

The intervention was successful, but the patient died! Some mildly provocative forensic observations concerning iatrogenic fatalities

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Iatrogenic injury attributable to the adverse effects of medical and surgical intervention, including invasive therapeutic and diagnostic procedures, may result in serious morbidity or death. The ensuing gamut of perioperative and non-perioperative complications may cause or contribute to the death of patients, whose demise may then be the subject of statutory medico-legal investigations and subsequent civil proceedings.

A comprehensive forensic evaluation of an iatrogenic death may well extend beyond the conduct of a complete autopsy, supplemented by the relevant ancillary investigations, to the undertaking of a protracted process of clinico-pathological correlation. In principle, not all fatal adverse medical events are necessarily iatrogenic in nature. Even when an iatrogenic injury is demonstrable at autopsy, the attending pathologist should weigh the implications of such a finding against the underlying natural disease processes that prevailed at the time to death, so as to determine its actual significance in relation to the causation of death, which may be due to a combination of iatrogenic and natural causes.

The pathological and medico-legal complexities associated with such deaths may have been further complicated by the therapeutic imperative afforded by current medical technology and clinical expertise. This appears to have facilitated the aggressive treatment of gravely ill patients, not infrequently at the extremes of life, who suffer from extensive and serious comorbidity. As these (often 'heroic') interventions are obviously associated with heightened risks of iatrogenic injury and lethality, they beg the question of whether the pursuit of such a management policy is truly in the best interests of the patients concerned. Accordingly, while it is not given to a forensic pathologist to opine on matters pertaining to standards of care, it is entirely proper for him to draw attention to any cause for concern which may be revealed by his post-mortem examination.

As the information obtained from these, admittedly tedious and onerous, autopsies serves to inform medical audit and enhance patient safety, the entire process may be regarded as an extension of the traditional roles of forensic pathology in serving the administration of justice and promoting public safety in general. Indeed, it is amazing how adverse events arising from the well-intended ministrations of clinicians could contribute substantially to the continuing professional development of forensic pathologists, for which the latter should truly be grateful.

Biography

Gilbert Lau is a Fellow of the Royal College of Pathologists (UK) and a Clinical Associate Professor with the Yong Loo Lin School of Medicine, National University of Singapore. He is a practising forensic pathologist and concurrently Director of Professional Practice at the Forensic Medicine Division, Health Sciences Authority, Singapore. A member of the editorial boards of the Forensic Science International and Forensic Science, Medicine and Pathology, he also reviews papers for the Journal of Forensic and Legal Medicine, Journal of Clinical Pathology, Annals of the Academy of Medicine, Singapore, and the Singapore Medical Journal. His academic interests and publications include iatrogenic deaths, pulmonary thromboembolism, maternal deaths and fatal falls from heights.

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