

COVID Deaths—Challenges

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Our experiences at the mortuary during COVID 19 times.....

It's not just the health workers who treated and cared for the COVID 19 patients who were at the risk of being infected but also those who handled the dead bodies.

It was indeed a testing time, the disease had created a havoc in the western world before it reached our shores, the panic amongst the general public was palpable, and a bigger catastrophe was anticipated.

At MS Ramaiah Medical College and Research Institute, Bengaluru, series of meetings were held and steps were taken to be COVID 19 ready and planning was done well in advance to overcome any adversaries, from testing to isolation, from drawing standard operating procedures to safety measures etc. The disease was dynamic and we had to think on the move, it was indeed a challenge and a learning lesson.

Challenges were:

1. Knowledge about the infectivity through bodies/ body fluids - there was no information available with respect to transmission from dead bodies and its period of infectivity. **To overcome this dilemma, universal precautions as per Indian Council of Medical Research (ICMR) guidelines viz. use of Personal Protective Equipment (PPE) kits, disinfection with hypochlorite and body bags were adopted.**
2. Unclaimed/ unknown bodies, brought dead cases including unnatural deaths that were brought to the hospital posed a threat, they needed to be suspected as a probable carrier of the virus and the chance of infection during post mortem. **Hence testing was made mandatory for**

the safety of the body handlers and if the case were to be positive then the relatives and health authorities were informed.

3. Dearth of cold storage facility- Initially for the first few months, testing was through RT- PCR and the results used to take 2 days. Unknown bodies, brought dead cases and MLCs along with increasing number of deaths due to covid warranted a larger cold storage facility- (as embalming was not advised) so mobile freezer units were hired. Later, once the rapid testing was available, things eased. A recommendation was made to the Government to extend the cremation timings, which was implemented. Thereby the possibility of bodies getting decomposed and the anguish of the bereaved relatives over the unavoidable delay for final rites were to some extent eased. Thus, overcoming the adversity.
4. In Medico Legal cases (MLC) [unnatural deaths], we had to carry out an autopsy even if the deceased was Covid-19 positive. Two such cases of suicides (Covid-19 +ve) – a case of hanging and a case of self-inflicted sharp force injury were done and one case of road traffic accident, autopsy was performed.
5. To minimise the risk of infection to the autopsy surgeon and to the undertakers an SOP for minimal, case based novel autopsy technique was proposed jointly by few Heads of Department of Forensic Medicine and Toxicology to the Department of Health and Family welfare, Government of Karnataka which would fulfil the objective of medico legal autopsy. An order was issued by the Government to follow the Standard Operating Procedure (SOP). This was

- greatly appreciated and welcomed by all other stake holders throughout Karnataka.
6. The guidelines issued with respect to the disposal of bodies infected with Covid were changed regularly viz. from the protocol of handing over bodies to Bruhat Bengaluru MahanagarPalike (BBMP) earmarked ambulances to then handing over to the family members (with safety measures) and the method of deep burial to interring and to inter-state restrictions. In addition to this, only 4 family members were allowed to pay their last respects and their helplessness in not being allowed able to give a proper burial or follow rituals as per their religion or custom was difficult to swallow and this took a toll on the psyche of the near relatives. They were counselled and were educated about the risk of disease being transmitted. Other relatives were given an opportunity to pay their last respects to the deceased by procuring body bags with a transparent face hood.
 7. Cold storage facilities was provided free of cost.
 8. Integrated team work- Upon death of Covid patients admitted at our hospital, the issuing of cause of death certification as per ICMR guidelines was stressed upon. Uploading of the details to BBMP,

preservation and disposal was done in an integrated manner by a dedicated committee comprising of the doctors and nurses in the covid wards, Medico Social workers (MSWs), BBMP officials, Hospital administrators, mortuary attenders and Forensic Medicine staff & Post graduates. A COVID body disposal WhatsApp group was created for smooth functioning.

During these hard times we learnt life lessons, the mortuary worked 24 x 7 and I would like to place on record the contribution and dedication of all my departmental colleagues, post graduate students and most importantly the mortuary workers and ambulance drivers who rose to the occasion and carried out the work at hand efficiently. All in all during this ongoing pandemic more than 434 Covid deaths, and 687 MLC deaths have been handled till date. Our prayers to the departed souls.

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