Teaching in the autopsy room; experiences from Poland

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Teaching… but whom?

- students,
- residents,
  - pathology residents,
  - non pathology residents,
- clinicians,
- … but also ourselves.
9 Medical Universities

3 Universities with *Collegium Medicum*

6 Universities with Medical Faculties

About 400 specialists…

Half of them over 55y.o.
Out of **12 Universities** with standard Pathology Courses

3 – **stopped** teaching in autopsy room – students do not attend a SINGLE AUTOPSY

3 – have **less than 3 autopsies** per year (for students)

4 – have between 3 and 5 autopsies per year

**ONLY 2 (!!!)** have sufficient number of autopsies to let EVERY **student group** to attend 5 and more autopsies.
**Teaching residents**

**Pathology residents** – the number of autopsies is going down – on average ca by 50%

Consequently inviting non-pathology residents meets the same problem, or rather obstacle in training course.

**NOTHING** to show to both groups.
Clinicians

Our own survey among pathologists concerning the assistance of clinicians during autopsies showed

- Clinicians are **ALWAYS** present in … 5% of answers from respondents (19% - often, 76% - rarely);

- ICU doctors come in 1 out of 4 cases; the rest (operating/ non-operating) is equally divided;

- The clinicians are present during whole autopsy only in **25% of cases**, while **almost half** stays only until the cause of death is established (surgeons are in lead);

- in almost 20% of cases the clinicians are **not interested at all** (do not come, do not even call for the preliminary report);
Pathologists

Our survey among pathologists also showed

- about 10% of pathologists find autopsies unimportant part of the residency (!), though more than a half considers them as important and relevant part of their work (?!);

- 75% of respondents think that a resident should perform at least 50 (?) autopsies during residency … (250 was the number when I was a resident);

- All pathologists notice well-known tendency of decline in the number of the autopsies (perinatology is the anly area where it still is around 50%);

- but honestly, how many pathologists really want to perform the autopsy?  
  (half of the respondents would gladly give it to someone else)
What can we teach...

What should we teach...

And when...

We face the vicious circle:

- Decline in numbers of autopsies
  - Students do not attend autopsies
  - Students cannot see the purpose of the autopsy
  - Doctors (clinicians) do not administer the autopsy
  - Doctors (clinicians and pathologists) cannot see the purpose of the autopsy
What shall we do?

First – **bring back the importance of autopsy** in addition to

1 - training course of students and residents, by showing **TANGIBLE pathologies**, not **DIGITAL** ones,

2 - presenting to supervising authorities the assessments of medical procedure performance, course of treatment, functioning of medical units.

3 – in consequence to above - quality assurances, aspects of accuracy of ante-mortem diagnosis,

4 - and quite a few more…

“Let conversation cease. Let laughter flee. This is the place where death delights to help the living.”