



**STUDY OF CUSTODIAL DEATHS IN SAFDARJUNG HOSPITAL, NEW DELHI- AN  
AUTOPSY BASED RETROSPECTIVE STUDY**

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**ABSTRACT**

Death occurring in some form of custodial detention is commonly known as death in custody, such as police cell or prison. It should also include deaths resulting from police or prison officers attempting to detain a criminal or a person escaping or attempting to escape from police custody or prison. Custodial death is one of the worst crimes in a civilized society governed by Rule of Law. The occurrence of custodial deaths in India which is the world's largest democracy has raised eyebrows of every citizen and shaken the faith in democracy. Incidences of police torture often hit the headlines and expose police to severe public criticism. Although the frequency of the deaths is very low, the criticality of its occurrence requires attention to the subject matter. The central problem in a sudden custodial death is identifying the exact cause of death. Hence we carried out an autopsy based retrospective study in the Department of Forensic Medicine and Toxicology, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi. The study included all the custodial death cases brought for medicolegal autopsy in the mortuary of the hospital in last 5 years i.e. from January 2016 to December 2020. Total 45 custodial death cases were brought for autopsy during this period and they were studied retrospectively. Majority of custodial death cases were in the age group of 21-40 years. About 86.7% of custodial deaths were male and only 13.3% were female, showing male predominance. Majority of custodial deaths (95.6%) occurred in hospital while undergoing treatment. Majority of custodial death cases 33 (73.3%) were under trial prisoners who were lodged in jails. In majority of cases (84.4%) the cause of death was found to be natural due to the diseases of different body organs or systems while in 13.3% cases the cause of death was unnatural. In case of deaths due to natural causes majority of patients (36.8%) died due to diseases involving lungs like Pulmonary Tuberculosis and other lung diseases, followed by diseases involving multiple organs (23.7%). Out of total 6 unnatural custodial death cases 2 cases each were burns and fall and 1 case each was stab and head injury.

These findings of this study however rules out any physical violence by police or jail authorities in most of the cases but it suggest improper health care facilities in jail, overcrowding, poor hygienic conditions in prisons and delay in responding to the medical issues of the jail inmates.

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**INTRODUCTION**

Death occurring in some form of custodial detention is commonly known as death in custody, such as police cell or prison. It should also include deaths resulting from police or prison officers attempting to detain a criminal or a person escaping or attempting to escape from police custody or prison.<sup>1</sup> The sudden death of an arrestee, a detainee in police/detention custody, after a violent encounter, is an unexpected event that can create significant impact on the criminal justice system, the community at large and the medical community. The central problem in a sudden custodial death is identifying the exact cause of death. Determining the manner and cause of death can be problematic as there are generally a myriad factors that are involved in the incident.

Although a sudden death in the custody can involve innumerable factors, some of the more common features may include behaviour and condition of the decedent, type of force and force equipment employed by police officers, methods employed for monitoring the person after restraint, thoroughness of the investigation after the incident, medical or psychological issues involved, thoroughness of an autopsy, influence of chemicals that the decedent may have consumed and toxicology findings, and determination of the manner and cause of death by a forensic expert. Custodial death is one of the worst crimes in a civilized society governed by Rule of Law. The occurrence of custodial deaths in India which is the world's largest democracy has raised eyebrows of every citizen and shaken the faith in democracy. Incidences of police torture often hit the headlines and expose police to severe public criticism. Although the frequency of the deaths is very low, the criticality of its occurrence requires attention to the subject matter.<sup>2</sup>

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Police officers confront a wide variety of situations in the course of performing their duties. They can encounter situations that can range from a minor concern to a more serious lethal force incident. With some frequency, they also interact with individuals who exhibit various bizarre behaviours that may result from the influence of chemical substance or a mental impairment. When dealing with these types of individuals, the probability that an officer will have to use an elevated use of physical force increases.<sup>3,4</sup>

An integral element of forensic pathology is the correlation between the circumstances of death and the pathological and toxicological findings of the postmortem examination. A sudden custodial restraint death frequently demonstrates less pathological elements than it may be found in other death cases. With less anatomical findings, history, circumstantial, and scene investigation examination becomes of paramount importance.<sup>5-10</sup>

The Human Rights Commission of India, constituted under The Protection of Human Rights Act 1993, for better protection of human rights and for matters concerned therewith or incidental thereto, necessitates reporting of custodial deaths within 24 hours and to conduct a post-mortem examination by a board of doctors including video filming of the procedure and this speaks of the gravity of concern of the Commission. The National Human Right Commission (NHRC) report from 2001-2002 to 2006-2007 showed an increase in custodial deaths all over India. Though majority of the cases in custody die due to natural causes, but issues such as negligence in medical aid or improper healthcare facilities can not be ruled out.<sup>11,12</sup>

Hence this study was done in Safdarjung hospital, New Delhi to know the pattern of custodial deaths so that awareness can be created among the law enforcement agencies to take proper care of the person in custody.

**MATERIALS AND METHODS**

**Source of data-**The present autopsy based retrospective study has been carried out in the Department of Forensic Medicine and Toxicology, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi. The study included all the custodial death cases brought for medicolegal autopsy in the mortuary of Department of Forensic Medicine and Toxicology, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi in last 5 years i.e. from January 2016 to December 2020. Total 45 custodial death cases were brought for autopsy during this period and they were studied retrospectively. These cases included the persons died in police custody or jail or were referred to the hospital for treatment from the jails who died subsequently. Their dead bodies were subjected to medico-legal autopsy by a medical board of doctors as required by Indian laws on the requisition of judicial magistrates.

**Ethical clearance-** Ethical clearance for this study was obtained from the Institution’s Ethical Committee, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi prior to the conduction of study.

**Method of collection of data-** The data were collected from the post-mortem reports, medical records, police inquest papers, toxicological analysis and histopathological examination reports of the cases.

**Methodology for data analysis-** Data thus collected was analyzed and presented in the form of tables wherever necessary and compared with other studies.

**OBSERVATIONS AND RESULTS**

During the study period from January 2016 to December 2020, autopsy findings of total 45 cases were studied retrospectively in the Department of Forensic Medicine, Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi.

The observations of this study are as follows-

**Table1** Year-wise distribution of cases (n=45)

Year	Number of cases	Percentage (%)
2016	2	4.4
2017	12	26.7
2018	11	24.4
2019	13	28.9
2020	7	15.5

The total number of custodial death cases reported to Safdarjung hospital, New Delhi in the year 2019 were 13 (28.9%) followed by 2017, 12 (26.7%) cases and 2018, 11 (24.4%) cases.

**Table 2** Age-wise distribution of cases (n=45)

Age (years)	No. of cases	Percentage (%)
0 to 20 Years	0	0
21 to 40 Years	20	44.4
41 to 60 Years	16	35.6
Above 60 years	9	20

Majority of custodial death cases were in the age group of 21-40 years (44.4%) followed by 41-60 years (35.6%), while no case was reported in the age group of 0-20 years.

**Table 3** Sex-wise distribution of cases (n=45)

Sex	No. of cases	Percentage (%)
Male	39	86.7
Female	6	13.3

About 86.7% of custodial deaths were male and only 13.3% were female, showing male predominance.

**Table 4** Place of death-wise distribution of cases (n=45)

Place of death	No. of cases	Percentage (%)
Jail	2	4.4
Hospital	43	95.6

Majority of custodial deaths (95.6%) occurred in hospital while undergoing treatment.

**Table 5** Legal status-wise distribution of cases (n=45)

Legal status	No. of cases	Percentage (%)
Convicted	9	20
Under trial prisoner	33	73.3
Police custody	3	6.7

Majority of custodial death cases 33 (73.3%) were under trial prisoners who were lodged in jails while 3 (6.7%) persons died in police custody either in police station or while being taken to the court.

**Table 6** Cause of death-wise distribution of cases (n=45)

Cause of death	No. of cases	Percentage (%)
Natural	38	84.4
Unnatural	6	13.3
Pending	1	2.2

In majority of cases 38 (84.4%) the cause of death was found to be natural due to the diseases of different body organs or

systems while in 6 (13.3%) cases the cause of death was unnatural and in 1 case (2.2%) the cause of death was kept pending as the chemical analysis report of viscera and histopathological examination report were awaited.

**Table 7** Disease-wise distribution of natural death cases (n=38)

Name of organ/ Disease	No. of cases	Percentage (%)
Brain	4	10.5
Lungs	14	36.8
Heart	3	7.9
Liver	2	5.3
GIT	2	5.3
Multiple organs	9	23.7
Septicaemia	4	10.5

In case of deaths due to natural causes majority of patients (36.8%) died due to diseases involving lungs like Pulmonary Tuberculosis and other lung diseases, followed by diseases involving multiple organs (23.7%).

**Table 8** Cause of death-wise distribution of unnatural death cases (n=6)

Cause of death	No. of cases	Percentage (%)
Burns	2	33.3
Fall	2	33.3
Stab	1	16.7
Head injury	1	16.7

Out of total 6 unnatural custodial death cases 2 cases each (33.3%) were burns and fall and 1 case each (16.7%) was stab and head injury.

**DISCUSSION**

The present study reported total 45 custodial death cases in 5 years which were brought to Safdarjung hospital, New Delhi for the treatment and medicolegal purpose, with an average of about 1 case per month in the year 2017, 2018 and 2019. The retrospective study done by Bhullar DS *et al* in Rajindra hospital, Patiala for a period of 2 and half years i.e. from January 2015 to June 2017 reported 40 custodial death cases with an average of 1 to 2 cases per month.<sup>13</sup>

Maximum deaths in the present study occurred in the age group of 21-40 years (44.4%) followed by 41-60 years (35.6%), while no case was reported in the age group of 0-20 years. These findings are almost similar and comparable with the earlier study<sup>13</sup> where maximum deaths occurred in the age group of 21 to 40 years (35.0%) followed by age group of above 60 years (32.5%) with minimum deaths (12.5%) in the age group of 0 to 20 years. The custodial deaths of young generation of 21-40 years may be from any reason, is a cause of grave concern for the authorities and require urgent attention.

In the present study, 86.7% of custodial deaths were male and only 13.3% were female, showing male predominance. These observations are consistent with other studies in India<sup>13-16</sup> and other developed countries like USA<sup>17</sup>, UK<sup>18</sup>, Australia<sup>19,20</sup> and Canada<sup>21</sup>. The greater number of male custodial deaths world over suggests that male population is much more involved in different kind of criminal activities and consequently to be present in large numbers in jails.

Majority of custodial deaths (95.6%) in the present study occurred in hospital while undergoing treatment whereas only 4.4% deaths occurred in jail. These findings are almost similar to the study done by Shakya NK *et al*<sup>22</sup> in Varanasi where 89%

custodial deaths occurred in hospital and 11% deaths occurred in jail.

In the present study, majority of custodial death cases (73.3%) were of under trial prisoners who were lodged in jails while 20% were convicted prisoners and 6.7% cases died in police custody either in police station or while being taken to the court. These findings are comparable to the findings of a study done by Mittal DR<sup>23</sup> in Punjab where 50% convicted prisoners, 47% under trial prisoners died in jail custody. Large number of custodial deaths of under trial prisoners in the present study is a matter of concern and it also shows the slowness of Indian Judicial system in delivering its final verdict.

In the present study the cause of death in majority of cases (84.4%) was found to be natural due to the diseases of different body organs or systems while only in 13.3% cases the cause of death was unnatural. These findings are almost similar to the findings of the study done by Bhullar DS *et al*<sup>13</sup> and Shakya NK *et al*<sup>22</sup>.

In the present study, in case of deaths due to natural causes majority of patients (36.8%) died due to diseases involving lungs like Pulmonary Tuberculosis and other lung diseases, followed by diseases involving multiple organs (23.7%) like lung, liver kidney etc. Other organs/systems involved in some cases were brain showing intracranial haemorrhage due to untreated hypertension, heart showing coronary artery disease, GIT showing intestinal perforation and septicaemia. These findings are similar and comparable to the study done by Bansal YS *et al*<sup>15</sup> in Chandigarh, where among the natural causes, 51% cases had single organ system involvement, majority being pulmonary; while 49% cases had multiple system involvement. These findings however rules out any physical violence by police or jail authorities in most of the cases but it suggest improper health care facilities in jail, overcrowding, poor hygienic conditions in prisons and delay in responding to the medical issues of the jail inmates.

Out of total 6 unnatural custodial death cases in the present study, 2 cases each (33.3%) were burns and fall and 1 case each (16.7%) was stab and head injury. In one case the deceased poured acid over his younger brother and during this process he also sustained acid burn injuries due to spillage of acid over him. Later on he died during the course of treatment in hospital. In another case deceased was in police custody, she went inside toilet and put herself on fire. In one case of fall deceased jumped from the second floor of a court when he was produced in the court after being arrested while in other case deceased fell in the bathroom of a jail. In one case deceased stabbed a girl and later stabbed himself with a knife. He died later on during the course of treatment in hospital. While in one case of custodial death, there were multiple blunt force injuries present on the body and deceased died due to head injury.

**SUGGESTIONS AND CONCLUSION**

In my study it was found that most common cause of custodial death is natural cause mainly due to infectious diseases involving lungs like Pulmonary Tuberculosis and other lung diseases, followed by diseases involving multiple organs like lung, liver kidney etc. They were seen in relatively younger age group and many under trial prisoners also died early before hearing the final verdict of their court cases. This study emphasises the need for improvement in the medical care

facilities in the prisons. The hygienic conditions and atmosphere in the jails should be improved. There should not be overcrowding in the prisons. There should be regular health check ups of jail inmates and jail medical staff should be quick to respond to the medical issues of the prisoners. Separate wards should be created to segregate custodial patients suffering from any communicable disease. By following these measures we can protect the human rights mainly right to life of a prisoner.

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## References

1. Reddy KSN, Murty OP. The essentials of forensic medicine and toxicology. 34<sup>th</sup> ed. 2017. p. 279.
2. Darrell LR, Theodore C. Sudden Deaths in Custody. Humana Press, New Jersey, 2006: 1-3.
3. Bureau of Justice statistics, Contacts between police and public: findings from the 1999 national survey. US Department of Justice, Officer of Justice Programs, Washington, DC, 2001.
4. International Association of chiefs of Police. Police use of force in America. International association of Chiefs of Police, Alexandria, VA, 2001.
5. Di Maio DJ, DI Maio VJ. Forensic Pathology. Elseiver, New York, NY, 2004
6. Luke JL, Reay DT. The perils of investigating and certifying deaths in custody. *AM J Forensic Med Pathol* 1992; 13: 98-100.
7. Copeland AR. Deaths in custody revisited. *Am J Forensic Med Pathol* 1984; 5: 21-124.
8. Segest E. Police custody revisited. *Am J Forensic Med Pathol* 1987; 32: 1694-1703.
9. Lifscgultz BD, Donoghue ER. *Deaths in custody. J Forensic Sci* 1992; 39: 45-71.
10. Eckert WG. Medicolegal investigation of problems involving criminals and criminal activity. *Am J Med Pathol* 1983; 4: 279-286.
11. Vij K. Textbook of forensic medicine and toxicology, Principles and practice; 5<sup>th</sup> ed. 2011. p. 10-11.
12. National Human Right Commission Annual report 2002-2003.
13. Bhullar DS, Garg K, Aggarwal KK, Ladhar CK. Retrospective autopsy study of custodial deaths in Rajindra hospital (GMC) Patiala. *Int J Curr Res Med Sci.* 2017;3(8):58-64.
14. Singh SP, Singh D, Aggarwal AD, Oberoi SS, Aggarwal KK. Profile of disease related deaths in custodial cases: An autopsy based experience. *J. Indian Acad Forensic Med.* 2015 Oct-Dec;37(4):392-3.
15. Bansal YS, Murali G, Singh D. Custodial deaths- An overview of the prevailing healthcare scenario. *J Indian Acad Forensic Med* 2010;32(4):315-7.
16. Sonar V. A retrospective study of prison deaths in western Maharashtra (2001-2008). *Medico-Legal update* 2010; 10(2):112-3.
17. Kim S, Ting A, Puisis M, Rodriguez S, Benson R, Mennella C *et al.* Deaths in the Cook County Jail: 10 year report, 1995- 2004. *J Urban Health* 2007;84(1):70-84.
18. Farrell M, Marsden J. Acute risk of drugrelated death among newly released prisoners in England and Wales. *Addiction* 2008;103(2):251-5.
19. Kariminia A, Law MG, Butler TG, Corben SP, Levy MH, Kaldor JM, Grant L *et al.* Factors associated with mortality in a cohort of Australian prisoners. *Eur. J Epidemiol.* 2007;22(7):417-28.
20. Petschel K, Gall JA. A profile of deaths in custody in Victoria, 1991-96. *J Clin. Forensic Med* 2000;7(2):82-7.
21. Wobeser WL, Datema J, Bechard B, Ford P. Causes of death among people in custody in Ontario,1990-1999. *CMAJ* 2002;167(10):1109-13.
22. Shakya NK, Siddiqui MN, Shakya P, Singh NB, Gupta OP, Ahmad N. Custodial deaths- a retrospective study. *Indian J Appl Res.* 2018 May;8(5):67-9.
23. Mittal DR, Jasbir S, Rai G, Kumar K, Sharma RK. A two year prospective study of custodial deaths from Punjab region of India. *J Medico Legal Update.* 2019 Jan-Jun;19(1):757-62.

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