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Forensic physicians and the Francoist prosecution of infanticide, *c.* 1939–1969: The case of the haemorrhage of the umbilical cord as cause of death

Sara Serrano Martínez

Introduction

In the nineteenth and twentieth centuries many countries in Europe and Latin America enacted special laws for the crime of newborn child murder (hereafter, infanticide), establishing relatively lower penalties compared to other homicides.[1] It has been argued that medical testimonies often favoured practices of lenient sentencing in cases of infanticide, both before and after special laws were passed for this crime. In England and Ireland, from the seventeenth to the twentieth centuries, doctors showed their uncertainties, thus allowing juries' acquittals and lower sentences.[2] This also happened in nineteenth-century France.[3] Yet analyses of infanticide proceedings from other legal systems have started to change this historiographical narrative which associates the presence of medical evidence with lenient outcomes. Looking at European and Latin American contexts, Sara McDougall and Felicity Turner have argued that the 'criminalization of childbirth', including the prosecution of infanticide, hardened with modernity, and that 'the professionalization of medicine in the twentieth century' was a key factor in this shift.[4] Regarding Mexico, Nora E. Jaffary has argued that the late nineteenth century witnessed 'greater legal confidence in the reliability of medical assessments of mothers' criminal guilt or innocence'.[5] The present chapter adds to this increasingly complex comparative picture of the history of infanticide and justice, showing that in the first decades (1939–1969) of the Francoist

dictatorship (1939–1975), when pronatalist policies were particularly important, medical testimonies also contributed to indicting and convicting suspects of infanticide. I show this by analysing one of the medical questions that arose in infanticide cases: the question of whether the newborn could have died due to the haemorrhage of their cut, but untied, umbilical cord.

The question of the umbilical cord's haemorrhage was not unique in Spain or the Francoist context; for instance, Kristin Ruggiero has suggested that the lack of tying of the umbilical cord was frequently the basis for the charge of infanticide in turn-of-the-century Buenos Aires.[6] In Spain, before the Franco regime there were also infanticide cases in which this was considered to be a newborn's cause of death.[7] Yet, the issue of the umbilical cord is a good case to analyse the role of medical evidence in the Francoist prosecution of infanticide, firstly because it came up recurrently in the first decades of the dictatorship, contributing to several indictments and convictions, and secondly because this practice contrasted with medico-legal literature that showed doubts about whether the haemorrhage could commonly be a cause of death in newborns. This discrepancy between theory and practice regarding the umbilical cord's haemorrhage becomes clear from the analysis I have carried out of a sample consisting of one hundred archival files belonging to court cases of infanticide from six provincial courts (Madrid, Ávila, Toledo, Guadalajara, Tarragona and Girona) from the 1940s and 1950s. Statistics suggest that some archival records are incomplete, and many cases were not traceable. From those files that were traceable in registers, I have consulted all the files available (Madrid, Ávila, Tarragona and Girona) or random samples (Toledo and Guadalajara). Moreover, I have studied twenty-four decisions from the Supreme Court coming from all around Spain from the 1940s to the 1960s.[8]

Moreover, in the few lines that historians have dedicated to infanticide in the Francoist dictatorship, it has been argued that women in other provinces (Murcia and Lugo) left their newborns' cords untied to make them bleed and die when they faced the impossibility of accessing abortions.[9] This inference becomes questionable if one takes into account that contemporary physicians doubted that the haemorrhage was necessarily fatal. What was at work in these cases of infanticide was not only a matter of reproductive control

and its repression but also a significant event in the history of medicine: namely, a silence among doctors and legal practitioners alike regarding medico-legal debates about the umbilical cord's haemorrhage. Focusing on the case of the haemorrhage of the umbilical cord, thus, does not only show that medical evidence was not always associated with lenient outcomes in cases of infanticide, as stated in the current international literature, but also helps to counter some historiographical assumptions about infanticide as a practice of reproductive control in the Franco regime.

Clarifying why physicians who conducted the autopsy did not mention the debates in medico-legal literature, and why jurists – particularly defence lawyers – did not bring up the debate, raises historiographical questions about how medico-legal expertise worked and was conceptualised in the Francoist dictatorship. Historians have already shown how medical experts facilitated practices of torture and extra-judicial executions in Francoist military and political courts,[10] and provided theories contributing to justify detentions of those deemed 'socially dangerous', like Roma people, gay people and alcoholics.[11] Recently, Stephanie Wright has argued that, in cases of rape, medical experts brought in ambiguous theories that increased the already existing arbitrariness of Francoist criminal law courts.[12] This chapter elaborates on the embedding of medical expertise in the Francoist criminal law courts, identifying some important factors of the Spanish forensic culture in the dictatorship that explain why the fatal haemorrhage of the umbilical cord was in practice considered a cause of death in Francoist courts: its system of appeals, how medical expertise was conceptualised, how autopsies' reports were structured, and the epistemic ideals for forensic experts.

After examining how the medico-legal literature that circulated in Spain until the 1960s debated the fatality of umbilical cord haemorrhages, I will show that there was a contrast between the generalised doubts and cautions of the literature and the practices of both experts and legal practitioners in court: in practice the haemorrhage of the umbilical cord was accepted as cause of death, and this led to several indictments and convictions of suspects of infanticide. Next, I will briefly sketch how the fascist pronatalist context of the dictatorship determined indictments and convictions of infanticide. Finally, I will show how various cultural and

institutional characteristics of the Spanish and Francoist forensic culture contributed to the absence of debate about the cord's haemorrhage, providing the pretext for several indictments and convictions.

The haemorrhage of the umbilical cord, a plausible cause of death?

In their popular *Treatise of Legal Medicine* (1961), the professors of legal medicine Leopoldo López Gómez and Juan Antonio Gisbert Calabuig argued that, at the time, haemorrhages of the umbilical cord in newborn children were 'judged to be completely exceptional, and even unbelievable'.[13] In their opinion, such an event could only occur on two rare occasions, namely, that the child was haemophilic, or that the cord had been ripped at the level of its abdominal insertion, that is, right by the navel. Otherwise, the physiological mechanism resulting from birth would have prevented any haemorrhage by itself: once the cord was cut, the new, independent respiration of the child was established, and with it the umbilical arteries would retract and their arterial pressure would lessen, which would all run counter to the production of a haemorrhage through the cord's section, even if it was left untied.

As it is clear from these authors' tone, there were other works that did not specify that a fatal umbilical cord's haemorrhage could only occur under certain conditions. In 1917, professor of legal medicine Antonio Lecha-Marzo stated that the haemorrhage of the umbilical cord could result from its lack of ligature[14] and, in 1942, the manual of the Lyon professor Étienne Martin, which did not discuss the frequency of the fatal haemorrhage of the cord either, was translated into Spanish.[15] These two texts were well known in Spain, and I have found concrete evidence that Martin's work was read by some forensic physicians practising during the Franco regime.[16]

However, before 1961 there was a second body of literature that was emphatic that the fatal umbilical cord haemorrhage was highly unlikely – and this line of scholarship was more available than the other strand. This body of literature had begun with two nineteenth-century works that were very influential in Spain, those of Pedro

Mata and of Ambroise Tardieu.[17] A similar stance was defended in a 1935 manual which was specifically directed at the education of prospective forensic practitioners, who would be practising in Spanish courts in the 1940s and 1950s,[18] and in later works.[19] López and Gisbert's treatise, with which this section opened, was reedited in 1967 and 1970, and according to various reviews, by 1969 it was 'considered to be the most complete and scientifically elevated among the texts about the topic [of legal medicine]'.[20]

In sum, although there were a few works that did not account for the low incidence of the fatal haemorrhage of the umbilical cord in newborns, Spanish physicians also had within their reach various medico-legal handbooks that did specify the likelihood of this cause of death. This latter strand of the literature argued that fatal haemorrhages of the umbilical cord were possible, but that they did not occur frequently or in normal conditions. Yet, as I will show in the next section, the fatality of the cord's haemorrhage was considered a more common event in Spanish forensic practice.

The umbilical cord's haemorrhage as a decisive element in court practices

In 1962, a maid working in Madrid was convicted of wilfully killing her newborn child, who had died, the autopsy report and the judges claimed, due to the umbilical cord's haemorrhage and anoxia (lack of oxygen). This judgment is in striking contrast with the contemporary medico-legal discussion regarding the umbilical cord and perinatal death. By 1961 many medical doctors and forensic practitioners in Spain could know that an umbilical cord's haemorrhage was rarely fatal. Yet, in this 1962 decision, this was ruled to be the cause of death of the child, while there was no sign of the conditions that, according to the literature, made this event more likely (neither haemophilia nor ripping close to the navel; the cord, indeed, had been ripped at 10cm from the navel). The doctors who conducted the autopsy could not identify any 'signs of mechanic violence' on the body of the child, but they did observe signs of anoxia and saw that the child's umbilical cord had been ripped but not tied. Their conclusion derived from this observation and from the premise that the lack of tying could lead to a fatal 'loss

of blood'. They did not refer at all to the medico-legal discussions regarding the umbilical haemorrhage as cause of perinatal death.[21]

This was far from being the only case in which forensic experts and judges of the Francoist regime deemed the haemorrhage of the umbilical cord to be the cause of death of a newborn child without referring to the medico-legal discussions about it. In twenty other infanticide cases investigated in nine different Spanish provinces from the 1940s to the early 1960s, the haemorrhage of the cord was also found as cause of death.[22] In most of these cases, prosecutors and judges did not come up with this conclusion by themselves, but built on the conclusion of the post-mortem.[23] Besides omitting any reference to medico-legal debates, none of the autopsy reports pointing at the haemorrhage of the cord as cause of death mentioned haemophilia and only one noted the cut to be ripped close to the navel.[24] Most autopsy reports based this conclusion on observing that some organs were bloodless or showed signs of anaemia, which were indeed signs to which some medico-legal manuals referred as possible indicators of the cord's haemorrhage.[25] Yet, three other autopsies did not justify the conclusion explicitly, noting that the cord was cut at 40cm, at 45cm, and at 'two transversal fingers' from the navel.[26] Thus, the justification of why the haemorrhage of the cord was deemed to be the cause of death was scant in several cases, and the medico-legal literature was not discussed.

What is more, in other cases where the autopsy specified that the cord was untied but did not say that this was the cause of death, some judges and prosecutors inferred the suspect's intent to kill the baby from this lack of tying. Some judges even concluded that the suspect had intentionally aimed for the untied cord to lead to a fatal bleeding. For instance, in a case from 1947, the medical doctors clearly stated that the causes of death were a neck fracture and a traumatic brain haemorrhage, both resulting from a harsh blow with an object or against the wall. Still, the deciding judges believed that hitting the baby was the second option of the suspects – the child's mother and grandmother – once they saw that, despite their intentional act of leaving the cord untied, the child was still alive.[27] Similarly, in 1964 the provincial court of Orense convicted a woman arguing that she had suffocated the child, and that, right after doing that, she had cut and not tied the umbilical

cord, which, according to the court, 'if the baby would not have been asphyxiated would have realised her aim to kill her child'.[28] In several other cases, moreover, the failure to tie the umbilical cord was regarded as evidence suggesting that the accused did not want the child to survive.[29]

While two of the cases where doctors believed that the cord's haemorrhage was the cause of death were dismissed, and two suspects were acquitted, these outcomes did not result from doubts about whether the cord's haemorrhage was a sufficient cause of death.[30] Judging from the available data, it is clear that many indictments and convictions from the 1940s to the 1960s were based on the theoretical premise that the haemorrhage of a newborn's umbilical cord was likely to be fatal – either directly, by pointing at this as the cause of death, or more subtly, by referring implicitly to the untied cord ambivalently as either circumstantial evidence of intent or as one amongst other intended actions for taking the child's life.

In sight of the existing medico-legal debates about the fatality of the cord's haemorrhage, it is striking they were not brought up in most of the cases by any of the parties involved, given that this had the potential to counter a decisive factual element in indictments and convictions. The medical claim that the haemorrhage of the cord was the cause of death was only subject to specific scrutiny in two of the nineteen investigations where it came up, and it was not directly questioned in cassation appeals before the Supreme Court. Only one defence lawyer appointed new medical doctors – a gynaecologist and a generalist – to question the fatal haemorrhage hypothesis. In the other case, it was the prosecutor who, in the pre-trial investigation, pressed the physicians who had carried out the autopsy to specify the mechanisms of this cause of death, later on appointing other experts to confirm the opinion. In the first case, all physicians debated at trial whether the haemorrhage of the cord could have been the cause of death of the child, which the defence experts only accepted as a theoretical possibility.[31] In the other case, the new experts, two obstetricians, explained how the change from a maternal circulation to the pulmonary respiration occurred, and what consequences this had in terms of pressure in the umbilical vessels, and they argued that multiple studies had already demonstrated that the cord could be

left untied without a subsequent bleeding. They admitted that fatal umbilical haemorrhages could occasionally happen, but stated that, ordinarily, they did not. At trial, before the questions of the parties, they claimed that, in the particular case in question, the untied cord could not be the cause of death.[32] In all other cases, by contrast, this medical claim was left unquestioned.

The influence of Francoist pronatalism

The discrepancy between medico-legal discussions and forensic practices regarding the issue of the fatal umbilical cord's haemorrhage was certainly shaped by the pronatalist context of the Franco regime. Experts' and judges' assumptions, together with circumstantial evidence, bolstered the conclusion that the death of the child had resulted from an intentional act, leaving the cord untied. For example, in the only two aforementioned cases where there was debate about the cord's haemorrhage, physicians' explanations that the fatal haemorrhages were infrequent did not translate decisively into the outcome of the two aforementioned cases, and the suspects were still convicted.

In some cases, experts and jurists accepted the haemorrhage as cause of death prima facie, since this confirmed their prejudices that unmarried mothers often killed their newborns. The Franco regime adopted pronatalist policies that, following the example of Fascist Italy, framed the need to raise the Spanish population as a remedy against the nation's decline.[33] Although the obligation of declaring pregnancies was never established legally, and although concealment of birth was not in itself criminalised as was the case in other countries, the police, local authorities and neighbours in practice controlled women's bodies, denounced them and gave testimony regarding suspects' putative concealments of pregnancy and birth. This kind of testimonial or circumstantial evidence regarding concealment of pregnancy and birth led some prosecutors and judges to infer a suspect's intent to kill the newborn. Typically these inferences were implicit, but when the decision of a provincial court was appealed some judges sent an explanation to the Supreme Court regarding their judgment. In one of these explanations, from 1943, the court of Albacete explained why they had deemed the

cord's haemorrhage to be proven and attributable to the intent of the accused – despite the fact that the autopsy report had explicitly stated that the cause of death could not be determined. Essentially, the court explicated, they had built on the autopsy report; however, in fact their main reasoning hinged on circumstantial evidence about concealment of childbirth:

> that [expert] evidence is strengthened with the fact that the accused went to a stable to give birth and put the child in a sack and buried it, thus if the accused would not have wanted to kill the child to conceal her dishonour, she would have tied the umbilical cord and she would have held the childbirth in a more appropriate location.[34]

Whether the accused was already a mother was an important fact from which incriminating inferences were made, also concerning the tying of the cord. One of the main objectives of the pronatalist policies of the Franco regime was to provide Spanish women with knowledge regarding the care of infants. The aim of improving medical assistance in childbirth – since, at least until the late 1940s, in Spain the majority of deliveries were not medically assisted – was also embedded in pronatalism and its attribution of ignorance to lower-class women. Mothers (working-class mothers in particular) were believed to be responsible for child mortality, especially in children's first year of life, both due to the diet they gave to children and to their ignorance regarding childbirth, neonatal care and infants' healthcare.[35] Far from being seen as ignorant and thus not guilty, in infanticide cases mothers were judged to be knowledgeable and thus guilty of wilfully omitting perinatal care, including a proper tying of the child's umbilical cord – although this was not believed to be 'instinctual knowledge', as was the case in early-twentieth-century Buenos Aires.[36] Yet, if a suspect was already a mother, she was regarded as more knowledgeable in matters of perinatal care.[37] Particularly, the suspects' mothers – the children's grandmothers – were targeted in this regard. This was in line with the cultural expectation that they ought to take responsibility for their daughters' moral behaviour, and for the way their daughters practised motherhood: in the words of physician Roig Raventós, grandmothers had a 'classical mission as supervisors in the upbringing of [their] grandchildren'.[38] For example, in the only two cases of my sample where there was debate about the fatality

of the cord's haemorrhage, but suspects were still convicted, the deliveries had been assisted by the grandmothers of the babies. That grandmothers had experience with childbirth appears to have been the main evidence from which prosecutors and judges, in these cases, inferred that the lack of tying of the cord was intentional.

However, while this pronatalist context offers a convincing explanation for why prosecutors and judges, as well as possibly some physicians, were inclined to accept the cord's haemorrhage as cause of death, this explanation falls short of explaining why lawyers did not use medico-legal debates to raise doubts in benefit of their defendants. Moreover, it does not explain whether, and under what understanding of expertise, it was common that autopsy reports avoided referring to medico-legal debates. Analysing the Spanish forensic culture, and its specific shape in the Francoist context, allows me to shed some light on these facts.

The importance of forensic culture

Besides prejudices against unmarried women and their mothers shaped by pronatalism, there are other factors that help to clarify why the medico-legal debate and distrust about this hypothesis was not brought up more frequently, particularly by defence lawyers. For instance, defence lawyers possibly did not know the medico-legal discussions, opted for other defence strategies, or did not dedicate much effort to infanticide defendants, given that the vast majority of them were poor and were defended by lawyers in state-aid duty (*turno de oficio*). Defences focusing on the legal conditions for proving intent, for example, were feasible without questioning autopsy reports.[39] Yet, what also could have facilitated the lack of questioning of the cord's haemorrhage hypothesis – and could have contributed to lawyers' ignorance in some cases – was the character of the Spanish forensic culture in the Francoist regime. As this section will show, some characteristics of this culture can be found in how medical expertise was conceptualised, the way autopsy reports were structured, the epistemic ideals held for forensic experts, and the continuity of the pre-Francoist Spanish system of appeals.

The Spanish system of appeals prevented discussion about the cord's haemorrhage at the post-trial stage. Although during the Civil

War there were jurists who advocated for a radical change in criminal procedure (following the Nazi example) this was not taken to practice in the dictatorship.[40] Instead, the configuration of the Spanish criminal procedure built in the late nineteenth century, with the 1872 and 1882 procedural laws, was kept in force in the dictatorship.[41] In this configuration, judges had a great deal of discretion in their evaluation of evidence. Revision of facts by a second court was impossible in Spain until the Second Republic, when the law was reformed to accept 'authentic documents' as evidence that could allow the Supreme Court to review matters of fact.[42] Many defence lawyers appealed to the Supreme Court because they believed that the provincial court judges had not properly assessed expert conclusions, arguing that expert reports could qualify as 'authentic documents', or appealing to scientific expertise as the exclusive purview of doctors to question the provincial court's assessment of evidence. This was unsuccessful because the term 'authentic documents' was interpreted as mainly referring to notarial scriptures.

In a case of infanticide from 1943, for example, a lawyer argued that his defendant was convicted by mere presumptions, and that judges had gone 'beyond the medical report of the case file'. While the physicians had concluded they could not determine the cause of death, the provincial court's judgment was ambiguous and claimed that the accused had 'provoked the newborn's death *in this way*' (my emphasis), stating that she had ripped the umbilical cord and buried the child; thus, the judges' words left open whether the burial or the ripping of the untied cord had killed the baby. Physicians, the lawyer argued, were 'the only professionals capable technically to make scientific statements'.[43] However, this and other similar appeals were systematically rejected, for the Francoist Supreme Court adhered to the pre-Francoist doctrine according to which the realm of facts was of the exclusive purview of the first instance judge and expert reports, even if pronounced under Catholic oath, were not binding. Thus, the Francoist Supreme Court appropriated the cultural and legal hierarchy of the system of free evaluation of evidence that the lawyer was trying to counter.[44] These precedents prevented defence lawyers from searching for medico-legal reasons to put forward in appeals – a task in which they could have come across doubts regarding the frequency of the umbilical cord's haemorrhage.

That judges arrived at the conclusion that the newborn's cause of death was an umbilical cord's haemorrhage, and possibly that some lawyers ignored how to question that narration of facts, was overall caused by experts' omissions of any medico-legal theories and debates from their autopsy reports. It is possible that some medical examiners were unaware of the medico-legal discussions themselves. This can be explained by the fact that forensic physicians, as well as generalists, were regarded by the courts as sufficiently competent in all matters of medicine, including obstetrics. While generalists' competence could stem from the fact that they used to assist childbirths, forensic physicians' expertise derived from their image as specialists in all medical sub-disciplines relevant for legal matters. Since the early twentieth century, in Spain the specialists in legal matters were the forensic physicians, that is, medicine graduates who had obtained a permanent position through a specialised state exam (they were civil servants forming a state Corps of Forensic Physicians) to practice attached to an investigating court.[45] Through the preparation for the state exam, they supposedly obtained a specific background in all medical specialities relevant for the legal realm. In this legal system medical doctors who were not specialised in obstetric matters were therefore regarded as experts in cases of infanticide. Except for the case from Girona, where the prosecutor appointed two gynaecologists to be certain about the fatality of the cord's haemorrhage, all other prosecutors and investigating judges did not appoint gynaecologists or ask midwives about any of these issues. In the two cases in which medical specialists – obstetricians – were appointed, medico-legal debates regarding the haemorrhage of the cord were brought in, and in both cases they questioned the autopsy report's conclusion that this was the cause of death. By contrast, non-specialists assumed that it was clear that the cord's haemorrhage could kill the baby.[46]

The epistemic ideals held by physicians shaped autopsy reports, and favoured the presentation of some medical statements, like the cord's haemorrhage, as more conclusive than in specialised literature. The form of Spanish autopsy reports did not aim at reflecting the theories behind experts' findings. Autopsy reports were rather conceived of as public documents containing a statement under oath, and by which the experts provided the court with only the strictly relevant information, their authority and expertise being

assumed to be already verified through their credentials and the fact that they were permanently attached to the court. The structure of these reports as mandated by the 1882 procedural law included an organised description of the external and internal examination of the body. After that, they had to provide the court with the relevant conclusions and findings, including an individualised cause of death and their thoughts about the circumstances of the death.[47] Thus, theoretical discussions, assessments of likelihood of a certain pathological event, and didactic explanations did not have a predetermined place in the structure of autopsy reports. Experts were also supposed to indicate their examination techniques and results, but in practice the description of those techniques was typically superficial or left out of reports, which mostly indicated what experts had observed, but not how they had arrived at their observations.[48]

While some experts, like the forensic physician Gregorio Nieto, believed that it was convenient to include all the steps of their inferences as much as possible, others believed that 'reasoning is not necessary, since one [the expert] declares under oath', and thus, their word could be taken as truthful.[49] In practice, even those practitioners who detailed their inferences normally limited themselves to connecting pathological observations with their subsequent conclusions, but they did not mention which theoretical framework or methods they were adhering to. In this manner, in cases dealing with the umbilical cord's supposed haemorrhage, what would be included as a reasoning was that the cord presented a certain length, colour and cut, and that certain organs or vessels were bloodless, without any references to authors, debates or theories. This customary exclusion of theoretical considerations left room for concealing relevant information on purpose, which physicians could decide to do for various reasons. This was also the case in other countries where – like in Spain – written autopsy reports were mandated: Nicholas Duvall has argued that autopsy reports in Scotland functioned as Latourian black boxes, affirming experts' authority via the concealment of experts' uncertainty.[50] Indeed, the structure of autopsy reports in Scotland and Spain were apparently very similar, which suggests that this might be a common element of various European contemporary forensic cultures after nineteenth-century liberal reforms of criminal procedure.

Besides concealing uncertainties as performance of expertise, I argue, the structure of autopsy reports in Franco's Spain also allowed for emphasising conclusive and incriminating post-mortem reports. As Duvall has also shown to be the case in Scotland, mandatory written autopsy reports 'facilitated a system whereby additional medical expertise could be brought to bear in the investigation' without need for an exhumation and new autopsy and thus 'enabled' second experts' challenge of the initial conclusions of the autopsy.[51] In the aforementioned case in which a prosecutor from Girona appointed two specialist gynaecologists to clarify whether the cord's haemorrhage could be fatal, the specialists revised the autopsy report written by two general practitioners instead of performing a new post-mortem examination. However, even if written autopsy reports provided room for a differing second opinion, Duvall's argument about the potential for challenges must be nuanced, at least in the Spanish context. Revision of written reports, overall, could make disagreement explicit, but still, the autopsy report's lack of theoretical and methodological reflection did not allow for a two-way medical discussion per se if experts were not personally confronted. Confrontation had to take place after a direct order of the investigating judge for experts to testify together, or at trial – where, often, medical examiners were not present, because the parties only requested the autopsy report as documentary evidence. In the Girona case, the gynaecologists could engage with the medico-legal literature and question the written report of the two GPs by merely reading it, but it was only during the trial, when they could talk to one of these generalists, that it could become clear that the first medical examiners did not have a differing theoretical position to respond to the specialists.[52] In sum, the Spanish configuration of autopsy reports excluded theoretical decisions and disagreements, and this favoured the lack of debate about the fatality of the umbilical cord's haemorrhage.

The normative ideas about communication held by medical experts also impacted on the structure of autopsy reports. Similarly to what happened in Scotland, Spanish medico-legal guidelines regarded a good report and statement as a concise and plain one, which had to ideally avoid technical terms and discussions.[53] This implied, importantly, that experts were supposed to refrain from spontaneously discussing any data that the court had not requested

and to avoid any information that could lead to confusion. Yet, some forensic physicians believed they had to actively try to identify perpetrators, their motives and the criminal actions.[54] Consistently with this ideal, in practice some medical examiners framed cases of suspected infanticide in which the only identifiable cause of death was the bleeding of the umbilical cord as criminal cases, by stating that they believed that the cord was left untied on purpose. A paradigmatic example is a 1941 post-mortem report from a forensic physician and a general practitioner from Madrid. These experts did not mention the fact that the cord was cut at the level of the navel for justifying the likeliness that the haemorrhage was the cause of death: instead, they mentioned it because they believed it 'obviously demonstrates that the lack of care was voluntary'. Besides this reconstruction of the deeds, they also went on to infer that the child's injuries around the mouth were 'without any doubt' a result of someone's attempt to silence the baby's cries. This, moreover, was for them evidence that besides the mother of the child someone else must have intervened in the delivery and crime.[55]

To these epistemic ideals could be added physicians' aim to show adherence to the regime and collaboration with Francoist courts. Colleagues and authorities of the dictatorship impelled forensic physicians to collaborate with the regime and act in coherence with its ideology and religion. This point was expressed by the Falangist Antonio de la Fuente with the lemma, 'We do not want mere technicians of legal medicine'.[56] This normative discourse meant to intimidate and set the tone for a renewed Francoist forensic culture, as direct ideological purges themselves did.[57] Given this context, forensic physicians and other medical doctors appointed as experts by the courts, could have regarded the task of helping the courts, and the legal mandate to find a cause of death, as a stricter demand than in other political contexts. Historians and STS scholars have discussed how impartiality – understood as experts' neutrality and independence regarding the interests of the parties – has been a key value of forensic expertise in criminal matters, particularly in legal systems in which some experts were appointed by the defence and others by the prosecution.[58] Medical examiners in the Franco regime were presented with an additional ideal: they were encouraged to mainly collaborate with the regime, which could be interpreted as an order to help in the prosecution of criminals.

In sum, while the Francoist forensic culture appropriated many elements of the nineteenth-century configuration of the Spanish forensic culture, shared by other European countries, its specific shape bolstered these continuities by explicitly framing them in the new dictatorial context. The outcome, the Francoist forensic culture, facilitated indictments and convictions that fitted in assumptions and prejudices in line with pronatalist policies and ideas. This led to a situation in which, despite the contemporary scientific state of the art, which denounced the hypothesis of the fatal haemorrhage as rare, this hypothesis was commonly found to apply in cases of infanticide, leading to indictments and convictions. Experts and jurists were already prone to accepting that unmarried mothers had killed their babies by not tying the cord, but arriving at such a conclusion was facilitated by the character of the Spanish forensic culture and its continuation and specific shape in the Francoist regime.

Conclusion

The specific medical issue of whether the umbilical cord haemorrhage was fatal came up in several infanticide trials in Spain in the period 1937–1969. When this happened, medical and legal practitioners accepted this possibility more often than researchers and leading authors in medico-legal literature. I have pointed to several factors that explain this discrepancy between theory and practice, which concern the shape of the Francoist forensic culture. One important factor was that courts regarded forensic physicians and generalists as sufficiently competent in obstetric matters. Both epistemic ideals and indirect political pressures to collaborate with the Francoist state could have encouraged medical experts to provide conclusive reports and exclude any discussion of theoretical debates and jargon. Thus, experts' specific assessments regarding the likelihood of a fatal umbilical cord haemorrhage were uncommon, and they could negatively impact the expert's image.

Moreover, the Francoist forensic culture, building on the previous Spanish configuration of criminal procedure, left little space for the questioning and discussion of factual evidence in appeals, making it impossible for defence attorneys to contest the factual decisions of courts. All this shaped a context in which previous

decisions building on the haemorrhage of the cord as cause of death were likely to be repeated, and concrete attempts to question this repetition did not have a reasonable chance to succeed. This analysis shows how the application of the concept of forensic culture can help to add precision and complexity to the available historiography about medical evidence in cases of infanticide: in some contexts, medical evidence contributed to indictments and convictions, and did not only function as a vehicle to mete out lenient sentences.

But this example also demonstrates that it is necessary to consider medical experts as crucial agents of the Francoist justice in the criminal law jurisdiction. Previous works have already shown the importance of assessments of dangerousness, corruption, document forgery, and manipulation of scientific theories and conclusions in regard to medical expertise functioning in the dictatorship. The fact that medical expertise was also important in other types of cases shows that more research is needed about the mechanisms by which the Francoist justice, including the ordinary criminal jurisdiction, worked as a key means for repression. Indeed, the configuration of medical expertise and the specific shape of the Spanish forensic culture in the dictatorship contributed crucially to criminal investigations and trials in which the enforcement of pronatalist policies and ideas was at stake, as the case of infanticide and the umbilical cord has illustrated.

Notes

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1 Amongst others: Kerstin Michalik, 'The Development of the Discourse on Infanticide in the Late Eighteenth Century and the New Legal Standardization of the Offense in the Nineteenth Century', in Ulrike Gleixner and Marion W. Gray (eds), *Gender in Transition: Discourse and Practice in German-Speaking Europe, 1750–1830* (Michigan: The University of Michigan Press, 2006), pp. 51–71; Willemijn Ruberg, 'Travelling Knowledge and Forensic Medicine: Infanticide, Body and Mind in the Netherlands, 1811–1911', *Medical History* 57:3 (2013), pp. 359–376; Silvia Chiletti, 'Infanticide and the Prostitute: Honour,

Sentiment and Deviancy between Human Sciences and the Law', in Valeria P. Babini, Chiara Beccalossi and Lucy Riall (eds), *Italian Sexualities Uncovered, 1789–1914* (Basingstoke: Palgrave MacMillan, 2015), pp. 143–161.

2 See also: Karen M. Brennan, ' "A Fine Mixture of Pity and Justice": The Criminal Justice Response to Infanticide in Ireland, 1922–1949', *Law and History Review* 31:4 (2013), pp. 793–841; Rachel Dixon, *Infanticide: Expert Evidence and Testimony in Child Murder Cases, 1688–1955* (Abingdon: Routledge, 2021).

3 Simone Geoffroy-Poisson, 'L'infanticide devant la cour d'assises de la Haute-Marne au XIX[e] siècle', *Les Cahiers du Centre de Recherches Historiques* 35 (2005), online, p. 11.

4 Sara McDougall and Felicity Turner, 'Introduction: Rethinking the Criminalization of Childbirth: Infanticide in Premodern Europe and the Modern Americas', *Law and History Review* 39:2 (2021), pp. 225–228, here p. 228.

5 Nora E. Jaffary, 'Maternity and Morality in Puebla's Nineteenth-Century Infanticide Trials', *Law and History Review* 39:2 (2021), pp. 299–319, here p. 309.

6 Yet, she did not provide evidence showing that this was a generalised practice, and she did not analyse the role of experts. Kristin Ruggiero, 'Honor, Maternity, and the Disciplining of Women: Infanticide in Late Nineteenth-Century Buenos Aires', *Hispanic American Historical Review* 72:3 (1992), pp. 353–373, here pp. 360, 363–364.

7 Supreme Court of Spain, Judgment of 26 November 1928, ECLI:ES:TS:1928:844 (European Case Law Identifier, for metadata and full judgment search in: https://e-justice.europa.eu/430/EN/european_case_law_identifier_ecli_search_engine?clang=en).

8 My total sample (taking into account all kinds of sources) is biased towards the 1940s and 1950s, given that only six of 139 began in the 1960s. Besides fifteen cassation appeal dossiers from the 1940s (Archivo Histórico Nacional) and twenty-four judgments by the Supreme Court from 1939 to 1969 published in the database of the CENDOJ (www.poderjudicial.es), which cover all the Spanish territory, my sample consists of one hundred complete court files (pre-trial and court dossiers) from six provinces: all the cases available at the archives from Tarragona (investigations that began from 1936 to 1960), Ávila (1937–1945), Girona (1939–1952) and Madrid (1939–1959), and random selections from Guadalajara and Toledo from the 1940s and 1950s. This sample of complete court files includes investigations of newborn child murder that began as investigations of parricide, considering all files of parricide available from Girona,

and a random selection from the other provinces. This sample of complete court files includes dismissals and cases where suspects stood trial. To assess the representativeness of my sample of complete court files in concrete, it is useful to compare it with prosecutors' statistics, which are available for the period 1944–1959, not before. For the period 1944–1959 I consulted all the (twenty-five) cases that were registered in the inventories from Madrid's archive (*Archivo General de la Administración*). These only cover a small part (less than 1 per cent) of the cases that were allegedly investigated in that province (2,068), assuming that prosecutors' statistics of the time were certain. In provinces other than Madrid, albeit there are also some discrepancies between archival records and statistics, the total number of cases investigated was lower, so the cases available from the period 1944–1959 cover a larger percentage of the total than in the case of Madrid: eight of thirty-one (Girona), four of five (Ávila) and nine of thirteen (Tarragona). The sample for Toledo and Guadalajara was exploratory and randomly selected, covering (for the period 1944–1959) two of thirty-one (Toledo) and five of twenty-four cases (Guadalajara). Further details about my sample are available upon request. For the statistics, see the memos published each year from 1945 to 1960 by the chief prosecutors, available online: www.fiscal.es/documentaci%C3%B3n?sort=publishDate%2B&q=memoria.

9 Juan Francisco Gómez Westermeyer, 'Historia de la delincuencia en la sociedad española: Murcia, 1939–1949: Similitudes y diferencias en otros espacios europeos' (PhD thesis, Universidad de Murcia, 2006), p. 346; Tamara López Fernández, 'Aunque me cueste la vida. El aborto en el Partido Judicial de Lugo (1945–1960)', in Ismael Saz Campos *et al*. (eds), *X Trobada Internacional Investigadorxs del Franquisme* (València: Comissions Obreres del País Valencià and Universitat de València, 2021), pp. 781–796, here p. 795.

10 Adrián Sánchez Castillo, 'La "justicia" de Franco en Calera y Chozas (Toledo) falsificación documental y en-cubrimiento de asesinatos extrajudiciales en la posguerra española', *Revista Universitaria de Historia Militar* 17:8 (2019), pp. 229–254; César Lorenzo Rubio, 'La máquina represiva: la tortura en el franquismo', in Pedro Oliver Olmo (ed.), *La tortura en la España contemporánea* (Madrid: *Catarata*, 2020), pp. 131–198.

11 Carolina García Sanz, '"Disciplinando al gitano" en el siglo XX: regulación y parapenalidad en España desde una perspectiva europea', *Historia y Política* 40 (2018), pp. 115–146; Ricardo Campos Marín, 'La construcción psiquiátrica del sujeto peligroso y la Ley de Vagos y Maleantes en la España franquista (1939–1970)',

Culturas Psi 7 (2016), pp. 9–44; Abel Díaz, 'Afeminados de vida ociosa: Sexualidad, género y clase social durante el franquismo', *Historia Contemporánea* 65 (2021), pp. 131–162.

12 Stephanie Wright, '"Caballeros mutilados" y mujeres "deshonradas": cuerpo, género y privilegio en la posguerra española', *Historia y Política* 47 (2022), pp. 163–192, here pp. 182–183.

13 Leopoldo López Gómez and Juan Antonio Gisbert Calabuig, *Tratado de medicina legal*, vol. 1 (Valencia: Saber, 1961), p. 214. Original: 'se consideran completamente excepcionales, e incluso inverosímiles'.

14 Antonio Lecha-Marzo, *Tratado de autopsias y embalsamamientos: el diagnóstico médico legal en el cadáver* (Madrid: Los Progresos de la Clínica, 1917), p. 363.

15 Étienne Martin, *Manual de Medicina Legal*, trans. Wilfredo Coroleu (Barcelona: Salvat, 1942), p. 657.

16 Spain, Tarragona, Arxiu Històric de Tarragona (AHT), Audiència Provincial de Tarragona, 'Sumari 280/1950', Installation unit 3253, Correlative unit 486; Guillermo Uribe Cualla, *Medicina Legal y Psiquiatría Forense* (Madrid-Bogotá: Ediciones Guadarrama S.L., 1957, 7th edn), p. 484.

17 Pedro Mata, *Tratado de medicina y cirugía legal*, vol. 1, 2nd edn (Madrid: Imprenta de Don Joaquin Merás y Suarez, 1846), pp. 438–439; Ambroise Tardieu, *Étude médico-légale sur l'infanticide* (Paris: Ballière et Fils, 1868), pp. 189–193.

18 Antonio Piga, José Águila Collantes and Blas Aznar, *Manual Teórico Práctico de Medicina Forense. La presente obra contesta al programa de médicos forenses. Tomo I* (Madrid: Instituto Reus, 1935).

19 Albert Ponsold, *Manual de Medicina Legal*, trans. Manuel Sellés (Barcelona: Salvat, 1954), p. 317.

20 Luis C. Rodríguez Ramos, 'LÓPEZ GÓMEZ, Leopoldo y GISBERT CALABUIG, Juan Antonio. "Tratado de Medicina legal". Editorial Saber, Valencia, 1967, T. I., 843 págs.; T. II., 583 págs., T. III., 595 págs.', *Anuario de Derecho Penal y Ciencias Penales. Fascículo 2. Revista de Libros* (1969) pp. 401–402, here p. 401. Original: 'considerado […] como el más completo y el que alcanza un mayor rango científico entre los textos dedicados al tema'. Vicente Moya Pueyo *et al*., *Medicina Legal y Forense*, vol. 1 (Madrid, 1972), p. 4.

21 Spain, Alcalá de Henares, Ministerio de Cultura y Deporte, Archivo General de la Administración (hereafter AGA), Catalog (07) 51_00, Catalog number 26/12298, Audiencia Provincial de Madrid, 'Sumario 8/1959', fol. 22 rear. Original: 'signos de violencia mecanica [sic]', 'pérdida de sangre'.

22 AGA, Catalog (07) 01_13, Catalog number 41/00708, Audiencia Provincial de Madrid, 'Sumario 342/1941, Rollo 6860/1941'; AGA, Catalog (07) 01_23, Catalog number 41/01334, Audiencia Provincial de Madrid, 'Sumario 40/1941'; AGA Catalog (07) 01_28, Catalog number 41/06319, Audiencia Provincial de Madrid, 'Sumario 150/1943'; AGA Catalog (07) 01_36, Catalog number 41/07192, Audiencia Provincial de Madrid, 'Sumario 231/1944, Rollo 31/1945'; AGA Catalog (07) 01_36 41/07228. Audiencia Provincial de Madrid, 'Sumario 106/1944'. AGA Catalog (07) 01_55, Catalog number 41/15213, Audiencia Provincial de Madrid, 'Sumario 341/1947'; Spain, Ávila, Archivo Histórico Provincial de Ávila (hereafter AHPAv), Catalog number 037405, Audiencia Provincial de Ávila, 'Sumario 10/1937, Rollo 61/1937'; AHPAv, Catalog number 037433, Audiencia Provincial de Ávila, 'Sumario 10/1939, Rollo 33/1939'; Spain, Toledo, Archivo Histórico Provincial de Toledo (hereafter APHTO), Catalog number 70241/2, Audiencia Provincial de Toledo, 'Sumario 37/1943, Rollo 692/1943'; Spain, Guadalajara, Archivo Histórico Provincial de Guadalajara (AHPGU), Catalog number J-001214, Audiencia Provincial de Guadalajara, 'Sumario 32/1945, Rollo 180/1945', AHPGU, Catalog number J-001234, Audiencia Provincial de Guadalajara, 'Sumario 230/1948', and AHPGU Catalog number J-000250, Audiencia Provincial de Guadalajara, 'Sumario 40/1949, Rollo 128/1949'; Spain, Girona, Arxiu Històric de Girona (hereafter AHG), Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943', AHG, Catalog number 247/1, Audiència Provincial de Girona. 'Causa 87/1950, Rotlle 386/1950'; Spain, Madrid, Ministerio de Cultura y Deporte, Archivo Histórico Nacional (hereafter AHN), ES.28079/6//FC-TRIBUNAL_SUPREMO_PENAL (Supreme Court of Spain, Criminal Law), Box 10, Case file 1126; Box 5, Case file 965; Box 61, Case file 148; Box 149, Case file 1436. Supreme Court of Spain, Judgments of 3 March 1949 (ECLI:ES:TS:1949:803), 21 April 1951 (ECLI:ES:TS:1951:1242), and 12 June 1957 (ECLI:ES:TS:1957:422).

23 In one case judges concluded this while the physicians had claimed they could not determine a cause of death (AHN, ES.28079/6//FC _ TRIBUNAL_SUPREMO_PENAL Box 5, Case file 965). In other cases the autopsy report was missing (because the investigation dossier was unduly destroyed: AGA, Catalog (07) 01_36, Catalog number 41/07192) or was not kept in the archive I consulted.

24 AGA, Catalog (07) 01_23, Catalog number 41/01334, Audiencia Provincial de Madrid, 'Sumario 40/1941'.

25 AHPTO, Catalog number 70241/2, Audiencia Provincial de Toledo, 'Sumario 37/1943, Rollo 692/1943'; AHG, Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943', AHG, Catalog number 247/1, Audiència Provincial de Girona. 'Causa 87/1950, Rotlle 386/1950'; AGA, (07) 01_23, 41/01334, Audiencia Provincial de Madrid, 'Sumario 40/1941'; AGA (07) 01_36, 41/07228, Audiencia Provincial de Madrid, 'Sumario 106/1944'; AHPAv Catalog number 037405, Audiencia Provincial de Ávila, 'Sumario 10/1937, Rollo 61/1937'; AHG Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943'; López Gómez and Gisbert Calabuig, *Tratado*, 1, p. 214 Martin, *Manual*, p. 657.

26 AGA, Catalog (07) 01_28, Catalog number 41/06319, Audiencia Provincial de Madrid, 'Sumario 150/1943'; AGA Catalog 01_13, Catalog number 41/00708, Audiencia Provincial de Madrid, 'Sumario 342/1941, Rollo 6860/1941'; AHPGU, Catalog number J-1234, Audiencia Provincial de Guadalajara, 'Sumario 230/1948'. Original: 'a dos traveses de dedo'. This autopsy report, though, indicated that once opened there was no 'clot' in the cord (Original: 'cohágulo' [sic]).

27 AHT, Audiència Provincial de Tarragona, 'Sumari 80/1946', Installation unit 3524, Correlative unit 182.

28 Supreme Court of Spain, Judgment of 27 February 1967, ECLI:ES:TS:1967:2370. Original: 'en el supuesto de no haberle asfixiado conseguiría dar muerte a su nacido hijo'.

29 AGA Catalog (07) 01_36, Catalog number 41/07209, Audiencia Provincial de Madrid, 'Sumario 99/1944, Rollo 685/1944', AHN, ES.28079.AHN/6//FC-TRIBUNAL_SUPREMO_Penal, Box 5, Case file 965; Supreme Court of Spain, Judgments of 10 March 1949 (ECLI:ES:TS:1949:803), 8 May 1959 (ECLI:ES:TS:1959:1107), 24 March 1960 (ECLI:ES:TS:1960:1637), 27 February 1967 (ECLI:ES:TS:1967:2370), 3 June 1967 (ECLI:ES:TS:1967:2827), 15 January 1968 (ECLI:ES:TS:1968:1129), and 3 June 1969 (ECLI:ES:TS:1969:1027).

30 Only two cases were dismissed, one because the suspect was found to be unaccountable and the other because no suspect could be identified. AHPAv, Catalog number 037433, Audiencia Provincial de Ávila, 'Sumario 10/1939, Rollo 33/1939'; AGA, Catalog (07) 01_55, Catalog number 41/15213, Audiencia Provincial de Madrid, 'Sumario 341/1947'. We cannot rule out the possibility that there were cases in which someone – including the police or peace courts – decided not to report a case for thinking that the untied cord was not suspicious of

criminality, but these decisions would either leave no trace or would only be traceable through municipal archives throughout Spain, out of the scope of my sample. For the acquittal see: AHPAv, Catalog number 037405, Audiencia Provincial de Ávila, 'Sumario 10/1937. Rollo 61/1937'.

31 AHPAv, Catalog number 037405, Audiencia Provincial de Ávila, 'Sumario 10/1937, Rollo 61/1937'.

32 AHG, Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943'.

33 Laura Sánchez Blanco, 'Las políticas demográficas italiana y española: l'Opera Nazionale per la protezione della Maternità e dell'Infanzia y la Obra Nacional-Sindicalista de Protección a la Madre y al Niño', in Patrizia Botta *et al*. (eds), *Rumbos del hispanismo en el umbral del Cincuentenario de la AIH*, vol. 7 (Roma: Bagatto Libri, 2012), pp. 227–236.

34 AHN, ES.28079/6//FC _TRIBUNAL_SUPREMO_PENAL Box 5, Case file 965. Original: 'esta prueba se robustece con el hecho de ir a dar a luz la procesada a la cuadra y meterlo en un saco y enterrarlo, de suerte que si la inculpada no hubiera querido matar al niño para tapar su deshonra, hubiera ligado el cordón umbilical y el acto del parto lo hubiese celebrado en sitio más adecuado'.

35 Irene Palacio Lis, *Mujeres ignorantes: madres culpables. Adoctrinamiento y divulgación materno-infantil en la primera mitad del siglo XX* (Valencia: Universitat de València, 2003). Salvador Cayuela Sánchez, 'La biopolítica en la España franquista' (PhD thesis, Universidad de Murcia, 2010).

36 Ruggiero, 'Honor, Maternity', p. 363.

37 Supreme Court of Spain, Judgment of 18 October 1962, ECLI:ES:TS:1962:530.

38 Palacio Lis, *Mujeres ignorantes*, p. 199. Original, as cited by Palacios: 'clásica misión fiscal en la crianza de los nietos'.

39 AGA, Catalog (07) 01_28, Catalog number 41/06319, Audiencia Provincial de Madrid, 'Sumario 150/1943'.

40 Mónica Lanero Táboas, 'Proyectos falangistas y política judicial (1937–1952): dos modelos de organización judicial del Nuevo Estado', *Investigaciones históricas: Época moderna y contemporánea* 15 (1995), pp. 353–372.

41 Regarding the nineteenth-century reform of procedural laws in Spain see: Enrique Álvarez Cora, 'La evolución del enjuiciamiento en el siglo XIX', *Anuario de Historia del Derecho Español* (2012), pp. 81–112.

42 'Ley disponiendo que los artículos que se mencionan de la ley de Enjuiciamiento criminal queden redactados en la forma que se indica', *Gazeta de Madrid* 188 (7 July 1933), pp. 139–140.

43 AHN, ES.28079/6//FC _TRIBUNAL_SUPREMO_PENAL Box 5, Case file 965. Original: 'más allá que el dictamen médico del sumario'.
44 Amongst others: Supreme Court of Spain, Judicial Decree of 9 April 1951, ECLI:ES:TS:1951:47A.
45 Juan Manuel Jiménez Muñoz, *Historia legislativa del cuerpo de médicos forenses* (Valladolid: Universidad de Valladolid, 1974).
46 AHG, Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943'. Whether the cord was customarily tied is unclear, since some manuals appear to have doubted this was the case, aiming at teaching women to tie the cord: A. Frias Roig, *Lo que deben saber las madres* (Madrid: Publicaciones "Al servicio de España y del Niño Español", 1946), p. 11. Moreover, that custom or medical advice did not assume the haemorrhage's fatality: as the gynaecologists appointed by the prosecutor in the case from Girona said, blood loss through the cord was not fatal, but it was not good for the child, especially if added to other health conditions or lack of care in general.
47 'Ley de Enjuiciamiento Criminal', *Gazeta de Madrid*, 274 (1 October 1882), p. 3.
48 'Ley de Enjuiciamiento Criminal', *Gazeta de Madrid*, 274 (3 October 1882), p. 19.
49 Gregorio Nieto Nieto, *La autopsia médico-legal* (Soria: Imp. Casa de Observación, 1947), pp. 10 and 14; López Gómez, Gisbert Calabuig, *Tratado* 1, p. 62. Original: 'No se precisan razonamientos, ya que se declara bajo juramento'.
50 Nicholas Duvall, 'Reporting Violent Death: Networks of Expertise and the Scottish Post-mortem', in: Alison Adam (ed.), *Crime and the Construction of Forensic Objectivity from 1850* (London: Palgrave, 2020), pp. 211–229, here p. 213.
51 Duvall, 'Reporting Violent Death', p. 214; Nicholas Duvall, 'Forensic Medicine in Scotland, 1914–39' (PhD thesis, University of Manchester, 2013), p. 34.
52 AHG, Catalog number 129/6, Audiència Provincial de Girona, 'Causa 86/1943, Rotlle 505/1943'.
53 López Gómez, Gisbert Calabuig, *Tratado*, 1, p. 62.
54 López Gómez, Gisbert Calabuig, *Tratado*, 1, p. 78; Nieto, *La autopsia*, pp. 85–89; Eduardo Guija Morales, *Introducción a la metódica funcional para el diagnóstico médicoforense* (Barcelona: Ediciones BYP, 1950).
55 AGA, Catalog (07) 01_23, Catalog number 41/01334, Audiencia Provincial de Madrid, 'Sumario 40/1941', fol. 11 front. Original: 'demuestra evidentemente que esta falta de cuidado fue hecha voluntariamente', 'sin género de duda'.

56 Alfonso de la Fuente Chaos, *Los valores morales del nacional-sindicalismo y la medicina legal* (Madrid: Ediciones de la Vicesecretaría de Educación Popular, 1942). Original: 'No queremos simples técnicos de la medicina legal'.

57 As was also the case with other public servants, medical doctors and forensic physicians were purged if they were regarded as ideologically contrary to the new Regime, or if they had held important political or administrative positions in the Second Republic. Mónica Lanero Táboas, *Una milicia de la justicia. Política judicial del franquismo (1936–1945)* (Madrid: Centro de Estudios Constitucionales, 1996).

58 For instance: Christopher Hamlin, 'Scientific Method and Expert Witnessing: Victorian Perspectives on a Modern Problem', *Social Studies of Science* 16:3 (1986), pp. 485–513; Sheila Jasanoff, *Science at the Bar: Law, Science, and Technology in America* (Cambridge, MA: Harvard University Press, 1997); Barbara J. Shapiro, 'Testimony in Seventeenth-Century English Philosophy: Legal Origins and Early Development', *Studies in History and Philosophy of Science* 33:2 (2002), pp. 243–263; Alison Adam, *A History of Forensic Science: British Beginnings in the Twentieth Century* (Abingdon: Routledge, 2016); Riccardo Montana, 'Prosecution in Action in the Italian Justice System: The Amanda Knox Case', in Lieve Gies and Maria Bortoluzzi (eds), *Transmedia Crime Stories* (Basingstoke: Palgrave, 2016), pp. 167–188.