

Trabalhos Científicos

Título: Major Discrepancy Between Clinical Diagnosis Of Death And Anatomopathological Findings In Adolescents With Chronic Diseases During 18-Years

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Resumo: The incidence and prevalence of pediatric chronic conditions have increased in most developed and developing countries over the last few years. Chronic conditions in adolescents may affect growth, puberty and the maturation of biological systems through chronic inflammation, glucocorticoid and sub-optimal nutrition, with higher morbidity and mortality rates. Systematized autopsy studies in pediatric populations have been carried out worldwide, usually including simultaneous assessments of previously healthy subjects, acute and chronic conditions. These reports also added populations in the age groups of neonates, children, adolescents and adults. To our knowledge, there is no study that evaluated autopsy findings in a particular population of adolescents with chronic diseases. Thus, the objective of the present study was to evaluate disagreement between clinical diagnosis of death and autopsy findings in adolescents with chronic diseases. Comparisons between demographic data, hospital admissions, supportive measures, and autopsy findings in adolescents with Goldman classes I/II versus classes III/IV/V were also performed. To evaluate disagreement between clinical diagnosis of death and autopsy findings in adolescents with chronic diseases. A cross-sectional study included a sample of adolescents' autopsies who died in a pediatric and adolescent tertiary hospital over 18 consecutive years. During this period, there were n=2912 deaths, and n=581/2912(20%) occurred in adolescents. Of these, n=85/581(15%) underwent autopsies and were analyzed. Further results were divided into two groups: Goldman classes I or II (high disagreement between main clinical diagnosis of death and anatomopathological findings, n=26) and Goldman classes III, IV or V (low or no disagreement between these two parameters, n=59). Median age at death [13.5(10-19) vs. 13(10-19) years, p=0.495] and disease duration [22(0-164) vs. 20(0-200) months, p=0.931], and frequencies for males (58% vs. 44%, p=0.247) were similar between class I/II versus class III/IV/V. The frequency of pneumonia (73% vs. 48%, p=0.029), pulmonary abscess (12% vs. 0%, p=0.026), as well as isolation of yeast (27% vs. 5%, p=0.008) and virus (15% vs. 2%, p=0.029) identified in the autopsy were significantly higher in adolescents with Goldman class I/II compared to those with Goldman class III/IV/V. In contrast, cerebral edema was significantly lower in adolescents of the first group (4% vs. 25%, p=0.018). This study showed that 30% of the adolescents with chronic diseases had major discrepancy between clinical diagnosis of death and autopsy findings, mainly caused by infections. Pneumonia, pulmonary abscess, as well as isolation of yeast and virus were identified at autopsy findings in the groups with major discrepancies.