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

NTR

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

1 - Minimally invasive autopsy (MIA): alternative for the conventional autopsy (CA)? 4-05-2025

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

Public

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Scientific

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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