

The autopsy in the medicine of the 21st century

To the editor

The advancement of medicine in the previous century and in what runs of our century has led to the perception, both of patients and many students and professionals, that the combination of clinical experience and new study methods grant a 100% diagnostic certainty.¹ Despite how tempting this option might seem, practice and literature guide us to think differently... to have a somewhat more critical view. In this context, the autopsy has been crucial to understanding the natural history of the disease and the efficacy of our treatment attempts, with a well-described pedagogical role, also demonstrating our mistakes and potential ways to improve.²

Röntgen's great contribution to the description of X-rays in December 1895 and its early diagnostic and therapeutic use has been fundamental in the development of medical sciences, but we cannot forget that they are methods, sometimes operator dependent (in example echography) and subject to interpretation; specifying in most cases the diagnostic confirmation given by the pathologist's vision either postmortem or in the study of surgical pieces in the biopsy, which confirms the "Gold Standard" character of the technique.¹⁻³ Perhaps some of the readers have not lived the experience of being certain by physical examination, laboratory, and images of diagnosis; to take the surprise of a different pathological entity after observing the result of the biopsy. Why should this same phenomenon not happen with the autopsy?

As Giovanni Battista Morgagni himself said: "doctors who have done or seen many autopsies have learned, at least, to distrust their diagnosis; others who have not confronted these findings (often discouraging) live in the cloud of vain illusion".⁴⁻⁵ Despite these reasons, we cannot hide the fact that the number of autopsies in the world decreases every year. In 1940, 50% of deaths in Chile underwent an autopsy, and in 1997 only 10%, a situation that results in a decrease in academic material for undergraduate and graduate students, including pathologists themselves.^{3,4} Autopsy represents a great knowledge tool in medicine. Namely, much of the elements of judgment that we enjoy today, come from the works of tireless men of science who sought in the silence of a corpse the keys to the survival of many other human beings.

Just remember the classic work of Rembrandt "Anatomy Lesson of Doctor Tulp", to glimpse the importance that already in the seventeenth century (and even before) was given as a teaching method, clinical-pathological integration, and autopsy research.

The negative social vision that the autopsy has acquired has been detrimental to the eventual benefits of the technique. In addition to directly affecting the education of health professionals, knowledge of certain pathologies, improvement of the quality and safety of some treatments, epidemiological evidence and diagnostic testing. Publications talk about the "renewal of the value of autopsy" and the "confrontation of new technologies."

In our opinion, the first problem calls us to act quickly: educate and raise awareness of the importance of autopsy, both for the medical work and knowledge of the disease and for the relatives of the deceased.^{1,2} It is important that clinicians and pathologists reawaken

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interest in the study of the disease in the autopsy room, reviving and enthusiastically implementing this method of knowledge, including the enormous long-term benefits for humanity. As for the emergence of new technologies, we can only applaud the continued development of medicine and thank the important contribution that other sciences give us to achieve a more precise and appropriate practice, complementing each of the methods we have at our disposal in order to give the best management of the disease and reach the greatest knowledge of it, both for the patients that we can save and for those who are responsible for accompanying us at the end of their lives.

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Conflicts of interest

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