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THE CURRENT STATE OF FORENSIC MEDICINE IN GREAT BRITAIN

FRANCIS E. CAMPS*

In order to understand the situation it is first essential to appreciate that in Great Britain, forensic medicine covers all aspects of the speciality and includes forensic pathology, psychiatry, immunoserology, chemistry and other such aspects many of which come within the scope of police surgeons. It is not limited to forensic pathology which is almost entirely dependent upon the Coroner's system for its practice and material. It is, therefore, necessary to describe the modern Coroner's system as it now functions in England, Wales and Northern Ireland, for considerable changes have taken place as a result of the Coroners (Amendment) Act (1926) and the Coroners Rules (1953).

The Coroner is appointed after competitive selection by the local authority. He must be either a qualified lawyer or doctor of at least five years experience. In the larger cities it is customary for him to be both legally and medically qualified and wholly occupied in his duties. These duties consist of the investigation of all sudden and unexpected deaths, as well as those not due to natural causes including accidental (industrial or occupational), suicidal, homicidal, and those associated with medical treatment. In this he is assisted by special police officers and by pathologists he selects himself. He does not perform autopsies personally, however. He is also empowered to authorize special analyses and radiological, photographic, and histological investigations. If he is satisfied that death was due to natural causes, he may issue a death certificate. If not, he must hold a public inquiry and return a verdict which includes the identity of the deceased, where he died, and the cause of death. In certain cases, which include accidents on the public highway, industrial accidents, and air and railway accidents, he must sit with a jury. Until the 1953 Coroners Rules he could have any registered medical practitioner perform an autopsy, but since then he has been expected to employ pathologists, and, although they need not have any special forensic training, they should have facilities adequate for special pathologists. The investigation is carried out by members of the criminal investigation departments, but this presents

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little difficulty in view of the fact that the Coroner's duties cease after establishing the identity and cause of death, since his final verdict is dependent upon the result of the criminal trial.

This article will demonstrate that there are two grades of pathologists performing medico-legal autopsies — those with special experience working in association with University departments or forensic science laboratories, and those who are practicing general pathology in hospitals, most of whom have no special medico-legal training.

Forensic science laboratories have been established in various parts of Great Britain and number nine in all. They are staffed by scientists who are not medically qualified, but who have a loose association with one or more approved pathologists. They operate directly under the Home Office and have a police liaison officer. They also carry out scientific investigations in criminal cases including examination of blood and seminal stains, analyses for poisons and drugs, blood and urine tests for alcohol (under the Road Safety Act), and examination of hairs and fibres. In addition they perform examinations in other types of crime as well.

The university departments of forensic medicine are located in London (four), Bristol, Cardiff (Wales), Leeds, Manchester, Liverpool, Sheffield, Belfast and Newcastle. Their primary objective is teaching and research and the former is limited mainly to undergraduate lectures in forensic medicine, which include death certification and medico-legal examination of the living and dead (wounds, sexual offenses, offenses against the person, industrial disease, compensation, trace evidence and poisoning). In addition, there are lectures on medical ethics, malpractice and medical negligence, alcohol and driving, drug addiction, the legal control of therapeutic substances, and the rules and regulations relating to poisons. Practical demonstrations of medico-legal autopsies and court procedures are also provided.

The departments vary greatly in size and facilities from those with ordinary facilities for morbid anatomy and one lecturer to those with sophisticated apparatus and a staff of specialists. The largest is at the London Hospital Medical College and includes a professor with two senior lecturers and two lecturers in forensic medicine, a senior lecturer in forensic immuno-serology and forensic chemistry (toxicology), appropriate assistants (seven), sophisticated apparatus, a photographer, a post-mortem technician and a secretarial staff.

In addition, there are part-time lecturers in forensic psychiatry and odontology.

Postgraduate training takes two forms. In the first place, there is an attachment of graduates, mostly from overseas, for training in higher degrees, and secondly there are organized postgraduate courses held only at the London Hospital Medical College. These take place twice a year and include lectures on all aspects of forensic medicine and are designed as preparation for the only special qualification in forensic medicine in England, the Diploma of Medical Jurisprudence. This degree is awarded by the Society of Apothecaries of London after a two part examination in either pathology or clinical medicine. A further two day weekend course is held yearly for pathologists and is in the nature of a refresher course. In 1970 there is to be a twelve lecture medical course in criminology.

In Scotland it is possible to obtain a postgraduate degree in forensic medicine in Edinburgh and Glasgow, and in forensic science in the University of Strathclyde.

The medico-legal examination of the living consists of examining, at the locus, deaths which have occurred under suspicious circumstances, and is usually carried out by experienced police surgeons or by ordinary medical practitioners. The police surgeon is a general medical practitioner who is appointed by the chief of police of a given area and is usually selected on the basis of qualification and experience. Other examinations carried out by police surgeons are in connection with the Road Safety and Road Traffic Acts and deal with driving under the influence of alcohol or drugs. These consist of a clinical examination and the collection of blood and urine samples for analysis.

A further function of the police surgeon is to examine cases of assault, rape and homosexuality and also to certify whether a person is fit to be detained in custody when suffering from the effects of injury, alcohol or drugs.

Facilities for the investigation and presentation of evidence in criminal cases have already been outlined. They consist of medico-legal examinations by police surgeons and forensic pathologists with supplementary special examinations of material by the staff of the forensic science laboratories, who are now assisted by "scenes of crime" police officers for the proper collection and selection of relevant material. Under recent legislation such evidence can either be given verbally or in a signed report, if such is acceptable to both prosecution and defense.