
E84 Managing COVID-19-Related Death in Ibadan: The Human Angle Narratives of a Forensic Pathologist

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Learning Overview: After attending this presentation, attendees will reflect more deeply on background factors that may have a considerable influence on procedures and outcomes when determining manner of death.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by highlighting that not all forensic-related issues are technical and sometimes the human angle story may be insightful.

The occasional outbreak of diseases in Africa, including the recent Ebola infection in parts of the region, is not something new. However, nothing prepared Africa for the COVID-19 pandemic. Regrettably, the initial local responses to the pandemic did not have any significant operational component for management of the dead following COVID-19. The approach to any resulting mortality was essentially reactive when the first suspected COVID-19 death occurred, thus laying bare the unpreparedness and attendant conundrum. Complicating the situation is the fear of the novel virus among health care workers, including medical doctors, which was clearly expressed and the manifestations were palpable. It significantly impacted the attitude and manner of response to patients presenting with any illnesses who may have had any symptoms that could be readily or remotely linked with COVID-19. Ironically, COVID-19 “suspected” status is direr than being a confirmed case. The “suspected” patients are often left in a dangerous gray zone, where, with limited Personal Protective Equipment (PPE) and restricted access to testing and available resources prioritized for the care of diagnosed cases, the outcome is not uncommonly deadly. Coupled with no facilities for safe autopsy and a lack of body-holding areas for either suspected or confirmed cases of COVID-19, determining the cause and manner of death and dealing with the anguish of families of the deceased persons present one of the toughest challenges. There are frequent complaints from family members of the deceased about the neglect of their loved ones at health facilities, and they often blame it for being responsible for the death of the patient. The whole cloud of uncertainty, mixed messages, including “facts” about COVID-19 that change over time and “myths” that evolve, and confusion about what to believe or disregard, complicate the picture. Some notion that the pandemic is either a hoax or some conspiracy is gaining ground, and this disposition confounds the efforts of an appropriate response, including managing bodies of the dead, where the cooperation of bereaved families is vital.

How does one objectively evaluate the impact that fear and attendant reluctance by health care workers to provide care to patients with COVID-19-like symptoms have on the death of such patients? How does one deal with a situation where, after a family had requested a copy of a COVID test result of their deceased loved one, tore it up, claiming it was all contrived and a false report? How do professionals begin to investigate the death when there is no appetite whatsoever by the relevant agencies to be involved in any form of contact for such a purpose, fearing their health and safety? How does one begin to engage the public and create awareness on issues about the management of COVID-19-related deaths and their implications when public officials and health managers do not want to reckon with COVID-19 mortality because it is “sensitive” and goes against official narratives about a “successful response”? How does one achieve dignified handling of bodies of the dead from COVID-19, including respect for their families and safe burial within a short time, considering peculiar circumstances? These conditions include limited resources and a socio-cultural milieu that place a high premium on specific final rite rituals, which are incompatible with infection prevention and control measures required for COVID-19. The practical reality and science of COVID-19-related deaths in this context are incomplete without human angle narratives.

Management of the Dead, COVID-19, Human Angle