

Consented autopsy at deaths door

Author: Angus Turnbull

Aims

Autopsy, derived from the Greek 'autos' and 'opsomeri' means 'to see for oneself' and originates from mummification using human dissection around 3000 BCE. Over five millennia it has enabled the study of human anatomy, physiology and pathophysiology culminating in 21st century medicine. Autopsy is divided into medico-scientific (consented, usually by a relative) and medico-legal (required by legal authority such as Her Majesty's Coroner or Procurator Fiscal). Hospital autopsy rates have been documented as declining for over half a century worldwide. The most recent studies estimate autopsy rates of less than 10% for teaching hospitals and around 5% elsewhere. While the decline is known, it is poorly researched and quantified, and no study to date has quantitatively examined the whole UK simultaneously – previous studies relied upon single site analysis which shows much variation.

Methods

A 'Freedom of Information request' to all (n=186) NHS trusts in England (n=160), NHS boards in Wales (n=7) and Scotland (n=14), and social care trusts in Northern Ireland (n=5) enabled the calculation of consented autopsy rate for individual centres and the UK as a whole for the year 2013. The autopsy rate was calculated as the number of hospital consented autopsies as a percentage of total inpatient deaths.

Results

A 99% (n=184) response rate for the UK was achieved and yielded a mean UK autopsy rate for 2013 of 0.69%. Country mean rates were 0.51% (England), 2.13% (Scotland), 0.46% (Northern Ireland) and 0.65% (Wales). A total of 23% (n=38) of all NHS trusts/boards had a rate of 0%, and 86% (n=143) had a rate of less than 1%.

Conclusion

Autopsy has been the gold standard for determining the cause of death, and as such it has a pivotal place in medicine and society in general to determine truth. Despite this the continual dramatic decline in consented autopsy must be one of the most rapid changes in the practice of medicine ever – rates of 25% were routine in UK hospitals 30 years ago. If autopsy is valuable

then this change is alarming. The consequences of the decline are poorly appreciated by many clinicians and stems from physician overconfidence in diagnostics. The situation is serious. It is five to midnight. Autopsy is in danger of being extinguished. ■

Conflict of interest statement

None declared.

Author: NHS Lothian, UK