



Medicine, the Law & You

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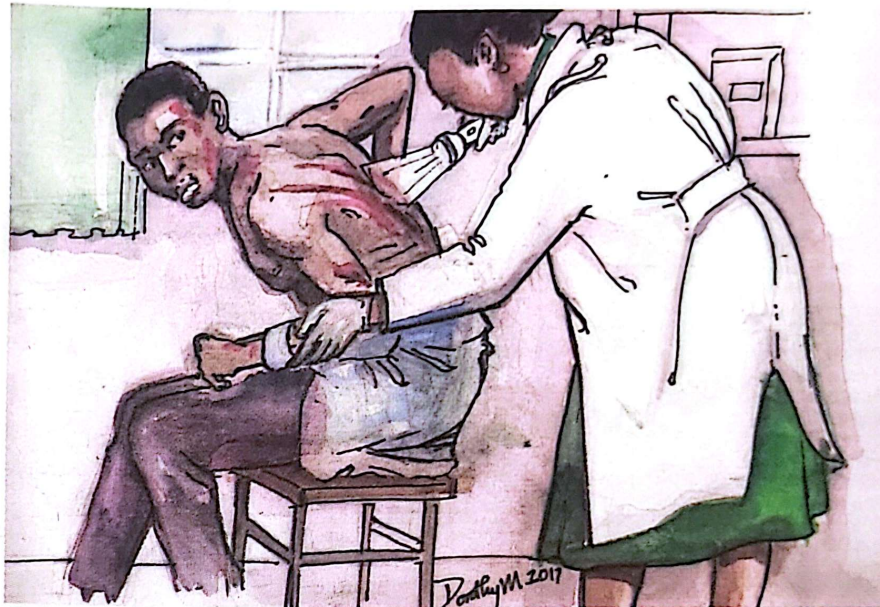
TORTURE CASES: Acute injuries are often characteristic of torture, because they show a pattern of inflicted injury that differs from non-inflicted injury.

Information got from the victim will guide a medical examiner when looking for the physical evidence of torture. It is, therefore, important for the examiner when interviewing the victim to ask for descriptions of torture devices, body positions and methods of restraint. An individual who has survived torture may have trouble expressing in words his or her experiences and symptoms. Acute and chronic symptoms and disabilities associated with specific forms of torture and the subsequent healing process should be documented.

The victims should be asked to describe any injuries they have suffered from specific methods of torture. Medical examiners are encouraged to inquire about injury to all the systems of the body without exception. Some of the physical evidence of torture such as burns, skeletal deformities, incorrect healing of fractures and dental injuries may be seen long after the torture.

Acute injuries are often characteristic of torture because they show a

Evidence of physical trauma on torture victims



pattern of inflicted injury that differs from non-inflicted injury. The shape of the injuries, repetition and distribution are tell-tale signs of torture.

Look beyond the physical

Most injuries of torture heal within two months, leaving no scars or, at most, non-specific scars. This is often the case when the perpetrators use techniques that are designed to cause minimal injury. Under such circumstances, the physical examination may not reveal much or may even be normal, but this in no way negates the allegations of torture. A detailed account of the survivor's description of the acute injuries and the subsequent healing process therefore represents an important source

of evidence in corroborating specific allegations of torture.

A complete physical examination should be carried out on a victim of torture in an appropriate setting with sufficient light and adequate medical equipment. Photography should be a

BEYOND PHYSICAL

The absence of physical injuries on the body of an alleged torture victim does not necessarily mean that torture did not occur. This is because some methods of torture have been designed to leave no mark on the victim. There may, however, be profound psychological trauma suffered by the victim.

routine part of the examination.

The skin should be examined for signs of injury such as fresh and healing wounds and other types of injury and should be appropriately described. Marks characteristic of application of tight ligatures may be found at the wrist or ankle. Asymmetrical scars, scars in unusual locations and diffuse spread of scarring suggest deliberate injury. Burns on the body frequently leave permanent changes in the skin. When pepper or other noxious substances are applied to open wounds, the scars may become hypertrophic.

The face should particularly be examined for evidence of fractures and the eyes for evidence of trauma. Fractures of the jaw are evidence of beat-

ings. The mouth and teeth should be carefully examined as materials are often forced into the mouth during torture. Rapture of the ear drum occurs frequently in trauma to the ears and should be looked for. Repeated injury to the ear may result in hearing loss. Fractures of the nose may be seen when the nose is poorly aligned. Fractures of the skull may also manifest as drainage of fluid through the nose or ear. Fracture of the ribs and internal injury to the lungs or organs of the abdomen may occur when victims are indiscriminately beaten.

Physical pain

Muscle aches and pains are very common in victims of torture. These are the results of repeated beatings, suspensions, or being tied up in stress positions. Dislocations and fractures also occur frequently. The nerves may also be damaged and these may result into weakness and loss of function of specific body parts.

Medical examiners should consult other medical specialists such as radiologists, ENT specialists, and neurosurgeons to investigate cases of torture when there is clinical evidence of trauma to specific organs. Investigations such as X-rays and CT scans may be vital to show these injuries.

The medical examiner should conclude the examination by indicating the degree of consistency between the physical findings and the account given by the victim. The physical findings may be diagnostic or typical or highly consistent of the trauma described by the victim. In cases where the injuries are non-specific, the examiner should state if such injuries could have been caused by the trauma described. And where the physical injuries are not consistent with the trauma described by the alleged victim, the medical examiner should also note this in the report.

To be continued

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