



## Psychiatry & Behavioral Sciences Section – 2011

### I15 Evolution of the Psychological Autopsy Over 50 Years: Los Angeles County Coroner Medical Examiner's Experience

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After attending this presentation, attendees will understand the history of the psychological autopsy method used by the Los Angeles County Coroner Medical Examiner's office over the past 50 years, and understand how legal challenges to the confidentiality of the psychological autopsy were handled.

This presentation will impact the forensic science community by encouraging the adoption of the psychological autopsy method in other Coroner Medical Examiner's offices in contested and equivocal suicide cases.

The nation's first known psychological autopsy, as an investigative tool, was first used in 1960 at the Department of Chief Medical Examiner-Coroner, in the County of Los Angeles. A historical review of the past 50 years of the psychological autopsy will be presented, which began as a collaboration between the then Chief Medical Examiner-Coroner, Dr. Theodore J. Curphey, and mental health professionals from the L.A. Suicide Prevention Center, including Drs. Litman, Schneidman, et al. A National Institute of Mental Health (NIMH) grant on suicide prevention provided funding for the project in order to find clues to suicide. The earliest psychological autopsies were performed on equivocal cases where accident or suicide could not be clearly

determined. Several equivocal suicide cases per year were selected and reviewed. Face-to-face as well as telephone interviews and record reviews were conducted. In 1960, the Office of the Chief Medical Examiner-Coroner did not have its own investigator program, and had to rely on police reports regarding the death scene and background information, which often were less than optimal and not reliable for the conclusion about the manner of death. Meetings were held twice a month to review cases and to better understand the causes and potential treatment for suicide. In 1962, following the high profile death of Marilyn Monroe, Dr. Curphey appointed a panel of psychological experts (dubbed by the newspapers as "The Suicide Panel"), in addition to a large number of staff, who performed face-to-face interviews of Monroe's relatives, friends, business associates, and treating psychiatrist. The people interviewed were promised confidentiality in order for them to speak openly on intimate matters—a key element in the investigation of death. From 1967-1982, when Dr. Noguchi became the Chief Medical Examiner-Coroner, he was able to pay a small fee per case to replace the NIMH funding for psychological autopsies, which had been streamlined using telephonic interviews. Dr. Noguchi fostered the use of the psychological autopsy by using mental health experts, as he utilized other consultants in difficult cases, to help resolve the manner of death. In the early 1970s, Dr. Noguchi named the meeting where equivocal cases were discussed as the Mode Conference to help the Chief Medical Examiner-Coroner resolve the manner of death. It has been the tradition of the LA County Chief Medical Examiner-Coroner's Office to continue to name it as the Mode Conference. Also, in the early 1970s, Dr. Noguchi approached Dr. Seymour Pollack, Director of the USC Institute of Psychiatry, Law and Behavioral Science, to be his consultant for a few years. In 1987, Dr. Kornblum, the Chief Medical Examiner-Coroner from 1982-1990, contracted with the USC Institute of Psychiatry, Law and Behavioral Science, under the directorship of Dr. Gross, to perform psychological autopsies in contested cases of suicide and equivocal (between suicide and accident) cases. Since 1987, in-depth interviews, both face-to-face and telephonic, of family, friends, business associates, and others, along with a review of documents (e.g., medical and mental health records) are conducted by a team of mental health experts (Drs. Botello, Weinberger and forensic psychiatry/psychology fellows). Since 1992, the current Chief Medical Examiner-Coroner,

Dr. Sathyavagiswaran, has continued to further develop the psychological autopsy process by encouraging the mental health experts to visit the scene of death as warranted. He has formalized the Mode Conference maintaining the confidentiality of the process with the Coroner's investigator presenting the details of the death scene, the deputy medical examiner reporting on the autopsy/examination finding, the toxicologist interpreting the toxicology screen results, and the mental health expert presenting, using a power-point format, the findings of the psychological autopsy. A discussion follows and the Chief Medical Examiner-Coroner uses the consensus of the attendees to assist in his final determination of the manner of death. Certain legal challenges to the confidentiality of the psychological autopsy report have lead to a formalized written contract outlining the nature of the process, the psychological risks involved, and the confidentiality of the report. It must be signed



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by the next-of-kin if the psychological autopsy is to be conducted. Both a paid for and department of coroner sponsored contract are available. **Psychological Autopsy, Coroner Medical Examiner, Suicide**