal issues that are faced by the forensic physicians can be overcome by perusing the medical notes of the prison hospital. Sometimes, detainees make false medical complains to obtain bail. Such conditions cannot be usually detected by an ordinary clinical examination of the forensic physician and medical observations over a long period by the medical officers of prison hospital are beneficial. In such circumstances, the bed head ticket (BHT) of prison medical officers' regarding the daily observations of the detainees could be considered. Therefore, maintaining of good medical notes by the prison medical officers with accurate injury descriptions are encouraged to achieve justice and to overcome subsequent medico-legal issues. Further, the medico-legal issues can be overcome by inviting the forensic physicians to conduct regular clinics at the places of detention. In conclusion, several medico-legal issues arise and allegations are leveled against forensic physicians if no proper pre-screening of detainees is performed. At the same time, in pre-screening, the forensic physician has to perform dual roles; documentation and evaluation of evidence for criminal purposes, and save the lives of the detainees and uphold the dignity for humanitarian purposes. Therefore, adoption of proactive preventive medico-legal measures by the forensic physicians during pre-screening is reiterated. If an allegation is raised against a forensic physician, meticulous medico-legal investigations should be conducted to overcome such allegations.

References

1. Richards PM, Wortzel HS (2015) Avoiding Dual Agency in Clinical and Medicolegal Practice. *Journal of Psychiatric Practice* 21: 370-373.
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