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## UNCOMMON CRIMINAL METHODS OF INFANTICIDE

Edward L. Miloslavich

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The crime of infanticide is usually committed by the mother soon after delivery of her newly born child. Often it is a well premeditated and prepared criminal act in order to conceal the dreadful intent and to prevent its discovery. Manifold and varied are the technical procedures and wicked methods which the delinquent mother may apply to ruthlessly destroy the life of her helpless child.

In some countries, among certain races and people, this crime is perpetrated in such a manner that the action of an external violence, the real nature of the crime, can be demonstrated without difficulty and the delinquent act proven beyond any doubt. The usual methods employed are familiar, and ordinarily one meets with more or less stereotyped cases.

In certain countries of South-East Europe this writer had opportunity to investigate a few cases of infanticide in which the technic used by the woman was most extraordinary.

Occasionally, it may happen that the mother who after birth keeps the baby with her in bed, awakens during the night to find the baby dead. It was suffocated, smothered without her intent or knowledge. One day the body of a newborn infant, three days old, was brought to our Institute with the following history. The mother was awakened that morning by the midwife, who found the baby dead in the same bed with the mother. The midwife stated that the mother appeared shocked.

The external examination showed a peculiar distribution of post mortem lividity on the face of the child. (Fig. 1) The tip of the nose, the central parts of both lips, and the tip of the chin were pale; while the skin of the left side of the face and forehead, to a lesser degree that of the right side, was reddish blue in color. The contrast was so remarkable that even the midwife readily noticed it. The

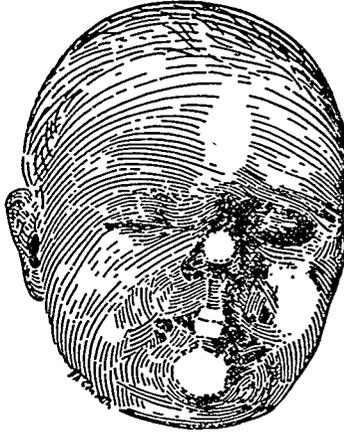


Figure 1.

discoloration due to settling of the blood after death was also evident on the left front of the chest.

The internal examination showed that there was also post mortem settling of blood into the front surface of the left lung. The mouth was coated by milk and the stomach contained a small amount of milk, but no milk or foreign material was seen in the air passages or lung tissue. Death was due to mechanical asphyxia.

The mechanism of death was reconstructed as follows. Late at night in the Obstetrical Ward, the mother while lying in bed, nursed her baby, holding it in her left arm. With her left hand, she pressed the head of the infant toward her nursing breast and kept it in that position until the baby died of suffocation, and for some time afterwards, until the midwife awakened her.

Our conclusion was that the death had resulted from mechanical asphyxia, namely, *occlusion of air passages by pressure against the mother's nursing breast.*

The woman was arrested and after being questioned and confronted with the pictures of the face of her dead baby, unhesitatingly admitted her delinquent act.

Four and one half months after this incident, a similar case occurred in the same ward of the Obstetric Department during the night. The dead body of the deliberately suffocated, newly-born child exhibited the identical distribution of post mortem lividity in the face as it was observed in the previously described case.

These two cases clearly illustrate the significance of thorough observation and exact interpretation of *post mortem lividity*, which in some

instances of violent death *offers important information in the solution of a crime.*

The second group of infanticide cases deals with death by drowning which is intentionally brought about by the mother, at the final phase of the delivery of her child.

The pregnant woman uses a wooden wash tub and fills it with lukewarm water. With labor pains she squats in the tub and allows the infant to be born under water. Death is due to aspiration of water into the respiratory passages before the lungs could be inflated by the atmospheric air. She removes the child, and disposes of the tub and its contents.

The examination of the infant's body shows that the air passages contain bloody water and that there is a complete absence of froth in the lungs and windpipe. The lungs are not expanded and contain no air.

My assistant succeeded in demonstrating the presence of plankton and algae in the water removed from the bronchial tubes, and absence of amniotic debris in the lungs. Thus, the fact that the infant had inhaled water and not amniotic fluid was established, and the cause of death was drowning.