# 3. Results of study

# Overview of sample population

This section provides a brief overview of the sample population including:

- Age and sex;
- · Category of death;
- · Overall quality of the autopsy reports;
- Description of the mortuaries for which organisational data were available.

#### Age and sex

The sample comprised 58% (979/1,691) males and 42% (712/1,691) females with a median age of 74 years. The minimum age was three days and the maximum age was 101 years. Figure 2 shows a distribution of the age of the sample in 10 year bands.

500 450 -400 -350 -300 -200 -150 -100 -50 -200 -150 -100 -50 -400 -100 -50 -100 -50 -100 -

Figure 2: Age of sample in 10 year bands

# **Category of death**

The varying categories of death in this sample population are presented in Table 1. This categorisation represents the advisors' view as to the type of death for each case, rather than the complete cause of death as noted on the autopsy report.

Age (years)

Table 1: Category of death (advisors' view)			
	n=	%	
Natural cause of death in community*	929	55	
Natural cause of death in hospital	351	21	
Intentional self harm (suicide)	50	3	
Other	55	3	
Unascertained	44	3	
Associated with a road traffic collision	41	2	
Associated with medical intervention	20	1	
Alcohol related cause of death	23	1	
Natural cause of death (location not stated)	38	2	
Industrial related cause of death	31	2	
Associated with illicit drug overdose/poisoning	16	1	
Mishap in hospital (e.g. fall)	2	0.5	
Associated with fire	5	0.5	
Associated with immersion	4	0.5	
Sudden infant death syndrome (SIDS)	4	0.5	
Multiple causes of death (including epilepsy)	78	4	
TOTAL	1691	100.0	

<sup>\*</sup> Community refers to any place that is not a hospital, i.e. this category would include deaths in nursing / residential care homes etc.

As expected, by far the largest single group (55%) was that of natural deaths in the community. This was followed by natural deaths in hospital (21%).

### Overall quality of the autopsy reports

For each case, the advisors were asked to assess the overall quality of the autopsy report using a five point scale: excellent, good, satisfactory, poor or unacceptable. In marking the overall quality of the autopsy report, the advisors could consult their Advisor Manual and were asked to bear in mind the RCPath Guidelines on Autopsy Practice<sup>2</sup>.

Just over half of the reports 52% (873/1,691) were considered satisfactory by the advisors (Figure 3), 19% (315/1,691) were good and 4% (67/1,691) were excellent. Over a quarter were marked as poor or unacceptable. Proportionately, there were more reports rated as being 'unacceptable' for those cases being performed in a local authority mortuary (21/214 for local authority mortuary cases versus 42/1,477 for hospital mortuary cases).

Throughout the report, the overall quality of the autopsy report has been correlated with a number of different features noted in the autopsy reports and the organisational questionnaires.

1000 900 800 Number of cases 700 600 500 400 300 200 100 0 Excellent Good Satisfactory Poor Unacceptable Rating

Figure 3: Overall quality of autopsy reports

### **Mortuary types**

The majority of autopsies 87% (1,477/1,691) were performed in a hospital or combined mortuary. The remaining 13% (214/1,691) were performed in a local authority (public) mortuary.

From the organisational questionnaire 92% (177/192) of mortuaries were said to be based within hospital premises (one mortuary location was not specified). Respondents were then asked to indicate on the questionnaire whether the mortuary was a: 1) hospital mortuary; 2) local authority public mortuary; or 3) combined hospital and public mortuary. A combined mortuary would be defined as a mortuary run and funded by both a hospital and a local authority, and receiving cases through both the hospital and local authority. In many instances mortuaries were defined as more than one type and so for the purpose of further analysis these data were recoded (Figure 4). Therefore any subsequent analysis using mortuary type used the recoded data; hospital and combined mortuaries have been grouped together, (175/191) and analysed against local authority mortuaries (16/191). Two mortuaries did not answer this question (Table 2).

Table 2: Mortuary type - organisational data (answers may be multiple) and recoded data			
	Organisational questionnaire data	Recoded data	
Hospital mortuary	171 (92%)	43 (23%)	
Local authority mortuary	41 (23%)	16 (8%)	
Combined mortuary	131 (69%)	132 (69%)	
TOTAL		191	
Not answered		2	