

Evaluating the Opinion of the Pathologist in Coroners' Autopsies

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ABSTRACT

Introduction: The practice of forensic medicine essentially integrates medical knowledge, autopsy pathology and the principles of medical law to address the concerns of the law courts with regard to the medicolegal investigation of deaths in coroner's cases. The coroner's autopsy is a derivative of legal practice, and the pathologist should defer to meet the needs of the requesting legal authorities.

Materials and Methods: The study was a retrospective review of the medicolegal reports of cases seen in the jurisdiction of Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife over a period of 11 years. The reports were analysed for the vital components of the coroners' autopsy cases that ultimately determine the opinion which is the summary and conclusion of the cases. Such components include the proximate, intermediate and immediate causes of death, circumstances of death and pathophysiological mechanisms resulting in death. The appropriateness of the opinion of death with regard to the manner of death was also assessed based on the medicolegal certainty.

Results: In all, 102 cases were analysed, within the age range of 5–85 years, including 75 males and 27 females giving a male-to-female ratio of 2.8:1. There were 10 cases (9.8%) classifiable as deaths from natural diseases, 49 cases (48%) from accidents, including 48 cases of road traffic accident and one from aircraft crash, 30 cases (29.4%) of homicides, 1 (0.98%) case of suicide 1 (0.98%) case of electrocution and 11 (10.8%) cases of misadventure and indeterminate categories.

Conclusions: The role of the forensic pathology is crucial in guiding the law courts in determining the outcome of medicolegal cases. The pathologist is therefore obligated to exercise due diligence at all the stages of the autopsy to answer the relevant questions that will enable the court to give appropriate verdict, devoid of miscarriage of justice.

Key words: Autopsies, coroner, court, medicolegal reports, opinion

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INTRODUCTION

The autopsy is a time-honoured exercise that has influenced many areas of human endeavours, including justice administration and medical care in terms of audit of standard of care among others.¹ Medicolegal autopsies are legally related medical services, prompted by law. The autopsy opinion should reveal the cause, circumstances and class of death to legal authorities.²

The impetus for this research work is to elucidate on the potential risk of the pathologist misleading the law courts and the need to call for caution among pathologists, being expert witnesses on coroner's cases. This paper addresses medicolegal autopsies in terms of legal relevance.

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MATERIALS AND METHODS

This is a review of the reports of cases seen at coroners' autopsies in Obafemi Awolowo University Teaching Hospital and jurisdiction of the practice of its anatomical pathologists from 2007 to 2017 (11 years).

The reports were analysed to ascertain the following:

- Cause of death and circumstances leading to death
- Pathophysiological mechanisms resulting in death
- The proximate, intermediate and immediate causes of death weighed against the manner of death
- The opinions of the cause of death weighed against the circumstance of deaths and manner of deaths as fair conclusion and good conclusion
- The completeness of the opinion of the cause of death

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- vi. The probability of the opinion being absolutely true was compared to the class of death by assessing the documentation. This was assessed Scores 1 and 2 for fair and good conclusions, respectively. Opinions given by pathologist not fitting into these were not considered.

However, some cases were not included due to missing relevant information.

Ethical Clearance

Ethical approval for this study (Ethical Committee ERC/2020/08/13) was provided by the OAUTHC Ethics and Research Committee.

RESULTS

The study involved the analysis of the issues related to death in coroners' cases that culminated in forensic opinions on the cases. In all, 102 cases were analysed, within the age range of 5–85 years. Seventy-five males and 27 females were seen in the study, thus giving a male-to-female ratio of 2.8:1. There were 10 cases (9.8%) classifiable as deaths from natural diseases, 49 cases (48%) from accidents including 48 cases of road traffic accident and one from aircraft crash, 30 cases (29.4%) of homicides, 1 (0.98%) case of suicide 1 (0.98%) case of electrocution and 11 (10.8%) cases of misadventure and indeterminate categories in terms of the manner of death. Of the cases, 43 and 32 cases showed fair and good conclusions, respectively, with regard to the manner of death.

Table I shows the number of cases of the immediate cause of death, precipitating events and mechanisms of death. Table II shows the conclusion/opinion compared to the causes of death. Table III shows an appraisal of the appropriateness of the conclusion versus the manner of death.

The identification of the deceased was based on positive identification by visual means by individuals who knew the deceased such as the relatives. The commentary in the reports showed a deficiency of the features that define the dynamics guiding medicolegal reporting such as addressing the concerns of the requesting legal authorities, resolving

lesional conflicts and differential diagnoses and stating categorically the criteria for arriving at the opinion, which ultimately culminates in the opinions and conclusions given by the pathologist.

DISCUSSION

The aim of this study is to evaluate the veracity of the opinion given by pathologists on the cause of death in various classes and manners of death on autopsies conducted by the pathologist by reviewing the archived reports, potentially to be acted upon by the law courts in the administration of justice. There were studies by Eze *et al.* and Mandong *et al.*, which have similar variables as our study; however, like many other studies, the aforementioned authors did not scrutinise the opinions and conclusions given by the pathologists on the cause of death and classes of death. This deficiency in knowledge is a great impetus for our study.

Our study showed a male-to-female ratio of 2.8:1, and thus, males were more involved in the fatalities. This is most probably due to the adventurous nature of males generally which places males at the risk of dangers. Eze and Akang found that 3.1% of their cases were homicides and males accounted for 90.1% of the cases.³ Our age range involves virtually all age groups of 5–85 years, from the young to the elderly, and this is similar to that of other studies such as Eze and Akang and Mandong *et al.* with an overall age range of 4–83 and 2–74 years, respectively.^{3,4} In our series, haemorrhagic shock was the mechanism of death in 22.5% of cases, while Eze *et al.* found the mechanism of death to be haemorrhagic shock in 59.9% of their cases, severe raised intracranial pressure in 38.2%, septicemic shock in 1.3% and asphyxia in 0.7%. In our series, gunshot was the most common form of homicidal deaths which is similar to the series of Eze *et al.*, where gunshot injuries accounted for 64.5% of the cases, sharp objects 21.1% and blunt force causing fatal injuries in 14.5%. Blunt force only accounted for 7.8% of our cases. Deaths from road traffic accidents accounted for the majority of our medicolegal cases as seen also in the study by Eze and Akang and Mandong *et al.*^{3,4} This was followed by homicides and deaths from natural diseases. Deaths due to other causes such as poisoning

Table I: Main cases highlighting the immediate cause of death, precipitating events and mechanisms of death

Immediate cause of death	Circumstances/events leading to death	Mechanisms	Number of cases
Haemorrhagic shock	Road traffic accident	Severe irreversible haemodynamic changes and multiorgan failure	8
	Stab injuries	Severe irreversible haemodynamic changes and multiorgan failure	1
	Gunshot	Severe irreversible haemodynamic changes and multiorgan failure	14
Cardiogenic shock	Electrocution	Severe irreversible haemodynamic problems and multiorgan failure	1
Severe head injury	Road traffic accident	Raised intracranial pressure	19
Multiple severe injuries	Road traffic accident	Multiple organ dysfunction	21
Variable	Natural disease	Variable	10
Respiratory failure	Poison	Pulmonary oedema/multiple organ failure	3

Table II: How the conclusion/opinion defined the causes of death

Manner of death	Initiating disease/event	Intermediate cause	Immediate cause of death
Natural disease	17	12	12
Accident	19	46	45
Homicide	8	18	15
Suicide	0	1	1
Undetermined	1	0	1

Table III: Assessment of the appropriateness of the conclusion versus the manner of death

Manner of death	Conclusion versus autopsy depicted manner of death	
	Fair conclusion (1)	Good conclusion (2)
Natural disease	5	7
Accident	25	18
Homicide	12	7
Suicide	1	0

and electrocution were uncommon.

It is pertinent to state that some of the cases were sudden unexpected deaths and deaths in suspicious circumstances that turned out to be deaths due to natural causes after post-mortem evaluation by an autopsy pathologist. Many of the opinions given as the cause of death by the pathologist were not sufficient to cause death on their own according to the classifications of sudden natural deaths.⁵ Many of the cases analysed suffered from severe deficiency of proper and adequate documentation and hence paucity of facts. It was obvious that not many concerns that necessitated the autopsy requests were attended to, perhaps because the personnel involved did not understand what the stakes were or they glossed over crucial stages of the autopsy, thereby missing crucial medical evidence of critical legal importance, resulting in the overall compromise of the quality of the autopsy exercise, especially in coroner's autopsies, the documentation, issuing of the reports and eventual presentation for court proceedings.⁶⁻⁸ This may be due to lack of and/or adequate professional cum specialist training, commensurate experience and case exposure on the part of the pathologist, incomplete dissection and examination and dangerous presumptions about the case.^{9,10} Such lapse in professional consult is unbecoming and shows crass incompetence that may warrant reprimand from professional regulatory authorities.^{11,12} Such discipline was met to the pathologist who gave medical evidence in *Clark EWCA Crim 1020*.¹³ Conclusions devoid of verifiable objective scientific evidence could only have been by intuition, which is dangerous for the justice administration system.¹⁴ Such opinions are weak, speculative, palpably unreliable and are most likely to be discountenanced and potentially inadmissible by the court.^{9,10} Non-disclosure of the findings to relevant parties in the court renders a case critically

weak on the part of the proponent of such position.¹⁵⁻¹⁷ The poor documentation and records-keeping witnessed in this study series has implications for the verdicts of the courts in medicolegal cases. Poor conclusions in coroners' autopsies may be a fall out of the deficiency of the fundamentals of forensic medicine and medical law training in the undergraduate curriculum of medical schools, over-confidence on the part of pathologists who unfortunately may have to work in isolation due to the dearth of pathologists globally as well as poor national coordination of medicolegal investigations into deaths in suspicious circumstances.¹⁸⁻²⁰ The opinion given by the autopsy pathologist in any coroner's case ought to be beyond medical jargons, considering the fact that not all cases of expressed causes of death are known to out-rightly cause death on their own without progression to complications or in the absence of dramatic untoward pathophysiological events.^{12,21,22} The coroner's autopsy is a medicolegal exercise or primary legal service requiring medical expertise to assist in the administration of justice.¹⁵ It is therefore incumbent, not optional on the autopsy pathologist to evaluate the case in all entirety.²³⁻²⁶ In our study series, not all solitary opinions of intracranial haemorrhages given solely as the cause of death would most certainly on the scale of legal probabilities and not just on flimsy chances of hypothetical possibilities would lead to the death of the patients. However, expressions of raised intracranial pressure if seen could justify the acceptance of intracranial haemorrhage as the cause of death. Many of the cases of intracranial haemorrhages would also succumb in the presence of other accompanying injuries to the head, such as accompanying craniocerebral injuries and other parts of the body. In deaths due to natural disease, mentioning the complications especially when severe as resulting in death could then justify the reasons for death. Not all the conclusions showed a legal-proof certainty to be the cause of death even on a prima facie assessment. It is not the responsibility of the pathologist in his/her conclusions and opinions to use words that are solely at the behest of a court of competent jurisdiction such as "criminal abortion, homicide, murder or rape;" otherwise, he/she would be deemed to be biased and this would weaken his/her evidence. There is no doubt that the role of the autopsy pathologist is very crucial to deriving maximum benefits from the death investigation system in any society. The opinion and conclusions drawn by the autopsy pathologist in any case can be evaluated on its ability to stand legal scrutiny at various stages of the proceedings in the court in a criminal case, namely pre-cognition, examination-in-chief, cross-examination and re-examination.¹⁰ Thus, the pathologist has to balance and integrate the medical and legal aspects of the investigative process and diligently arrive at a conclusion that obviates undue influences and errors of judgment. The coroner's autopsy is undoubtedly a medical service at the behest of the law court, and thus, the pathologist owes a duty to diligently conduct this service in reverence and deference to the court. The pathologist can therefore not attend to this coroner's assignment as his/her private duty or routine clinical autopsy but rather as a service on behalf of an overriding

authority to which an appropriate report must be given.⁹ The opinions of the autopsy pathologist arising from the conduct of autopsy plays a significant role in deciding the cause, circumstances and manner of death by the court based on the evidence of the medical expert. The pathologist owes the court and legal authorities the responsibility of being explicit in the documentations and addressing the peculiar concerns with regard to the case at hand.^{9,10,27} The conclusion of the autopsy pathologist is therefore a product of cumulative due diligence in terms of exercising his experience, thorough scrutiny and observation of lesions, association of the lesions with the most probable circumstances and interpreting in the overall circumstances of the deceased within the scope of the knowledge of pathophysiological mechanisms.²⁸ The conclusion of the pathologist should not be a conundrum but rather a brief summary of wholesome documentation that states the pathophysiological derangement that immediately resulted in death, the preceding anatomical structural alteration and the initiating circumstances.²⁹ Incomplete opinions devoid of the integration of medicolegal facts could severely compromise the medical evidences on technical grounds as it fails to meet the needs of the court. The reason is that the court assumes its expert witnesses are sufficiently qualified by training, experienced to exercise their expertise and diligently resolve grey areas with respect to their fields.¹² Thus, it is highly imperative that the opinion of the pathologist should be clear, unambiguous, unassuming and logical within the confines of discernible science and art.³⁰

CONCLUSIONS

The coroner's autopsy is undoubtedly a medical service at the behest of the law court and thus the pathologist owes a duty to diligently conduct this service in reverence and deference to the court. The role of the autopsy pathologist is vital to deriving maximum benefits from the death investigation system in any society. The opinion and conclusions drawn by the autopsy pathologist in any case can be evaluated on its ability to stand legal scrutiny. Thus, the pathologist has to balance and integrate the medical and legal aspects of the investigative process and diligently arrive at a conclusion that obviates undue influences and errors of judgment. However, as sacred as this medicolegal assignment of investigating death is, the pathologist should not hesitate to state his inability to resolve dilemmas or seek for more history or visit the scene of crime if such is indicated for better interpretation of its findings and most appropriate conclusions. This way he would avoid misleading the court and avoid the attendant complications of miscarriage of justice.

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Conflicts of interest

There are no conflicts of interest.

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