# Minimally invasive autopsy (MIA): alternative for the conventional autopsy (CA)?

No registrations found.

| | |
|---|---|
| **Ethical review** | Not applicable |
| **Status** | Recruitment stopped |
| **Health condition type** | - |
| **Study type** | - |

## Summary

### ID

NL-OMON22613

**Source**
Nationaal Trial Register

**Health condition**

Post-mortem radiology. Whole-body MRI. Whole-boy CT. Whole-body imaging. CT-guided biopsy. MIA: diagnostic performance. Image-guided biopsy. Stereotactic brain biopsy. Conventional autopsy. Alternative autopsy.

### Sponsors and support

**Primary sponsor:** Erasmus university medical center
**Source(s) of monetary or material Support:** Erasmus university medical center
Stichting Coolsingel
KWF kankerbestrijding

### Intervention

### Outcome measures

**Primary outcome**

Agreement between MIA and CA for cause of death and sensitivity and specificity of major and overall findings

### Secondary outcome

- Comparing CA and MIA of the brain.

- Estimating the amount of information lost by MIA, compared to the CA and finding out if the expected increase of autopsies performed compensates for this loss.

- Comparing costs of the MIA versus CA.

## Study description

### Study objective

MIA is a good alternative for the CA, with comparable diagnostic performance. It will lead to an increase in clinical autopsy rates, which have significantly decreased over the last decades in both academic and non-academic medical centers.

### Study design

Not appicable

### Intervention

We performed MIA followed by CA the following day. Both the MIA investigators and CA pathologists who performed the autopsy received the same clinical information and were blinded to each other's findings.

## Contacts

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# Eligibility criteria

## Inclusion criteria

Deceased adult patients, written informed consent from next of kin, availability of imaging equipments and technologists

## Exclusion criteria

forensic causes of death, known or suspected “high-risk” infected cadavers (hepatitis C, human immunodeficiency virus, tuberculosis), open abdominal wounds and body size too large for imaging equipment.

# Study design

## Design

| | |
|---|---|
| Intervention model: | Other |
| Allocation: | Non controlled trial |
| Masking: | Double blinded (masking used) |
| Control: | N/A , unknown |

## Recruitment

NL

| | |
|---|---|
| Recruitment status: | Recruitment stopped |
| Start date (anticipated): | 20-01-2012 |
| Enrollment: | 100 |
| Type: | Actual |

# Ethics review

Not applicable

| | |
|---|---|
| Application type: | Not applicable |

# Study registrations

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

| Register | ID |
|---|---|
| NTR-new | NL4732 |
| NTR-old | NTR5072 |
| Other | : MEC-2011-055 |

# Study results