

Case Study

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A Case of an Unfounded Accusation Supported by Expert Opinions from the Police Department



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Abstract

Introduction: The author's report is transcribed for sexual assault of an adult woman, finding a series of contradictions in his arguments that evidenced a false complaint; however, it was validated by official experts, when the medical examiner took supposed saliva samples from the woman's skin despite the fact that, in the medical-forensic protocols they refer to the difficulty of finding this element if it is not collected early and if the person had not cleaned herself and, despite these contraindications, the sample was taken 40 hours after the reported event and the affected person had bathed and, when analyzing the sample, a Forensic Chemistry Expert found "alpha amylase, the main biochemical component of saliva" and a Genetics Expert discovered a haplotype of the "Y" chromosome, conclusions that are controversial.

Conclusion: The purpose of the article is to argue from a technical point of view, the incorrectness of the forensic practice of the experts, by ignoring the medical-forensic protocols on the taking of skin samples to discover organic elements that could have been left by the perpetrator on the body of the victim of a sexual attack, issuing conclusions without technical-scientific support that benefited the alleged victim, negatively influencing the authority when determining the existence of the crime and its commission by the accused, making it questionable that the investigations are carried out only by female personnel in Police Department agencies specialized in sexual crimes.

Keywords: Sexual assault; Expert opinion; Complicity; Biased; Forensic chemistry; Forensic genetics; Vaginal infection

Introduction

In Mexico, specialized Police Department for sexual crimes were created, staffed by female personnel, to investigate reports of these crimes. However, irregularities have been noted in the conclusions issued by the experts. Therefore, it is necessary to present a real case that explains this reasoning. The objective of this article is to demonstrate, in a case study, how the expert conclusions were obtained that allowed the Prosecutor to determine the existence of a crime and who committed it. In this regard, the hypothesis raised for the resolution is: whether the information provided by the complainant and the alleged evidence obtained from her body were appropriately used by the experts in Forensic Medicine, Forensic Chemistry, and Forensic Genetics, meeting the technical-scientific, ethical, and legal requirements necessary to assist the Prosecutor in his determinations, or whether these elements were altered or manipulated to benefit the alleged victim. The study will be based on propaedeutics, semiology, and forensic medical protocols, which establish how the study of a sexual as-

sault victim should be conducted. This will allow for the collection of clues and evidence for expert analysis, fulfilling its objective of providing technical and scientific elements for the legal resolution of the case.

Presentation and opinion of the case

Forensic investigation is an autonomous discipline whose purpose is to assist justice through the analysis and application of techniques and procedures supported by various sciences. These techniques enable the collection and processing of information to identify the modus operandi and perpetrator of a crime, thereby uncovering the truth about the criminal phenomenon. Its practice is based on a methodology based on the scientific method of investigation.

Consequently, an inconsistent and meticulous investigation leads to errors in relating the legally relevant facts in the expert opinion, which limits its accuracy and leads to a consequent inconsistency in judicial practice. These argumentative flaws are

not exclusive to the formulation of the charge before the supervisory judge; they are also evident in the indictment, rendering it complex and rugged. These inconsistencies generate distortions when sentencing, since the factual framework of the accusation is not clearly determined, problems arise in the evidentiary stage of the offense, since the subject of evidence cannot be precisely delimited, a situation that causes insufficient motivation of the sentence from a factual perspective, which can lead to errors in judicial decision-making [1].

Objectives

Determine whether the mechanics of the events described by the complainant are consistent with the findings by the Police Department Doctor. Review whether the results issued by the Forensic Chemistry and Forensic Genetics Experts were accurate.

Antecedents

Complainant's statement

Interview with an adult woman.- "On 10/2/2022, ...she states: ...on 10/1/2022, I was at a hotel because I came to spend time with my minor children, ages 5 and 3, because my ex-partner (the defendant) and I are in a custody dispute. We were living together and my three-year-old son fell asleep. He accompanied me to the hotel to put him and my other son to bed, who told his father to stay. However, he told him that I didn't love him anymore, that I had another partner who scolded me. So, I took out my cell phone to record, to which he wrestled it away from me, telling me to delete the video... I deleted it so he would calm down and leave, but he didn't leave and my son fell asleep... then he started touching my breasts with both hands, he raised my blouse he put his hands touching my breasts under my bra kissing my neck, while I tried to push him away and take his hands off my body, he pushed me into a corner and put his knee on my vagina trying to put his hand under my shorts and panties and managed to touch my vagina with his right hand under my panties and I felt him put one of his fingers in my vagina, and tried to pull down my underwear and bit me on my stomach on the left side ... so I continued struggling with him pushing him away with my hands trying to cover my private parts while he continued trying to put his fingers with his right hand above my panties, and I felt him put his fingers with my panties, then the little boy woke up because of the noise we were making ... and I told him to go ... and he left the room, the events happened at approximately 1:00 am.

Psychophysical, injury, and gynecological medical certificate

By the Medical Examiner of the Police Department. 10/2/2022. Time: 5:20 pm.

"Interrogation: She denies any significant history. She states that on 10/01/2022, at approximately 1:30 a.m., she was assaulted by her ex-husband, who was in a hotel because he is in the process of obtaining custody of their children, while they were living

together. However, while the children were sleeping, he began to assault her. He cornered her in a corner and began kissing her neck and breasts. He lifted her clothes and, at the same time, tried to pull down her pants and bit her pelvis. She states that he inserted his fingers into her vagina with and without clothes. She denies insertion of a penis. She denies anal sexual assault. After the assault, she bathed and changed clothes. She denies having vaginal discharge or urinary discomfort prior to the assault. She currently reports burning pain in her vagina, discomfort, and states that she applied Baycuten (clotrimazole/dexamethasone ointment) only once.

Examination: Alert, calm, in a freely chosen position, cooperative. Speech was fluent, congruent, and coherent. Gait was normal. Coordination and Romberg tests were uneven.

Lesions: Reddish, crescent-shaped ecchymotic-excoriative area with a characteristic tooth-like impression at the level of the hypogastrium, to the left of the midline, measuring 4 x 0.5 centimeters.

Irregularly shaped reddish excoriation on the following anatomical regions:

- On the posterior distal third of the left forearm, measuring 0.5 x 0.3 centimeters.
- On the back of the distal phalanx of the fifth finger of the right hand, measuring 0.2 x 0.3 centimeters.

Irregularly shaped purplish bruise on the anterior left knee, measuring 4 x 2.5 centimeters.

Two oval-shaped violaceous pressure bruises on the medial side of the left arm, distal third, measuring 0.5 x 0.5 centimeters each one.

Gynecological and obstetric history: Menarche: 10 years old. VSA: at 16 years old. Regular rhythm. 4/28 days, moderate flow G:3 P;3. Reports using a copper T IUD. Date of last consensual sexual intercourse: 10 days old. Date of NON-consensual sexual intercourse: 10/01/2022. Reports vaginal burning, ointment was applied. Genital examination: In the gynecological position, with a gloved technique in direct and artificial light, phenotypically feminine external genitalia are seen, with the presence of short, dark brown pubic hair with moderate hairiness. The labia majora and labia minora are intact, the clitoris and hood are intact, the urinary meatus is intact, the vaginal vestibule and navicular fossa are intact, but the mucosa is hyperemic/reddened. A laceration is located at the level of the posterior fourchette, measuring 0.3 x 0.2 centimeters. The hymen is visible, reduced to myrtiform caruncles. There are NO recent tears, but the edges of the caruncles are edematous and hyperemic. Perineal region: without alterations. No clinical signs of sexually transmitted diseases.

Conclusions

1. Psychophysical Status: Conscious. Ended at 5:55 p.m.

2. Provisional Classification of Injuries: a) Non-life-threatening. b) Healing time: more than 15 days. c) No hospitalization is required. Gynecological examination: Hymen reduced to myrtiform caruncles with clinical signs of recent and previous penetration.

Indication 1. A sample was taken from both breasts and the hypogastric area. After gloved hands and wearing a face mask, three white-headed cotton swabs were packaged in a white paper envelope and labeled, creating a chain of custody for delivery to the competent authority.

Note 1: Gynecological samples were not taken, as the patient reported insertion of fingers during questioning and denied insertion of the penis.

Forensic chemistry expert report.

10/5/2022, carried out by a Police Department's Expert, determines that in clue 1: "the presence of alpha amylase, the main biochemical component of saliva, was identified".

Official forensic genetics report. Issued by the Police Department's Forensic Genetics Expert, 01/14/2023.

"A mixed genetic profile was obtained from the trace labeled Trace I.

A partially mixed Y chromosome haplotype was obtained from Trace 1".

Method

5.1. As in clinical medicine, in forensic medicine, the study of a sexual assault will be based on the scientific method, using propaedeutics and semiology and the forensic medical procedure, documenting the findings in a contemporaneous, precise, impartial, and indisputable manner. Propaedeutics is the "ordered set of methods used by the physician to obtain symptoms and signs." It includes the history and physical examination. Semiology is "the study of signs in patients to identify alterations caused by diseases [2].

- a) History (interrogation). The woman's physical and mental health is assessed, recording the sexual assault and its characteristics [3].
- b) Obtain a spontaneous chronological and sequential account of the event.
- c) Number of sexual partners.
- d) Date of last consensual sexual intercourse.
- e) History of sexually transmitted diseases.
- f) History of toxic, pharmacological, alcoholic beverage, or psychoactive substance use, and the last time the person used it [4].
- g) Mental state. A study is conducted as a guide to understanding the person's mental condition, inquiring about: psychiat-

ric history, suicidal or homicidal ideation, addictive behavior; level of consciousness, attention, comprehension, concentration, memory, orientation to time, place, and person, language, and affectivity [5]. The following table shows the possible alterations in a victim of sexual assault [6].

Consequences of sexual violence

Somatic consequences

Acute medical consequences (physical injuries, genital and non-genital, and sexually transmitted diseases)

Chronic illnesses (pelvic pain and other chronic pain disorders)

Stress-related health effects (perceiving one's own health as less favorable and reporting more symptoms of illness)

Psychological consequences

Cognitive changes (altered cognitive schemas)

Discomfort

Psychological symptoms (fear and anxiety)

Affective reactions (depression, suicidal ideation, and suicidal behavior)

Problems with sexual functioning

Social adjustment problems

Psychophysiological reactions

Start reactions

Cardiac and muscular reactions when memories surface

Increased physiological arousal.

Physical Examination.

It is advisable not to change clothes, bathe, or urinate before samples are taken. Clothing worn at the time of the assault should be collected, placing each item in a designated bag. In the present case, the complainant presented herself approximately 40 hours after the alleged attack, bathed and with a change of clothes, and the doctor did not ask her what she had worn the day of the incident.

Gynecological and Perineo-Anorectal Examination.

Describe the pubic area, characteristics of pubic hair, mons pubis, labia majora, labia minora, clitoris, preclitoral region, urethral orifice, and periurethral region, vaginal introitus, posterior fourchette, and perineal region. Details of the hymen should be provided; note any myrtiform caruncles and fourchette. In addition, the presence or absence of leucorrhea, bleeding, urethral discharge, or symptoms such as odor or dysuria [5].

Internal Genitals: In sexually active women, examine with a vaginal speculum, describing traumatic injuries or their integrity

[7].

Take a sample of vaginal contents using swabs previously moistened with saline solution for analysis.

Take a sample of cervical mucus with a hypodermic syringe and describe the characteristics of the cervix.

Examine for vulvovaginitis.

Sample for DNA from biological media (hair, blood, saliva, etc.) and clothing stains.

To interpret an analysis, the expert will have:

- a) Evidence to be analyzed: vaginal contents, semen stains, etc.
- b) Sample from the suspect: Send, whenever possible, the suspect's blood for comparison.
- c) Blood sample from the victim: This allows determining whether a DNA pattern found in the evidence comes from a third party or corresponds to the victim [8].
- d) Blood, urine, oral contents, hair, saliva from bites or sucking, pubic hair, nails, vaginal contents samples [9].
- e) Vulvar samples. With a recent account of events (≤ 72 hours) with or without physical findings and suspicion that biological material may be present.

Skin samples

With a recent history of events (≤ 72 hours) with or without physical findings, provided the person has not bathed or cleaned the area and biological material is suspected [4].

Finally, a certified medical report will be prepared describing the procedure and the results obtained.

When describing an injury, do so accurately, completely, and up-to-date. Specify the signs to determine when it occurred. This is a valuable element, because the alleged victim stated to the Public Prosecutor's Office that the events occurred on 10/1/2022 at 1:00 a.m., and she appeared before the Medical Examiner on 10/2/2022 at 5:20 p.m., so the examination was performed 40 hours after the event.

Analysis of the Medical-Forensic Certificate-Opinion.

The injuries were not described correctly for the following reasons: Regarding the alleged bite to the hypogastrium, the

doctor only mentions a "dental imprint at the level of the hypogastrium in a semilunar shape," which indicates that she only had a crescent-shaped lesion. If it had been a bite, the attacker only used a gag reflex, a difficult act to perform. Therefore, it can be established that it was not a bite but an ecchymotic-excoriative injury caused by some sharp or cutting object such as a wire, a scratch from a fingernail, etc., which rubbed against that area, leaving a lesion in that shape, and that its origin was accidental or self-inflicted. Morphologically, it is important to establish when

diagnosing a human bite: it is a circular or ovoid lesión due to the imprint of two arches, where each arch includes a pattern of smaller lesions generally separated from each other, which causes a discontinuous type lesion due to the impression left by the teeth that are separated from each other, allowing a space between the mark left by each tooth and serves to identify the person who caused the lesion [10].

Regarding excoriations, the doctor describes them incompletely for the following reasons:

An excoriation is an injury caused by friction that removes or tears the epidermis without penetrating the skin. Its clinical sign is a scab, and its characteristics can indicate the time of development. The following will be described: location, extent, shape, direction, color (light red, dark red, reddish-black, or black), consistency (soft, hard), whether it appears dry or is scaling; it consists of coagulated blood. After approximately 8 hours, the surface layer of the scab is clearly visible. After 12 hours, this area is clearly demarcated. After 48 hours, the scab is well formed [11]. The reddish excoriations appeared between 0 and 3 hours, 4 to 8 hours, and 9 to 12 hours of development. The dry blood crust was evident over a period of more than 10 hours. Between 24 and 48 hours, a dry blood crust (dark red) was present [12].

The doctor only established the presence of excoriations without performing clinical examinations of the crust, which at that time appeared (light red, reddish-brown, or dark red in color, still soft, flat, and dry), making it impossible to determine its duration or whether it was caused during the event. Their location and size suggest that they were caused accidentally.

Bruises are formed by the application of force (blow, pressure, traction, suction). Therefore, it is important to distinguish between intentional injuries (inflicted by third parties) and injuries that occur accidentally or are self-inflicted. They depend on factors including the force, location, and surface of the impact, causing the presence of general signs and symptoms of inflammation (heat, redness, pain, swelling, and functional impairment). They appear at the point of contact between the impacting object and the body. Their location, shape, size, and color are studied. Due to the impact, small blood vessels rupture in the skin, and blood leaks into the surrounding tissue [13].

The time of onset can be estimated based on color assessment. The range and sequence of colors expressed by authors is as follows [14]:

"Capms:

Red, immediately.

Purple or dark purple/black, shortly thereafter.

Green, 4-5 days.

Yellow, 7-10 days.

Resolution, 14-15 days.

Glaister:

Violet, immediately.

Blue, third day.

Green, 5-7 days.

Yellow, 8-10 days.

Resolution, 13-18 days.

Polson and Gee:

Red/dark, red/black, less than 24 hours.

Greenish tint, around day 7.

Yellowish, around day 14.

Resolution, over 30 days.

Smith and Fiddes:

Red, immediately.

Purple/black, shortly thereafter. after.

Green, 4-5 days."

Yellow, 7-10 days, but little and superficial by day 3.

Resolution, 14-15 days.

The purplish color observed by the doctor suggests that they occurred moments before the examination. Based on their location and color, they could have been accidental, self-inflicted, or caused by a third party. However, the latter possibility is ruled out because the complainant never mentioned that the assailant directly hit her in those anatomical areas or put pressure on her left arm. It can be determined that they occurred approximately 24 hours after the incident, and occurred after the event.

Regarding the findings in the genital area, the following is commented:

Laceration at the level of the posterior fourchette: The term "laceration" refers to a wound, usually small, of an organ or tissue; Postcoital laceration is also defined as a rare emergency that can be complicated by excessive blood loss. Based on this information, it was determined that the injury was not a laceration, but rather a non-traumatic fissure resulting from a vaginal infection, for the following reasons: Vulvovaginal candidiasis is characterized by itching, vaginal pain, and vulvar burning. Physical examination revealed vulvar erythema and edema, fissures, papulopustular lesions, and yellowish-white plaques on the walls of the vagina and cervix [15]. Regarding the two signs in the vagina and cervix, these were not detected with a vaginal speculum.

Analysis of the Forensic Chemical Report

Regarding the forensic chemical report, which allegedly identified a biochemical component in the saliva, its credibility is difficult because the complainant's sample was taken 40 hours later

and after she had bathed. It could also be contaminated by the person's skin cells, sweat, or inflammation in the hypogastric lesion. Therefore, it is practically impossible for it to be from the alleged assailant. If it was found, it would have been an organic element from another person with whom she had contact after bathing. This is possible given that the complainant clearly has another sexual partner, as she stated that her last consensual sexual encounter occurred 10 days prior.

Analysis of the Forensic Genetics Report

Regarding the Forensic Genetics report, where a Y chromosome haplotype was obtained: There are numerous processes that can affect the integrity of a sample, and therefore the potential for obtaining genetic profiles. These processes, which in some cases are inherent to the sample, in others can occur or worsen when the collection and submission of samples to the laboratory is carried out improperly. They can occur due to: Contamination by human biological material. Due to the deposit of this material at the crime scene and/or on the victim's body after the crime occurred [16]. If the complainant bathed, genetic material is unlikely to be found.

Saliva in bite marks should be sampled with a sterile swab slightly moistened with distilled water or saline solution from the area of skin where the bite is located [17] and then left to dry at room temperature in a protected area (procedures not described by the Prosecutor's doctor in her report). The objective is to find the assailant's saliva or epithelial cells that allow for the identification of his or her genetic profile. This sample is useful if collected immediately or very early after the sexual assault.

Therefore, the Medical Examiner is unaware of the protocol for taking skin samples, which establishes that the sample must be taken when the person has not bathed, and avoids taking the sample or noting this circumstance in her report [18].

It is striking why the doctor did not take samples from the vagina and fornices to verify that there was no penetration by the penis or if seminal discharge was found; likewise, whether there was discharge from a vaginal infection because inflammation can come from a sexually transmitted infection, changes in the vaginal microbiome, changes in hormonal levels, the use of some hormonal contraceptives and sexual activities [19]. Likewise, she did not inquire about why clotrimazole was applied, who prescribed it, why and since when it is used. It is observed that the doctor accepted the complainant's version as true, stating: "gynecological samples were not taken since she denied insertion of the penis."

This criterion is questionable given that the expert's role is to take samples to verify her information. One must always be alert to any false assertion to avoid any study or divert attention when it comes to consensual sexual intercourse and attempts to pass it off as non-consensual [20], or to reveal that she had sexual intercourse with a third person and expose a falsehood in her statement, because the description of the event demonstrates that she

has another sexual partner, a situation that establishes that the doctor's omission may have been biased. Likewise, taking samples is useful to detect infection, which may be the cause of edema and hyperemia at the edges of the caruncles and would justify the application of Baycuten. Vulvovaginitis is the inflammation of the vulva, vagina, or both structures simultaneously, and is caused by *Candida albicans*. Topical treatment (clotrimazole) [21].

Furthermore, the doctor supported the sexual assault even though the injuries on her body did not occur because the complainant resisted the act, and the signs and symptoms found in the vagina occur when there is a genital infection or due to intense consensual sexual activity.

There are some contradictions between the complainant's statement to the prosecutor and what she told the doctor during her certification:

1. Before the Police Department, the complainant stated that the events occurred at 1:00 a.m. on 1/10/2022, and to the doctor, she told they occurred at 1:30 a.m.
2. To the Police Department, she mentioned that she was wearing shorts, and to the doctor, that she was wearing pants.

False allegations are a problem. The trust of the experts and the authorities in the alleged victims protects these complaints. Fabricated injuries are used to gain an advantage in sexual assault accusations, such as imposing a compromise in a dispute [22], as in this case, where the custody of the children is at issue.

Self-inflicted injuries constitute traumatic injuries inflicted by the person himself or herself on his or her own body [23]. The accuracy of recording self-inflicted injuries will depend on the physician's experience and the technique used to examine the complainant [19]. Therefore, the doctor should have anticipated this behavior and not assumed the complainant's claims to be true.

Finally, why didn't the complainant go to the Police Department immediately after the attack?

And why didn't the doctor inquire during her interview with the woman to find out what activities she engaged in after the attack, who she was with, and whether there were any changes in her emotions in response to the attack? Although it is clear that she was not affected, since she reported no changes and during the interrogation, she did not present any disturbances in her emotional state or her psychological or mental capacities, in contrast to a woman who suffered a sexual assault.

All these irregularities in the woman's complaint and in the forensic studies demonstrate the lack of objectivity and impartiality of the experts in charge of the investigation. They also show the cover-up of a false report. Therefore, it is questionable that only female personnel are found solving cases in the Police Department office specializing in sexual crimes.

Conclusions of the Opinion

1. There are contradictions between the complainant's statement to the Police Department and what she described during her forensic gynecological examination, which indicates that her statement was not true.
2. The forensic gynecological report was incomplete, deficient, and biased.
3. The results issued by the Forensic Chemistry and Forensic Genetics Experts, if true, do not correspond to the accused or are false.
4. It is established that there were NO technical or scientific elements that would allow us to affirm that the complainant suffered sexual assault on October 1, 2022.

Discussion

Ethical and Legal Aspects of Expertise

Forensic investigation is an interdisciplinary endeavor. Interdisciplinarity represents the interaction of knowledge from various specialties with the purpose of shedding new light on complex phenomena. This process can range from the simple communication of ideas to the integration of concepts, methodologies, procedures, epistemologies, empirical bases, and academic backgrounds [24].

Therefore, expert evidence plays a fundamental role, as it involves the participation of professionals from different disciplines who offer their professional perspectives to clarify the technical issues of a case. To the extent that the evidence contributes to clarifying the facts, it serves the truth of the case. In accordance with the above, the objective of expert evidence would be to seek the truth of the case, as well as its "neutrality," which would be reflected in an "objective decision." Furthermore, evidentiary theory has characterized expert evidence as an expression of the link between science and law, such that it is through expert evidence that technical knowledge is used in the process to achieve the truth and, consequently, "justice" in decisions [25].

It is well known that an expert, whether a party or appointed by the Police Department, must act with the greatest possible objectivity. As a collaborator of the courts, the expert must always strive for objectivity and must perform work based as much as possible on fairness and their technical knowledge [26]. Experts must understand that the law does not expect them to rule in favor of one party or another, but rather to provide solid and truthful information on the subject matter of their expertise. One of the main alterations that can reduce an expert's objectivity is bias [27].

An ethical professional obtains results clearly and explicitly, without bias. In forensic science, "bias" means a discovery, directly or indirectly partial, intentional or unintentional, that can benefit one side and harm another. Experts have a great social

responsibility. Their activities are of great importance—and have far-reaching consequences—for both justice and society. To carry out their work, experts require specific and constantly updated technical knowledge. It is understood, therefore, that forensic science professionals must receive ongoing training, as well as ethical and legal guidance and instruction focused on the dilemmas and cases specific to their roles, seeking to prevent bias and partiality [28].

In such a case, the expert must be neutral since, as a collaborator of justice, he or she must provide the court with specialized assistance in an objective, impartial, and independent manner. That is, when the expert acts in accordance with the valid and current criteria in the discipline in question and truthfully presents them to the court, the minimum necessary level of scientific and objective impartiality is guaranteed, which must be present in the work of examination and issuance of the expert opinion [29].

However, official experts, when conducting their investigations, do not always do so correctly or are not always trained to address the questions submitted for their analysis. As observed in the case studied, flaws can be detected that require further study to determine their origin and why their results do not conform to the facts, and to determine whether their assessment is based on objectivity and the technical-scientific, ethical, and legal principles that govern expert activity.

This is because some reports, when examined, may reveal analyses and judgments that are not supported by protocols and scientific articles, nor do they satisfy common sense and logic. Similarly, it is possible to perceive when their opinions are distorted or biased.

This situation can affect the perception of what actually happened in a reported incident because: “the purpose of criminal proceedings is to clarify the facts, given that it is the truth or falsity of the statements related to the facts that gave rise to the criminal conflict that will allow judicial decisions to be issued based on objective knowledge.” Regarding the relationship between expert evidence and truth, it can be said that the former operates as a mechanism to achieve the latter. From the above, it follows that expert testimony reflects the belief that truth comes from technical knowledge. In the judicial process, truth and science are intrinsically connected. Furthermore, the law views the expert as someone who facilitates the search for truth, since adjudicators identify him as a vicar of science and, therefore, a guardian of neutrality [25].

Regarding Crimes Against Sexual Freedom, these present problems associated with the very act of crime that often allow us to foresee the technical difficulties that may arise. This includes the fact that the sample collection does not meet the appropriate conditions for carrying it out because the chances of obtaining evidence, even if there have been statements suggesting its im-

pregnation in some anatomical area, are not possible due to its physical, chemical, or biological characteristics, and other circumstances that make it difficult to find and analyze. This is based on the case studied, where it is evident that no evidence was found and the results were altered, supporting the complainant’s statement, negatively influencing ministerial and judicial decisions.

From the above, it can be stated that we are faced with a manifest lack of impartiality on the part of the experts, conduct that violates procedural good faith and the expert’s role as an assistant or collaborator in the administration of justice.

Conclusion

The case examined calls into question the appropriateness of the decision to create specialized Police Department office for sexual crimes, where forensic investigations are conducted solely by female personnel, excluding male professionals. These professionals would act with the same scientific and ethical rigor as female professionals. Thus, victims and defendants would choose the sex of the professional they wish to conduct the corresponding study according to their specialty, rather than strictly being conducted by female personnel. Likewise, experts involved in the study of the complainants and defendants must be attentive to question the veracity or possible falsity in the descriptions of the facts, objectively analyzing the congruence between them and the expert findings, avoiding personal feelings (such as empathy) from influencing their conclusions, this reasoning finds its foundation in what emerges from the case studied because, as observed, expert conclusions can be issued that imply dubious opinions that originate erroneous decisions by the prosecutor and the judge, only because at no time is the existence of any false complaint suspected, granting it validity with arbitrary opinions, hinting at behaviors that definitely stray from the ethical and legal purpose of the expert evidence.

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