Notes compiled by PJ Louw for LLB from the UNISA Study Guide & other material. Whilst care has been taken to ensure accuracy you are advised to also verify facts independently.

FIRE / BURN VICTIMS / HEAT

(20) Discuss PATHOLOGY of DEATHS due to BURNING (heat)

- » Deaths due to thermal injuries can be
 - → almost <u>immediate if severe</u>
 - → can occur <u>later due to complications</u> (infection)

CLASSIFICATION of THERMAL WOUNDS

- According to DEPTH
- According to % of skin surface involved

1st degree

only epidermis is involved
Heal without scar tissue

2nd degree

» epidermis & part of dermis involved » Heal without scar tissue formation

3rd degree

» epidermis & full thickness of dermis involved » Heal with scar tissue formation

4th degree

» charring of part of the body

Discuss post-mortem findings in burn victim, incl. problems which may arise during identification.

Identification → difficult in charred bodies

- 1) **DNA** analysis
- 2) **Dental** records
- 3) **Identification by comparison** may be of value

Post-mortem examination

MUST NOTE degree of burn wounds + % of body surface involved

IMPORTANT (6) - to establishing whether person was alive when fire occurred(concealment)

- a) Carbon monoxide level in body
 - » level of < 5% in non-smoker & <10% in smoker indicates that person was alive when fire started
- b) Soot & ash in airways / stomach / oesophagus
- c) Also mentioned is the presence of fat embolism in pulmonary vessels

FAT EMBOLISM

- » When fat cells / bone-marrow tissue enter into blood circulation
- » Conditions where fat cells enter <u>VENOUS</u> circulation & trapped in capillary vessels of lung
- » A fat embolism is a type of embolism that is often caused by physical trauma such as fracture of long bones, soft tissue trauma, and burns.
- » Inhalation of smoke & toxic substances found in smoke
 - can also cause death by damaging airways
- » Old people & children
 - > especially susceptible to thermal injuries
- » Deaths due to burns may be
 - 1) an accident 2) a homicide 3) a suicide
- » In certain areas (face & genital region)
 - > there is high risk of complications

COMPLICATIONS of BURNS

1) Local complications

- > Most important **sepsis due to infection** of open wounds
- Loss of movement over flexor aspects (elbow / knee)

2) Systemic complications

- > Due to **fluid & electrolyte loss** through injured surface of skin
- > Lung complications due to inhalation of hot air
- > In cases of **charring** body will be in boxer position
- If body is totally charred MANDATORY to X-rays body for identification purposes + to locate possible projectiles & other injuries