

Medico-legal Aspects of Alleged Non-consensual Anal Intercourse in a 15-year-old Boy

KUHS MBBS FMT - colorful, study-friendly, university exam notes

Case trigger

- A 15-year-old boy alleging non-consensual anal intercourse is a case of sexual assault on a child. Since he is below 18 years, the POCSO Act, 2012 applies.

Consent + urgent care

General and local exam

Anal/DNA evidence

Air-dry + seal + chain

Mandatory reporting

1. Note on POCSO Act

POCSO Act, 2012 stands for Protection of Children from Sexual Offences Act.

Important points

- Protects children from sexual assault, sexual harassment and child pornography.
- A child is any person below 18 years.
- The Act is gender-neutral, protecting both male and female children.
- Since the boy is 15 years old, POCSO Act is applicable.
- Offences under POCSO are serious and non-bailable.

Penetrative sexual assault + duties

- Penetration of penis, object or any body part into the vagina, mouth, urethra or anus of a child amounts to penetrative sexual assault.
- Mandatory reporting to police is required.
- Failure to report may attract imprisonment up to 6 months with or without fine.
- Identity of the child must not be disclosed.
- Medical examination should be conducted within 24 hours of receiving information.
- Consent of the child / parent / guardian / competent person should be obtained.

2. Definitions

Term	Definition / meaning
Sodomy	Anal intercourse between two males - homosexual sodomy, or a male and female - heterosexual sodomy. In a child below 18 years, such act is an offence under POCSO Act.
Buggery	A synonymous medico-legal term for sodomy, meaning anal intercourse.

3. Examination Findings in Passive Agent

Since the boy is examined within a few hours, findings are those of a recent non-habitual passive agent.

Position

- Examination is done in left lateral decubitus position.

Local findings

- Severe **pain and tenderness**, especially during digital rectal examination.
- Acute inflammation, redness and oedema around anus.
- Loss of normal anal sphincter tone; sphincter may be lax.
- Fresh bleeding from anal mucosa.
- Presence of semen, lubricant, faecal matter or loose foreign hair around anus.

Injuries

- Perianal abrasions** due to frictional shearing force.
- Fresh bruises, which may be mistaken for haemorrhoids.
- Lacerations at anal margins.
- Anal fissures**: wedge-shaped tears, usually in posterior quadrant, radiating towards anal canal.

Habitual passive agent - contrast

- Thickened / keratinized perianal skin.
- Funnel-shaped depression of buttocks.

- Old healed fissures.
- Positive lateral traction test without pain or inflammation.

4. Evidentiary Samples to be Collected

Sample	Purpose / details
Swabs	Anal swabs from inside and outside anus; swabs from dried seminal, blood or saliva stains on body; buccal swab; swab from bite marks, if present.
Clothes	Clothes and undergarments worn during incident. Examine for blood, semen, faecal stains, mud or foreign hair.
Hair	Loose foreign hairs from body; matted pubic hair, cut and preserved; pubic hair and scalp hair of victim for comparison.
Nail samples	Fingernail clippings; fingernail scrapings for foreign epithelial cells, tissue, blood or DNA of accused.
Blood	For ABO grouping, DNA profiling, alcohol / drug screening, HIV and Hepatitis B screening.
Urine	For drug / toxicological analysis.
Saliva / buccal swab	For secretor status and DNA analysis.

5. Tests for Semen

A. Screening / Presumptive Tests

Test	Positive finding / importance
Physical examination	Seminal stain may appear whitish or yellowish-white; slightly viscous with characteristic smell.
UV light / Wood's lamp	Seminal stains show bluish-white fluorescence.
Florence test	Gives dark brown rhombic crystals of choline periodide.
Barberio's test	Gives yellow needle-shaped crystals of spermine picrate.
Acid phosphatase / Brentamine test	Gives intense purple colour. Most common presumptive test.

B. Confirmatory Tests

Test	Use
Microscopy	Demonstration of intact spermatozoa. It is the gold standard test. Stains such as Christmas tree stain may be used.
PSA / p30 test	Detects prostate-specific antigen from seminal plasma. ABACard test strip may be used.
Semenogelin test	Detects seminal vesicle-specific protein. RSID test may be used.
DNA profiling	Used for individualization and linking accused with sample.

6. Relevant Medico-legal Provisions

Provision	Key point
POCSO Act, 2012	Applicable because victim is below 18 years. Anal penetration of a child amounts to penetrative sexual assault. Mandatory reporting is required.
Section 377 IPC	Deals with unnatural sexual offences or carnal intercourse against the order of nature. Mere penetration is sufficient. Punishment may extend to imprisonment for life or up to 10 years and fine.
Section 164-A CrPC / Section 184 BNSS	Deals with medical examination of victim of sexual offence. Examination should be done by a registered medical practitioner within 24 hours of receiving information.

7. Doctor's Duties

Immediate care, exam and reporting

- Provide immediate medical treatment and first aid.
- Not delay treatment for police formalities.
- Obtain informed consent before examination and evidence collection.
- Examine the child without delay, preferably within 24 hours.
- Maintain privacy, dignity and confidentiality.
- Inform police immediately, as reporting is mandatory under POCSO Act.
- Carefully record history of incident including date, time, place and type of assault.
- Perform general and local examination.
- Document both positive and negative findings.

Evidence handling and follow-up

- Collect all necessary evidentiary samples.
- Air-dry samples in shade.
- Pack samples separately in paper bags.
- Seal and label samples properly.
- Maintain strict chain of custody.
- Hand over samples to investigating officer with receipt.
- Provide prophylaxis for sexually transmitted infections and psychological support.
- Act as expert witness in court when summoned.

8. Documentation and Reporting

The medico-legal report should be complete, objective and contemporaneous.

MLR contents

- Consent details.
- History in victim's words.
- General examination findings.
- Anal and perianal findings.
- Injury description with diagrams.

MLR contents continued

- Samples collected.
- Treatment given.
- Opinion based on medical findings.
- Note that absence of injury does not rule out sexual assault.

Conclusion

Medico-legal interpretation

- In this case, a 15-year-old boy alleging non-consensual anal intercourse is protected under the POCSO Act. Examination should focus on detecting recent passive anal intercourse, collecting semen/DNA evidence, documenting injuries, providing treatment, and mandatory reporting to police.