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Public Death: A Basic Philosophical Concept of Forensic Pathology and Medicine

Following the establishment of the egalitarian democratizing political documents, such as Magna Carta, the Constitution of the United States, and the Declaration of Independence (which referred to a right to life), there has developed a rather basic division of human affairs and activities into those which are public and those which are private. Currently, this public-private interface of activity is under inspection, both in regards to the computer compilation of personal data, that is, a national death index [1], and in regards to the personal-private nature of police investigations [2]. These thoughts are directed toward the public-private hiatus present in the work of the medical examiner or coroner.

The *public* affairs of a citizen are those which are of significance and importance to his role in the social and governmental group to which he belongs. His *private* affairs are those of his own personal life and the welfare of his family. This basic philosophical dichotomy may be applied to the death of the human being. Then it is apparent that there is a corresponding division of death into those which are public and those which are private. This division of death into public and private areas has not undergone formal discussion recently [3], although the medical aspects of death are currently under reassessment and evaluation [4,5].

The public death is one which is of importance, by its nature, to the health and survival of the other members of the species in that social habitat. A private death is one which is attended by no particular significance to the health and safety of the other members of the species. The fact that all deaths are certified by a governmental authority under the agency of a physician demonstrates that initially and conceptually all deaths are public in nature. It also demonstrates that death is a medical problem first and foremost. The physician in attendance makes the decision as to the private-public nature of the death in accordance with his understanding of the law. When he is not in attendance, the death usually is considered a public death. In the instance of public death, the death is certified by another agent of the government termed a coroner or medical examiner. These activities are quasi-judicial in nature [6].

The division line between public and private deaths cannot be precise, nor can it be fixed in time. It will vary with changes in the culture. As the environmental and endogenous factors of disease become definable, newer definitions of the concept will evolve [7]. The increasing preciseness of human technology acts to continually change the definition of public death by discovery of these new factors of disease.

A class of deaths which may be considered as "semipublic" has been recognized.² This type of death bears the attribute of privacy as to the cause, manner, and mechanism of

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death but possesses the public feature of importance in progressive evolution in medical care technology, both in terms of appropriateness and manner. It is difficult, if not impossible, to carry out a review of medical treatment without establishing some level of competency, both at an institutional and professional level. Levels of competency are public in nature once they are formulated, since they affect medical treatment to the public as a whole. The application of these standards at the time of autopsy to an individual case would be a quasi-judicial function, in that there would be a review of the treatment and its efficacy. Other new situations which strain the dichotomy between public and private death can be recognized. Clinical investigations that promote the discovery of new disease concepts and facts, so as to educate the physician and to elevate medical care, may represent an important area in the interface between public and private death when the question of autopsy arises.

Under our present circumstances, a private death is one which occurs in a private home or institution under the attendance of a private physician who certifies the cause of death and the fact that there are no matters in the death of public concern. Parenthetically, all private deaths are natural but all natural deaths are not private. In certifying the death the physician is acting as an instrument of the government, and therefore the government bears an interest in the qualities, capabilities, education, and professional features of the certifying physician. This basic affiliation of the physician to the governmental unit is often overlooked or forgotten.

A public death, by most current laws, is one which falls into a categorical classification described by a statute. Public death, defined as a death of importance and significance to the public as a whole, is usually described in the statute law by its attributes of time (for example, sudden), place (for example, at work), condition (that is, following childbirth or during anesthesia), or manner (that is, homicide). These statutes generally are very broad, not specific, and allow a great leeway in interpretation by medicolegal authorities. Many systems of death certification functionally presume that all private deaths are natural in manner; this is an obvious error. In a functional context, private deaths are those which are certifiable by a private physician while public deaths are those which a private physician cannot consider within his area of practice to certify (for example, shootings). When faced with uncertain conditions, the private practitioner generally will request an opinion from his medical examiner or coroner. The lack of specificity in the statute law and the absence of much case-law precedent makes these consultations very subjective and general. Because of these imprecise mechanics, the review of physicians' decisions on the problems of public death is rare. This lack of review is a very prevalent weakness in most systems of death investigation.

But the rarity of review of such decisions does not mean that such reviews do not take place [8]. Reviews of private-physician-formulated death certificates do occur, generally in a nonpredictable fashion and with relative infrequency since they occur only when a dispute causes a formal review of the death. Such chronologically irregular review mechanisms are an effective and parsimonious method of bureaucratic management; they suffice in many instances to maintain some order within a system. Overall, the certification of death is an unaccounted and unaudited governmental action.

The situation is further complicated by the fact that in most circumstances the government alone has the capability to perform public death investigations. While private death investigations are theoretically available, in practice few private death investigations are carried out. When made, they are expensive and difficult. Private commercial firms involved in a payoff related to the nature of human death, that is, insurance companies, have computed human death information into their actuarial systems so that death investigations are neither financially necessary nor advantageous to them. Expensive as it

may be, the government must maintain the capability to perform death investigations because of the universal requirement that homicide be punished only after a judicial hearing. This basic requirement for the production of evidence sustains the government interest in death investigation. The consequences of this close affiliation of the death investigation mechanism to homicide investigation are that the larger concept of death investigation for potentially beneficial nonhomicidal situations in the society are usually ignored [3,9]. Apparently, the benefits of these nonhomicidal investigations have not been demonstrated to be of sufficient social value. The scientific benefits are without doubt. However, no one has claimed that there is a constitutional right to an autopsy.

The careful and detailed study of such death phenomena as suicide, infant crib death, and anesthetic and industrial deaths can only be carried out by governmental agencies whose theory and philosophy of death investigation extends past this "homicidal" barrier. Recognition of a wider governmental role in death investigation, the government's duty to protect the right to life, and the government's exclusive franchise in the provision of death investigation is necessary for the further development of this concept of death in the society. Presently the situation is chaotic [10]. Some states and counties have mandatory and complete investigation of deaths in various circumstances while other adjacent states and counties do not carry out such activities [3]. The scientific capability of meaningful research and fact-finding in nonhomicidal deaths is available [11] and should be made to serve mankind on a much broader basis than is presently done. When the objectives of medicolegal death investigation authorities are widened by the concept of public death, a new era will arrive. The narrow, criminalistic state statutes which inhibit broader, more environmental, and more public-health-oriented regulations will be replaced. More specific wording than "disease constituting a threat to the public health," as in the Florida statute (F.S.A. 406.11) [3] will prevent misunderstandings.

There is no reason for requiring such nonspecific terminology to define the case in question when computer data techniques allow for recall of single items from thousands of categories. The specific cases which fall into the control of the medical examiner or coroner can be selected by a computer without human intervention, providing the cases are reported into a standardized program using standardized techniques. At both ends of our existing system of case definition, a beneficial change can be made. We can state our broadest objectives as the proper investigation and certification of public deaths and, specifically, we can use case data with computers to distinguish a bona fide medical examiner's or coroner's case.

If the concept of public death is acceptable as a worthwhile tool in analysis, it follows that there may be a similar argument made for the concept of a public pathologist. A public pathologist may be thought of as a pathologist whose work is with those problems which arise from the interest of the public at large, based on the concept of the "public good" and "public health." While many pathologists act as public pathologists, their actions are generally not in an authoritative setting. The specifics of this area of public work are now undergoing initial evaluation and are part of the dichotomy between the concepts of the coroner system and those of the medical examiner system. Certainly the office of public pathologist does not exist in the United States today. The idea itself extends the role of the medical examiner or coroner further into the entire social context of 20th-century culture. It involves the extension of pathology into the problems of environmental pollution, industrial waste problems, drug toxicity, therapeutic misadventures, and agricultural problems such as food additives [12].

As an example of the extension, and as an example of the need for a public pathologist, a recent set of crises in Michigan in the period 1970-1971 may be cited. Coho salmon were introduced into Lake Michigan. They grew abundantly and developed to

sizes beyond expectations. Soon a large resort fishing industry grew up about these exciting game fish. But toxicological analysis from a survey demonstrated high levels of DDT in the fish and this fishing industry was immediately curtailed.

At the same time, the sporting fish of the eastern side of Michigan in the Lake St. Clair area were discovered to have elevated levels of mercury. Environmental pollution from a Canadian paper mill was considered as the most probable source of the mercury. The analyses of mercury in the fish created a chaotic jumble of various scientific reports. Here, too, fishing was curtailed and even stopped by governmental order.

In both instances, the fisheries and their employees were economically deprived. In both instances, the arguments for opening and closing the industry were based upon pathological analysis of toxicological measurements. In both instances, there was no central or authoritative expert to analyze and evaluate the data in terms of human health and disease. The need for a public pathologist was demonstrated.

If governments are going to involve themselves in every aspect of life on the basis of their interest in the public good, it would seem fitting that they recognize the role of pathology in the analysis of life problems. Pathology, in this regard, is analytical biology applied to general health problems of life, death, and health. Death investigations which utilize the autopsy represent the epitome of the use of science for the guidance of public affairs. The major negative force acting against this utilization is the inability of both the citizenry and the government to create changes which respond positively to the truths revealed by the autopsy. Most governments have very limited capabilities of response to hazardous environmental factors. Furthermore, the pathological features of many environmental factors are poorly understood from the scientific viewpoint. The quantitative relationship between death inquiry and the demonstration of environmental death is a direct one. These death inquiries must be conducted properly to prove environmental death and often require advanced technology. But the major problem seems to be the deficiencies which occur in translating the feedback of this information into positive social and biological action. These deficiencies limit the usefulness of the autopsy and stifle the entire reaction of "government involvement—death investigation—hazard recognition—environmental correction."

Or would public pathology become political pathology? Hopefully, the objectivity of any scientist could not be subverted by the political or social consequences of his or her findings. All life is political in a sense, but certainly the position of public pathologist would have to be protected from the influences of the marketplace. The care taken to protect the judiciary from such undue and inappropriate influences would have to be applied to the public pathologist.

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