

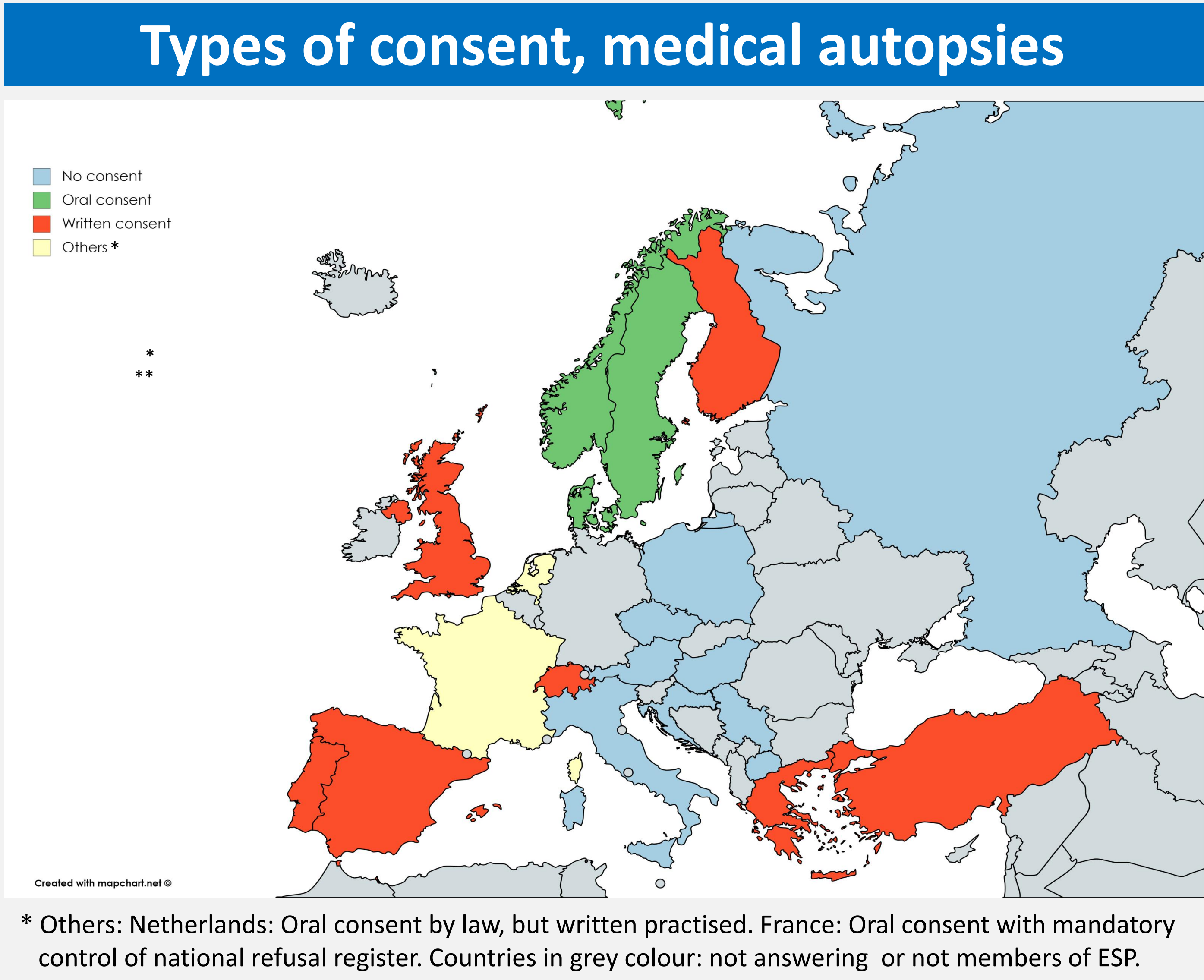
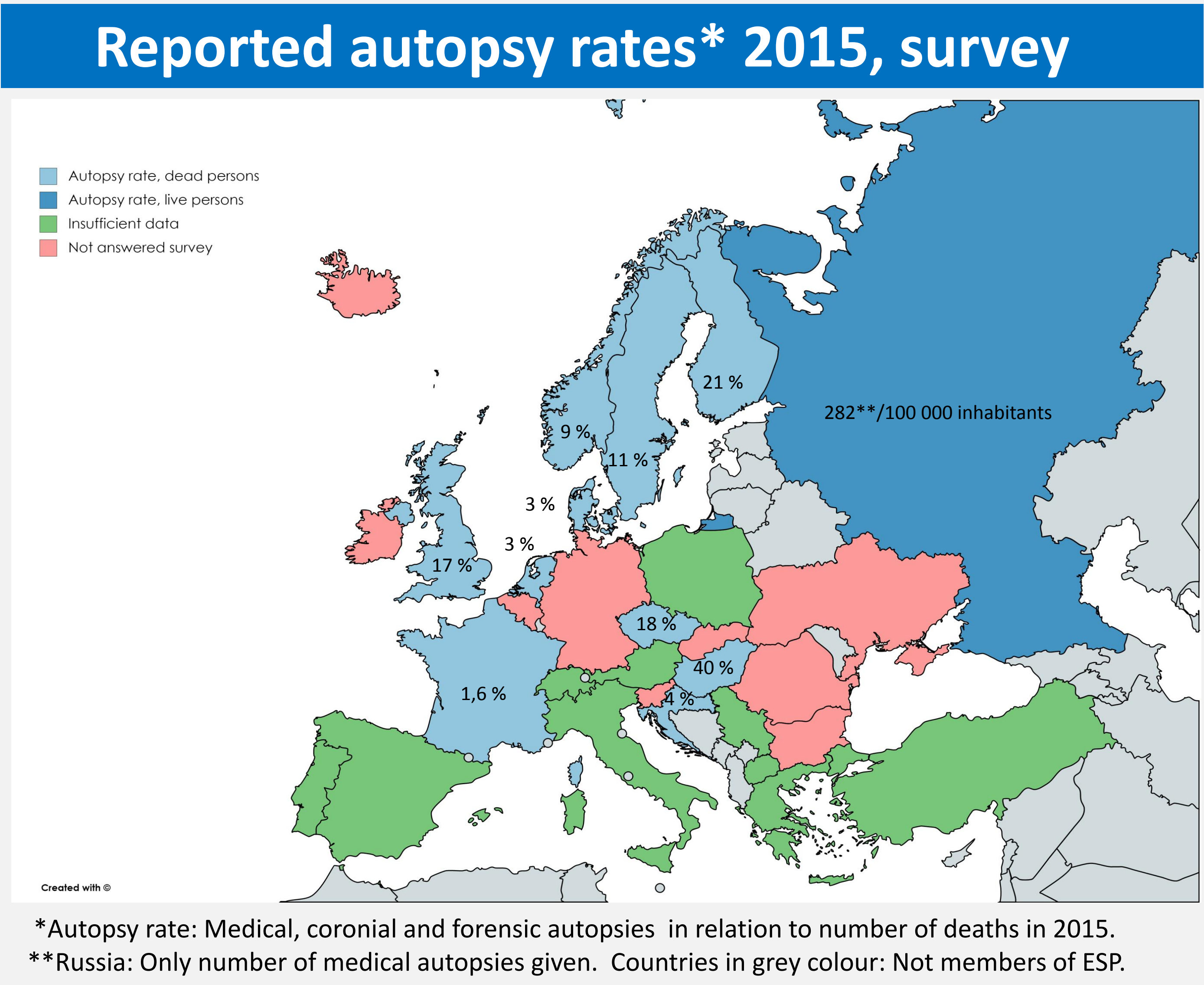
Autopsies in Europe

A survey from the European Society of Pathology (ESP)

G. Cecilie Alfsen^{1,2}, C. Marques Pontinha³

¹Akershus university hospital, ²University of Oslo, Norway, ³Central Lisbon Hospital Center, Portugal.

The post-mortem examination is promoted as important for quality assurance of medical diagnostics and treatment, for education of medical personnel and to promote good quality public health statistics. While these claims of significance remain, there is a general trend of decreasing autopsy rates, especially in Europe. To obtain an overview over the situation, the ESP working group of Autopsy Pathology conducted a survey among affiliated national member societies about the autopsy practise and its role in specialist education.



Results:

- 21 out of 30 affiliated societies responded to the survey.
- 11 out of 21 respondents were able to specify the actual number of forensic and medical autopsies in their country. Lack of reliable statistics on medical autopsy activity reflects the situation in public European statistics (WHO¹)
- Performing a medical autopsy requires no consent from the diseased or next of kin in 9 countries (this includes all but two in the former eastern Europe). Only 3 countries practice oral consent, all Scandinavian. The high autopsy rate in some countries with written consent can be explained due to high ratios of forensic and coroner procedures to medical autopsies (Finland 3 times and UK 135 times as many).
- Medical autopsies are financed mainly through taxes in all but one country. Additional financing through insurance or private payment is practised in 7 countries.
- The number of medical autopsies required for specialization in pathology varies considerably. The majority (75%) have no minimum or a reduced mandatory number (below 200).
- Forensic pathology is a separate specialty in 17/21 countries, 5 of which have no mandatory practice in anatomical pathology.

Education in Autopsy Pathology					
Country	Number of autopsies required for specialization	Forensic cases may be included?	Fetal/pediatric cases may be included?	Enough autopsies for education: At own institution/ national level?	Forensic pathology : mandatory pathology practise?
Austria	200	no	yes	Yes/yes	No
Croatia	150	yes	20 mandatory	Yes/yes	-
Czech rep	200	yes	yes	Yes/no	No
Denmark	25	no	no	Yes/yes	Yes, 18 mo
Finland	no set number	yes	yes	No/yes	No
France	no set number	-	-	Yes/no	Yes, 6 mo
Greece	no set number	yes	yes	Yes/yes	Yes,12 mo
Hungary	480	no	50 mandatory	Yes/yes	Yes, 12 mo
Italy	50	no	yes	Yes/no	No***
Macedonia	300	20 mandatory	50+50 mandatory	Yes/yes	Yes, 6 mo
Norway	120*	yes	yes	Yes/no	No***
Netherlands	no set number	no	yes	Yes/yes	No***
Poland	50	yes	yes	Yes/yes	-
Portugal	no set number	no	yes	No/no	Yes, 2 mo
Russia	no set number	-	-	Yes/yes	No
Serbia	150	no	yes	Yes/yes	No
Spain	60	no	yes	Yes/no	-
Sweden	200	yes	yes	Yes/no	Yes, 12 mo
Switzerland	100	yes	20 mandatory	Yes/yes	Yes, 12 mo
United Kingdom	40**	yes	2 mandatory	No/yes	Yes, 66 mo
Turkey	-	-	-	-	-

*From 2019, number is reduced from 200 because of lack of autopsies . **Autopsy pathology introduced as subspecialty, requiring 100 additional cases. ***Not a separate specialty; -, not answered, mo; months.

Discussion: Only half of ESP respondents were able to report reliable numbers on national autopsy incidence, a fact in keeping with the poor status of the WHO-reported statistics (see below). Low autopsy rates may prove critical for the surveillance of quality of medical diagnosis and treatments. The reasons for the decline are likely multifactorial. Falling rates are, however, a strong signal that clinicians no longer find the post mortem examination useful in their daily practise, and may be interpreted as proof for the public trust in the abilities of modern medicine. Thus, attempts for revival of the medical autopsy must address both the actuality of the method within the concept of modern medicine and its utility for the public and for health authorities. Low demands for medical autopsy knowledge inevitably leads to a reduction of the quality of the autopsy itself, and thus a further downwards spiralling of number of requests. The introduction of medical autopsy pathology as a subspecialty, as suggested by van den Tweel JG in 2008² and established in the UK, may improve quality and reputation of the method, but also has implications as for instance centralisation. The low rates of autopsies in Europe necessitates a discussion of the future role of medical autopsy in medicine.

¹ State of public autopsy rates according to WHO statistics on ESP-members, 2015: European Health Information Gateway. https://gateway.euro.who.int/en/indicators/hfa_545-6410-autopsy-rate-for-all-deaths/visualizations/#id=19640

No autopsy rates reported: Belgium, France, Germany, Greece, Italy, Poland, Spain

No updated autopsy rates (last year recorded): Ireland (2002), Netherlands (2008), Portugal (2005), Russia (2201), UK (1989)

²van den Tweel, J. G. (2008). Autopsy pathology should become a recognised subspecialty. Virchows Archiv, 452, 585-587