

## Leicester pioneers introduce new imaging autopsy service to the NHS

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Researchers from the University of Leicester and University Hospitals of Leicester NHS Trust have introduced an alternative method to diagnose the cause of death, which in many cases can replace the need for the traditional invasive autopsy. This can be purchased by the family and will be performed within the NHS hospitals.

The service will make minimally invasive post-mortem computed tomography (PMCT) scanning available as an alternative to traditional invasive autopsy to investigate unexplained deaths. This service is applicable to adults of all ages and is developed from research performed at the University of Leicester and supported by HM Coroners of Leicestershire. It is hoped that this approach will one day replace the need for autopsy in the majority of adult deaths investigated by HM Coroners.

The service has been developed following the publication of the visionary Department of Health document "Can Cross-Sectional Imaging as an Adjunct and/or Alternative to the Invasive Autopsy be implemented within the NHS? Report from the NHS Implementation Sub-Group of the Department of Health Post Mortem, Forensic and Disaster Imaging Group (PMFDI)", published in October 2012.

Professor Guy Rutty, from the University of Leicester is Chief Forensic Pathologist at the East Midlands Forensic Pathology Unit and Past Chair of the International Society of Forensic Radiology and Imaging. He has championed the use of PMCT since 2002, when he first introduced an



imaging research programme to Leicester for suspicious death and homicide investigations.

Professor Rutty, the pathology clinical lead for the new service, explains: "This is a significant day for the population of Leicestershire. It has taken us 13 years of research and service development to reach the point where we can confidently offer the population of Leicester an alternative to the invasive autopsy."

Professor Bruno Morgan, Professor of Cancer Imaging and Radiology at the University of Leicester, is the radiology clinical lead for the new service and has worked in equal partnership with Professor Rutty in researching and advancing the use of PMCT in autopsy practice. He said: "PMCT is changing how death is investigated across the world and it is now recognised that the traditional autopsy is not always necessary. After years of research and technical development we now have sufficient scientific evidence to introduce this service and deliver it from NHS hospitals."

The multidisciplinary team from the University of Leicester and Leicester's Hospitals includes forensic radiographers led by Claire Robinson, anatomical pathology technologists (APTs) led by Matt Rogers, NHS pathologists led by Dr Kevin West, radiologists, and an imaging trained anthropologist.

Professors Morgan and Rutty, who are recognised as international pioneers within this field, have developed novel training programs to facilitate the new service.

Professors Rutty and Morgan added: "We suspect if we were to look ten years into the future, this new technology will be available for all cases where an investigation of death is required in the UK. It will become the 'norm', and although PMCT will not, and cannot completely replace the



traditional autopsy, we believe today is the dawn of a new era of autopsy practice.

"We are indebted to Leicester Hospitals for the use of CT scan equipment out of clinical hours and to the many bereaved relatives who have given their consent for the research that has led to this scientific development. By demonstrating that this can be achieved within the NHS, using existing technology and locally employed UK licensed practitioners, we hope that others will benefit from our experience and follow our lead in developing similar services elsewhere in the UK."

## Provided by University of Leicester

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