Lightning Skin Burns: A Case Report

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Abstract

Lightning strike is a rare natural phenomenon which can cause death due to serious medical complications including myocardial infarction, arrhythmia, cutaneous burns, and respiratory as well as neurological disorders. This study presents a report on a 50-year-old male who died after being struck by lightning. The man sustained burns from the neck to the ankle. Interestingly, fern-like skin erythema was seen in the anterior aspects of the right and left shoulders and left side of the lower part of the anterior abdominal wall. Multiple 2nd degree burns were found. The largest was found in the middle of the front of the neck extending to the upper part of the chest with linear extension to the front of the abdomen. Other burns were found in the abdominal wall, pubic region, and medial aspects of both thighs. Areas of erythema were found in the back of the left thigh and legs to the medial aspects of the ankles. Hair singing was found in the beard, back of both forearms and in the pubic region. Clothes were burnt and torn opposite to the skin lesions. The cause of death was most likely cardiorespiratory arrest. In conclusion, more awareness about lightning is highly recommended as it remains as a serious cause of environmental deaths with unique skin burns.

Keywords: Forensic Sciences, Lightning, Skin Burns, Fern-Like Skin Erythema, Electrocution

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Case Report
1. Introduction

Lightning is a serious natural phenomenon that may cause damage and even death. Lightning is a sudden electrostatic discharge that occurs typically during a thunderstorm. This discharge occurs between electrically charged regions of a cloud, between two clouds, or between a cloud and the ground [1].

In the United States, 3,000 deaths and nearly 10,000 casualties caused by lightning were reported within the period from 1959-1994. This declined to less than 20 deaths in 2017, according to official statistics kept by the National Oceanic and Atmospheric Administration (NOAA). This was due to improved awareness and public education about lightning. However, the actual number of lightning casualties may be higher, as 50% of cases are unreported [2]. Lightning fatalities are more common in developing countries with more outdoor activities such as farming and tending animals. [3].

Direct strikes account for less than 5% of lightning deaths, while indirect mechanisms (contact, side flash, step voltage, or upward streamer) account for about 95% of cases. Lightning may first hit another object (e.g., tree, tower, ground) with side flashes passing to a nearby person [4]. Lightning can cause fatal atrial and ventricular arrhythmias, myocardial injuries, and cardiac arrest. This may be due to direct depolarization of the myocardium or damage to the electrical systems of the heart and carotid bodies [5].

Skin burns are found in about 50% of victims. The energy from lightning flows through the person for a very short time, estimated to be a few nanoseconds, with the majority of its energy flashing around the body causing vaporization of sweat or rainwater with secondary steam burns, which are more evident than the other lightning burns caused by the direct heat of lightning [6,7].

Saudi Arabia has a desert climate except in the southwest, which shows features of semi-arid weather. It has high temperatures during the day and low temperatures at night with low incidence of lightning fatalities. This paper reports a case of death due to lightning in the Northern Border province with different characteristic patterns of burns extending in the corpse in a cranio-caudal direction from the chin to the ankles.

2. Case Report

A 50-year-old male was found dead in the desert. His clothes were wet, burnt, torn and stripped off the body leaving it almost naked. Hair singeing was found in the beard, back of both forearms and in the pubic region (Figure-1).

Externally, there were multiple burns of different degrees distributed all over the body from the chin to the ankle in a cranio-caudal direction. Multiple second degree burns were found; the largest was found in the upper median part of the front of the chest against the upper, middle part of the sternum (5 x 15 cms dimensions) with two other symmetrical extensions from it to the upper part of the abdomen (Figure-2).

The right side of the abdomen showed two similar vertical second degree burns (Figure-2A and 2B), which ran from the level of the umbilicus and downwards to the pelvis and the upper part of the pubis. Another 2nd degree reddish burn (Figure-2C and 2E) with some denuded skin extended from the right side of the pelvis to the right thigh. Erythema was noticed in the chest, abdomen, pelvis and lower limbs. It was parchment-like, stiffened (leathery) or charred. Fern-like skin erythema (Figure-2D) with its characteristic pattern was seen in the anterior aspects of the right and left shoulders in addition to the left side of the lower part of the anterior abdominal wall.

Areas of erythema were found in the lower limbs down to the ankle as follows: A reddish superficial burn, which extended mainly vertically in the lower half of the dorsal part of the left thigh, and the upper dorsal part of the left leg, with some denuded skin against the knee joint (Figure-3A). Another burn was found in the back of the right leg extending down to the back of the right ankle (Figure-3B).

On internal examination, organs were congested with petechial hemorrhages in the white matter of the brain.
Figure 1- Singed hair oat the back of the left forearm and in the pubic area caused by lightning strike.

Figure 2- Multiple third degree skin burns due to lightning strikes. The largest one is seen in the middle of the front of the chest with 2 smaller radiating burns to the upper abdomen. A, B, C and E are degree burns in the lower abdomen and upper right thigh. D showing Fern sign area of erythema on the right shoulder.
Lungs exuded bloody froth. Chest autopsy showed signs of surgical emphysema due to the effect of the lightning on the lung, which led to an escape of the air into the mediastinum and subcutaneous tissue. Histopathology revealed edematous lung tissue with exudations with ruptured marginal alveoli. Liver tissue also showed the expected postmortem edematous and hemorrhagic changes with ballooned hepatocytes. Heart tissue did not show any specific histopathological findings. Overall, histopathological findings did not reveal a definite cause of death.

3. Discussion

The present work reports a case of death due to lightning in the Northern Border Province, Saudi Arabia. The victim’s clothes were wet and burnt in addition to the skin injuries. The dead body showed first and second degree burns extending in a cranio-caudal direction from the chin to the ankles. Fern sign erythema was found over the shoulders and abdomen. Singed hair was noticed in different parts of the body. The effect of lightning current on the heart rhythm could not be proved or disproved through the autopsy findings.

Lightning is a unidirectional massive current impulse to be clearly differentiated from direct or alternating current. Lightning occurs when the large potential difference between cloud and ground, measured in millions of volts, is broken down [8]. When coming into contact with the body, there is an enormous current flow through the body that lasts for a very short time. The majority of the lightning current is initially transmitted internally, after which the paths parallel to the skin surface break down. External flashes vaporize moisture on the skin and tear clothes, as seen in the present case [9].

Human injuries caused by lightning strike are clas-
sified according to one of five different mechanisms: direct strike, contact, side flash, and step voltage or upward streamer [10]. Lightning strikes can cause skin burns of 6 different types, which are feathering, linear, punctate, entry/exit, thermal contact, and flash burn. [11]. Fern signs or Lichtenberg burns with arborescent red areas of branching, and tree or fern-like patterns on the skin are highly characteristic of lightning [12]. A Lichtenberg burn is not a true burn as it is just an extravasation of red blood cells from ruptured capillaries due to electron showering over the skin [13].

Fern signs were faint in this victim due to his dark colored skin. The reason for the transient nature and exact mechanism is unknown [14]. In the current case, fern signs were found over the shoulders and the anterior abdominal wall. Although the temperatures associated with thermal injury are extremely high, the heat is rapidly dissipated and most resultant skin burns are superficial with little effect on deep tissue [15]. Although difficult to determine with certainty, injuries found in the current case were likely caused by a side flash mechanism, as the victim was mostly injured when charge from a nearby object or animal moved through the air to him. Other mechanisms are difficult to determine by analysis of the scene of death. In addition, absence of entry and exit wounds mostly exclude the direct strike as the main cause of death. In addition, erythema with some erosive lesions and denuded skin were scattered all over the body surface from the chin to the ankle with singed hair in different areas of the body, mainly in the pubis and over both forearms. Erythema seen in the current case was mainly steam burn due to steaming of the rainwater causing erythema with some areas of denuded skin.

Autopsy and histopathological evaluation revealed edematous lung with ruptured peripheral alveoli and pneumothorax, pneumo-mediastinum and surgical emphysema. Death was mostly caused by electrical disruption of the cardiac cycle, which shows negative autopsy data [16]. Pulmonary edema findings are also suggestive of heart failure as a terminal event. Pneumo-mediastinum was not the cause of death as the lungs were not collapsed.

Finally, in spite of the media and public education about lightning, it is still one of the major causes of environmental deaths. Hence, more education and awareness programs should be planned and implemented. If the time between seeing lightning and hearing thunder is 30 seconds or shorter, persons must then expect that they are in real danger and should search for a shelter. Outdoor activities are better avoided within 30 minutes after the last seen lightning, even with clear sky and no rainfall [17]. In addition, it is also advisable to stay away from objects which conduct electricity such as barbed-wire fences, metal gates and bare electrical wires [18], and especially trees.

Conflict of interest

The authors declare that there is no conflict of interest among themselves or study participants.

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References

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