

THE QUEEN'S UNIVERSITY OF BELFAST
NORTHERN IRELAND OFFICE

REPORT OF AUTOPSY

Name: GRO-A Sex: Male Age: 5 mths. F.No: GRO-A
Date of Death: GRO-A 1991. LDM
Date and Hour of Autopsy: GRO-A 1991. 9.00 a.m.
Place of Autopsy: The Belfast City Mortuary.
CAUSE OF DEATH:

I (a) INTERSTITIAL PNEUMONIA

On the instructions of H.M. Coroner for Greater Belfast, Mr. J. H. S. Elliott, BCL, LLB, BA, I, Derek J. L. Carson, TD, MD, registered medical practitioner, Deputy State Pathologist for Northern Ireland, Lecturer in Forensic Medicine at the Queen's University of Belfast and Consultant in Pathology to the Northern Ireland Health and Social Services Boards, made a postmortem examination of the body of -

GRO-A
aged 5 mths.

identified to me at the Belfast City Mortuary, on Saturday, 23rd February, 1991, by Constable J. A. Carson, R.U.C. Antrim Road.

History:

This was the fifth child in the family and he was born in hospital on GRO-A 1990. He lived with his parents.

He had had respiratory problems at birth and had suffered from pneumonia thereafter. However this condition had cleared up and he had been

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well since. During the week prior to his death he had had a cold and had been seen and treated by his doctor.

His mother was visiting relatives in Scotland and left her sister in charge of the child whilst her husband was out at work, on GRO-A 1991. The sister went out at one stage leaving her GRO-A brother in charge. He heard the child cry and rocked him to sleep in his carrycot. When the sister returned at 12.40 p.m. she found the child apparently dead. Attempts at resuscitation were made and an ambulance was called. The child was taken to the Mater Hospital and confirmed dead at 1.05 p.m.

External Examination:

The body of a male child of good nutrition, weighing 8.03 kilograms, 26 inches in crown-heel length and with a head circumference of 17 inches. Rigor mortis was present. Hypostasis of purple colour stained the back of the body.

Scalp: It was covered with a moderate growth of gingery-brown hair. The anterior fontanelle was just patent and slightly depressed.

Eyes and Conjunctivae: Normal.

Ears and Nose: Normal.

Neck: Normal.

Chest: There was a needle mark over the centre front and another reddish mark, probably due to attempts at resuscitation.

Upper Limbs: There were needle marks at each elbow.

Lower Limbs: There were needle marks on the right shin and at the right foot, probably caused by attempted resuscitation.

Scrotum: Testes present.

The signs of resuscitation apart, there were no other marks of violence.

Internal Examination:

HEAD:

Brain: Congested and somewhat swollen but otherwise normal and without evidence of haemorrhage, meningitis or other condition.

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Mouth: There was a little reddening around it and on the right cheek, probably due to attempts at resuscitation. The lips were purple-blue in colour. There were no teeth.

Tongue, Pharynx: Normal.

NECK AND CHEST:

Hyoid Bone and Laryngeal Cartilages: Intact.

Thyroid Gland: Normal.

Pericardial Sac: Normal.

Heart: Of normal size. There was no congenital abnormality or disease. A few petechial haemorrhages were seen scattered over its surface. The left ventricle was 6 mm. thick; the right 3 mm. thick. Both were normal on section. The coronary arteries, valves and great vessels were all normal.

Aorta: Normal.

Pleural Cavities: Normal.

Thymus Gland: Of normal size and appearance for this age.

Larynx: Normal.

Trachea and Main Bronchi: Their mucosa was congested and bore a film of mucus.

Lungs: Filled about two-thirds of the pleural cavities. They had a blotchy purplish mottling. A few petechial haemorrhages were seen over their surfaces. There were not sectioned prior to fixation.

Oesophagus: Normal.

ABDOMEN:

Abdominal Cavity: Normal.

Stomach: Somewhat distended by gas, probably due to attempts at resuscitation. It contained some curdled milky material.

Intestines: Externally appeared normal.

Duodenum, Appendix, Rectum: Normal.

Liver, Gall Bladder, Spleen: Normal.

Pancreas, Adrenal Glands: Normal.

Kidneys: Normal.

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Bladder: Normal. Empty.

Prostate: Normal.

MICROSCOPY:

Heart: Normal.

Lungs: Six representative sections were examined. In some fields the appearances were fairly normal but in others there were segments of partial collapse and here in particular there was an increase in cellularity of the interstitial tissues in an around the small bronchi and in the alveolar septa. The cells were of mixed type, including large and small mononuclears and some neutrophils. Some of the small air passages also contained inhaled foreign material, presumably stomach contents.

Larynx, Trachea: There was a moderate mixed cellular reaction in the submucosa.

Liver: Normal.

Spleen, Thymus Gland: Normal.

Kidneys: Congested but otherwise normal.

Adrenal Glands, Bowel, Brain: Normal.

REPORT OF BACTERIOLOGY LABORATORY:

Culture of a tracheal swab taken at autopsy revealed only coliform and yeasts.

REPORT OF BIOCHEMISTRY LABORATORY:

Analysis of a sample of blood taken at autopsy revealed a urea concentration of 4.6 mmol./l.

COMMENTARY

The history indicates that this child had had respiratory problems followed by pneumonia after birth. However these problems had resolved and he was said to have been well apart from suffering a cold in the week prior to death. He was eventually found dead in his carry cot, having been heard crying earlier.

Autopsy showed that the child was of good nutrition, weighing 17.5 pounds and measuring 26 inches in length. The findings were those commonly seen in cases of 'cot death'. This condition is not yet fully

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understood but may represent an unusually violent reaction in a child of this age group to what in other children or at other ages would be regarded as minor infection only. A preceding cold is not uncommon and the microscopical changes in the air passages and lungs were in keeping with mild infection, to which the term interstitial pneumonia may be applied.

The signs of attempted resuscitation apart, there were no marks of violence.

GRO-C: Derek Carson