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Fewer autopsies spell medical bad times

NEW YORK (AP) — Dr. Cyril Wecht fondly recalls the old days, when interns were instructed to "get autopsies," even if they had to resort to measures that "were not very ethical at all."

You know," they might tell a survivor, "we need to perform an autopsy on your beloved mother because maybe there is a communicable disease here, and everybody in your family could die next week." Wecht, the former Allegheny County co-

roner, acknowledges that these gambits were questionable. But it was all done for "the ac-quisition and compilation of medical informa-tion for the advancement of medical science, and for the improvement and the enhancement of medical care.

RATES DROPS DRASTICALLY

A generation ago, autopsies were the rule. But now they have become the exception — where the autopsy rate for people dying in hospitals was 60 percent 20 years ago, it now stands at 13 percent, says Dr. George Lundberg, a pathologist and editor of The Journal of the American Medical Association.

the American Medical Association.

Money is not the reason, Lundberg insists:
"There is money built into the system to pay
for autopsies, (but) many hospital administrators think that as the patients are already
dead, they should use the money for living
patients."

Few politicies

Few politicians press for more autopsies, says Dr. William G. Eckert, editor of the American Journal of Forensic Science, for fear of being accused of spending "too much money on dead nearly."

dead people."
"They have a philosophy that dead people do not vote," he said.
And others are openly hostile to autopsies. Some funeral directors fear that "the autopsy would interfere with the cosmetics of the embalming," says Dr. Mark Taff, medical examiner of Nassau County in New York.

Taff cause these forces are groundless. "hos

Taff says these fears are groundless, "be-cause we use surgical incisions, that cannot be seen, about the head, and on the chest and armpits. The body is sewn after the autopsy is completed. ... In fact, some funeral directors



that I worked with think that they could do a better job on an autopsied body."

Orthodox Jews also object to autopsies. But when coroners consult with rabbis, and "exwhen coroners consuit with rabbis, and ex-plain the reason for doing an autopsy, and that the autopsy will exactly follow the kosher laws, and that no blood would be lost, and the organs and that no blood would be lost, and the organs would be returned to the corpse at the completion of the autopsy, they usually do agree to it. Specially if there is a public health issue involved, or the person is a murder victim or something like that."

But some coroners say the main opponents of autopsies are physicians, who maintain that the procedure is a waste of time and money—that modern technology has drastically reduced the chances that a patient will die without a doctor knowing the cause of death.

"We know that is not true," says Lundberg.

"Autopsies continue to reveal consistently differences between what is found after death and what was believed to be there."

FLIP A COIN

Says San Francisco medical examiner Boyd Stephens: "If an autopsy is not done, even in a patient who has been in a hospital setting but is not dying of a progressively terminal disease, then the chances of making the right diagnosis is not better than throwing a coin in the air and guessing if it is heads or tails."

Why do physicians oppose autopsies?

Why do physicians oppose autopsies?
"Doctors are truly paranoid on the malpractice business in America. They do not want anything written in stone," says Wecht.
Even "the hospital pathologists would give any kind of excuses not to perform an autopsy. If a person asks for an autopsy, a pathologist would say, "Well, let see, you say they are eight kids in your family? Do you have the signatures of the eight kids? Well, what about the one who lives in Burbank, Calif.? I really can not go ahead with only the signatures of the seven kids. I need the eighth one too."
But Dr. T. John Seward, a pathologist and a member of the board of trustees of the American Medical Association, disagrees. "In my experience, and I have been a coroner now for 17

perience, and I have been a coroner now for 17 years, the physicians at least I deal with can

years, the physicians at least 1 deat with can truly see the value of an autopsy." Seward says he has heard "physicians all over the country comment about liability problems, but I had not heard specifically that autopsies were one of the reasons for the in-

crease of malpractice or liability problems."

More likely reasons for the decrease in autopsies, he said, include the low reimbursement rate paid by Medicare.

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Whatever the reasons, the immediate consequence of this situation is a decrease in the quality of health care, says Lundberg.

"The pathologist in a hospital, a nursing home or a legal setting has traditionally served as a quality control for the practice of medicine." he says. "And one of the ways in which this role has been traditionally played is to the autorey which has as a single purpose. by the autopsy which has, as a single purpose, the finding and telling of the truth."