

PAUCITY OF CLINICAL AUTOPSIES, A GREAT CONCERN

Olugbenga A Silas¹, Agabus N. Manasseh¹, Godwins O. Echejoh¹, Barnabas M. Mandong¹, Ohayi SA Robsam³, Nnoli A Martins²

¹Department of Pathology, Jos University Teaching Hospital, PMB 2076, Jos, Plateau State, Nigeria.

²Department of Pathology Federal Medical Centre Umuahia, Abia state

³Department of Pathology ESUT, Enugu, Nigeria

*Corresponding author: Dr O.A.SILAS
Pathology Department, Jos University Teaching
Hospital, Jos, Plateau State. e-mail: drgbenga@yahoo.com.

ABSTRACT

BACKGROUND. Clinical (hospital) autopsy rates have been in a great decline worldwide especially in Africa, Nigeria inclusive. Its role in ascertaining diagnosis, explaining pathogenesis, medical auditing and continuous medical education cannot be overemphasized.

OBJECTIVE. To determine the frequency of clinical autopsies in our environment.

METHODOLOGY. It is a retrospective review of clinical (hospital) autopsies in the Pathology department of Jos University Teaching Hospital (JUTH) over a period of ten years (January 1999-December 2008)

RESULT. Clinical autopsy rates were found to be very low, an average of 1 per year

CONCLUSION. The frequency of clinical autopsies in our environment is very low. The

place of awareness on its beneficiary role both to the public and medical practitioners should be emphasized.

KEY WORDS. Clinical, autopsy, Jos University Teaching Hospital

INTRODUCTION

Autopsy (necropsy) means seeing for yourself, it is the examination of a body after death for the purpose not only to determine the cause of death but also to identify pathology or pathologies associated with the death and to explain the pathogenesis leading to such death¹. It is also the systematic examination of a body after death to determine the extent of disease, the effect of treatment and the presence of an unrecognized ailment that could have contributed to the death of the patient^{1, 2}. There are basically two types of autopsies: clinical autopsy is that requested by a physician to find the cause of death and explain its pathogenesis, Medico-legal autopsy however, is backed by the laws of the land and requested by a

coroner for the purpose of determining cause of death and unraveling mysteries surrounding death.

The rates of autopsies generally have declined worldwide, Africa inclusive. Rate of autopsy in USA was 41.1% in 1964, 34.9% in 1972, 15.7% in 1981 and 11% in 2003 ³. In England and Wales rate declined from 8.9% in 1966 to 1.7% in 1991 ⁴. Similar decline was reported in France and China ^{5, 6}. The decline is attributed to the emergence of sophisticated diagnostic tools for diagnosis antemortem e.g. computerized axial tomography and magnetic resonance imaging. Though there is decline in autopsies generally, rate of decline of medicolegal autopsies is not as fast as clinical autopsies ^{7, 8}. Clinical autopsies can achieve certain vital goals which include:

Ascertaining the main disease and ancillary diseases, shed light on their pathogenesis and understand their evolution and course

Determine the cause(s) of death and of therapeutic failure

Evaluate the effects of treatment and determine its side effects

RESULTS

To provide education at all levels to the deceased's family, medical students, physicians in training, attending physicians, scientists, nurses, statisticians, health management team etc

Data gotten from clinical autopsies help in medical auditing and is the backbone of good clinical practice.

METHODOLOGY

This study was carried out in Jos University Teaching Hospital (JUTH) which is situated at Jos Plateau State, North central Nigeria. The hospital is a 560 bed tertiary health center and has a pathology department with five pathologists catering for the hospital and numerous Government, missionary and private hospitals in the state. It also caters for hospitals from surrounding states, of Nassarawa, Bauchi, Benue and Taraba. Request for clinical autopsies are made to the pathology department of JUTH from the various hospitals enumerated. Records of such clinical autopsies over a Ten year period (January 1999-December 2008) were retrieved from the records department of the institution and the results discussed

Table 1: Frequency of clinical autopsies in JUTH, Jos

Year	Number of autopsies
1999	1
2000	-
2001	1
2002	2
2003	3
2004	1
2005	-
2006	-
2007	1
2008	3
Total	12

DISCUSSION

From the results it is obvious that the rate of clinical autopsies is low in our environment, Our hospital records as low as one per year on averagely (table 1). This finding is consistent with that reported by Oluwasola et al at Ibadan Western Nigeria who reported an obvious decline in clinical autopsies,⁹ and that by Malami et al at Zaria Northern Nigeria¹⁰. In the Western world a general decline has also been reported in the USA, England and France.^{3,4,5} This has been attributed to presence of advances in diagnostic technologies, failure to obtain consent from patient or relatives, fear of litigation and shortage of pathologists.^{4,5}

A study conducted by Ekaenem et al at Benin, Nigeria on the attitude of medical students towards autopsy shows negative, nonchalant attitude towards this important scientific procedure.¹¹ This has been the trend and they become doctors who are not interested in requesting for autopsies. Recently in Nigeria,

most tertiary health centers have acquired sophisticated diagnostic tools aiding diagnosis antemortem. This has reduced the need for clinical autopsies. However in a report by Friedlander E. D. in England, in 34% cases, the cause of death prior to autopsy was completely wrong.¹¹ Friedlander in another paper documented that more than a quarter of autopsies reveal major surprise other than the presumed causes of death.¹² This buttresses the need for clinical autopsies as a tool for auditing and continuous medical training. The art of obtaining consent from patient before death or relatives is an important factor determining rates of clinical autopsies. Oluwasola et al in Ibadan, Nigeria in a paper titled the autopsy knowledge, attitude and perceptions of doctors and relatives of the deceased, showed that doctors have difficulty obtaining consent from patients and relatives for clinical autopsy.¹³ They also alluded the decline rates as due to delay in obtaining autopsy reports from pathologists.¹³

Rafindadi A. H in Zaria, Northern Nigeria in his work on a study of medicolegal deaths in Zaria Nigeria observed a decline in autopsy rates but medicolegal autopsies performed were more than clinical autopsies.⁸ The continuous need for clinical autopsies in spite of the advent of sophisticated diagnostic machines cannot be over emphasized. The public and indeed the health practitioners should be enlightened on this as it is a deep sea full of “diagnostic surprises”. The art of obtaining consent by medical practitioners should be improved upon. Religious and cultural divides with their grey areas should be reduced and government laws should be made to improve autopsy rates.

CONCLUSION

Though autopsy (medicolegal and clinical) rates generally have declined, rate of clinical autopsy is most affected as it is almost non-existent. The populace, medical practitioners and government should be enlightened on its merits. It should be promoted more in undergraduate medical training so as to encourage specialization in the field of pathology.

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