Kematian Wajar Mendadak (Sudden Natural Death)

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Kematian

Caranya:

- Wajar
 - Penyakit
 - Usia tua
- Tidak Wajar
 - Pembunuhan
 - Bunuh diri
 - Kecelakaan

Prosesnya:

Mendadak

- Expected
- Unexpected

Tidak mendadak

Definisi kematian mendadak

Kematian yang terjadi dalam waktu 48 jam sejak timbulnya gejala (umumnya karena penyakit)

Penyakit penyebab SND

- Cardiovascular diseases :
 - Atheroschlerotic H.D.
 - Hypertensive H.D
 - Other type (Congenital, Valvular, Myocarditis, Cardiomyopathy)
- Other Vascular diseases :
 - Ruptured Cerebral Aneurysma
 - Pulmonary Thromboemboli
 - Ruptured Aortic Aneurysma
 - Acute Aortic dissection
- Respiratory
 - Infection (Elderly, infant, immunocompromissed, AIDS, Cancer, TBC)
- Central Nervus System
 - Tumor
 - Colloid cyst
 - Meningitis
 - Seizure
- Chronic Alkoholism
- Unditermined Natural Cases

Respirasi

- Perdarahan : tbc, kanker, bronkiektasis, abses
- Asfiksia: pneumonia, asma/ppok, spasme
- Pneumothoraks

Kardiovaskuler

- Infark miokard dini:
 - -perdarahan penampang otot jntung
 - -makroskopis:
 - >8jam: edem, kasar
 - >18jam:brownish purple
 - 24-48jam: kuning dg tepi hiperemi
 - -mikroskopis: >6jam: pmn eosinofil, otot memendek, sembab, membran sel kabur, sel intersisiel banyak

lanjutan

- Infark lama:
 - -makroskopis: fibrosis-scar
 - -mikroskopis: nekrosis, pmn basofil, disintegrasi inti sel
- Penyempitan a. koronaria-insufisiensi-infark miokard

Susunan Saraf Pusat

- Perdarahan: apopleksi, ruptur, neoplasma
- Sumbatan sirkulasi: trombosis, emboli, infeksi, malaria serebral

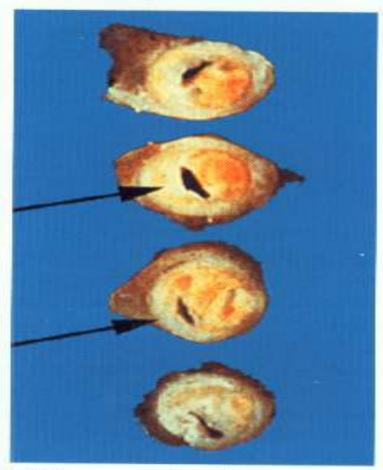


FIGURE 5.2 These cross-sections of coronary arteries are plugged with atherosclerotic disease (hardening of the arteries). The arrows point to the only openings (dark areas) in the vessels. The yellow material is the atherosclerosis.

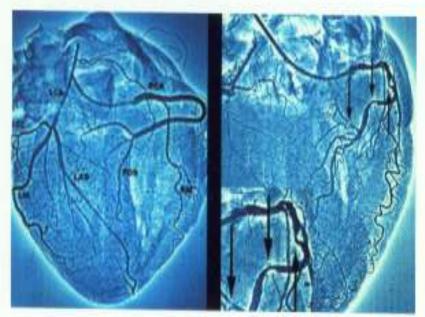


FIGURE 5.1 These are hearts that have been injected with dye postmortem. The heart on the left has normal undamaged coronary arteries. The heart on the right has narrowed blood vessels (arrows) due to atherosclerosis (hardening of the arteries).



FIGURE 5.3 The earliest noticeable signs of a heart attack is dark colored muscle (arrows). This discoloration reveals the heart attack to be hours old at the time of death.



FIGURE 5.4 This heart shows the yellow discoloration of a heart attack which is approximately a week old (arrows).

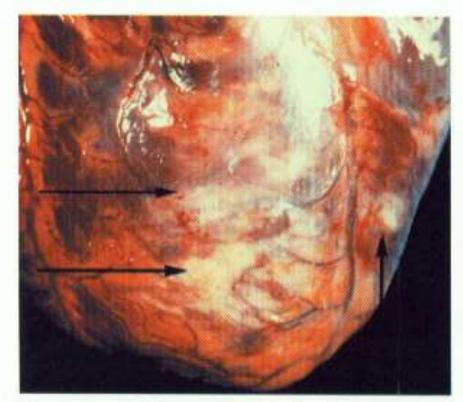


FIGURE 5.6 An old heart attack will appear as a white scar on the outside of the heart wall (arrows).

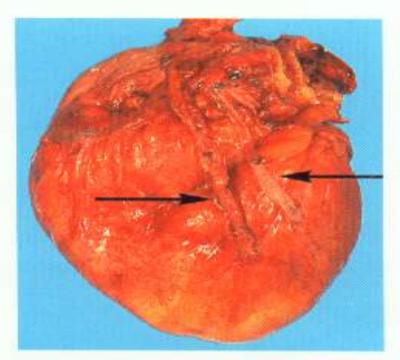


FIGURE 5.8 Coronary bypass. The arrows reveal the veins that have been used to jump across the plugged coronary arteries. The veins usually come from the legs.

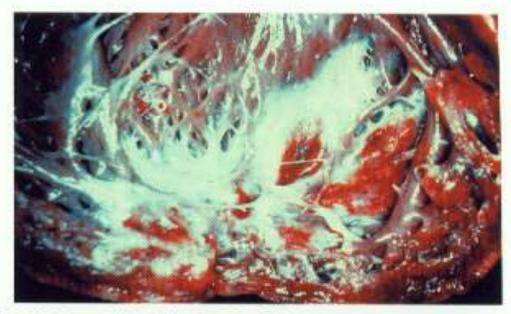


FIGURE 5.5 This is the inside of the left ventricular heart wall showing the white scarring from an old heart attack.

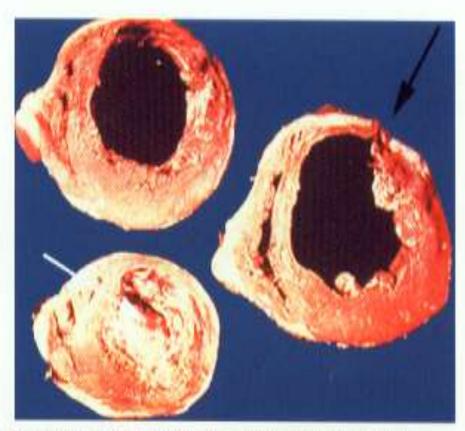


FIGURE 5.7 The complications of heart attacks include a rupture of the heart wall (black arrow) and the formation of a blood clot (white arrow).

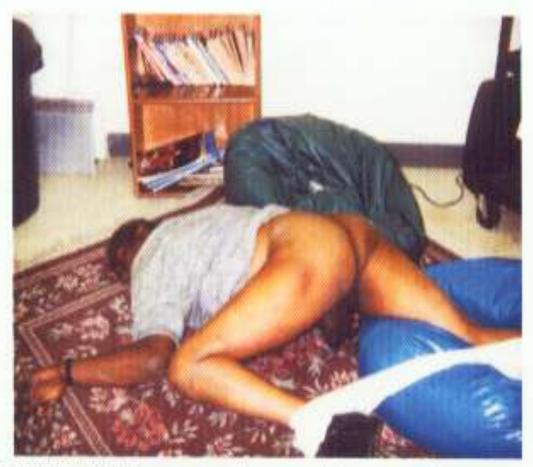


FIGURE 5.9 This man was discovered in a recreation center. His position suggests a sudden collapse and death. See next photo.

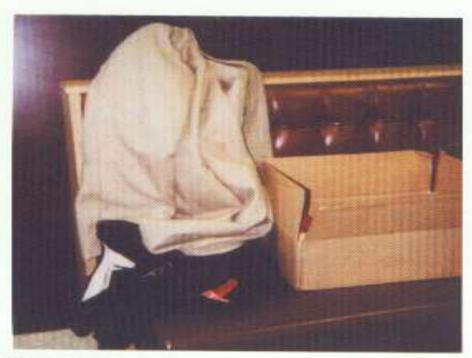


FIGURE 5.10 His clothes had been removed and neatly placed on the bench. See next photo.



FIGURE 5.11 He was wearing a condom. The woman he had been with later confessed he had collapsed suddenly prior to having sex. An autopsy revealed significant coronary artery disease and numerous old heart attacks.

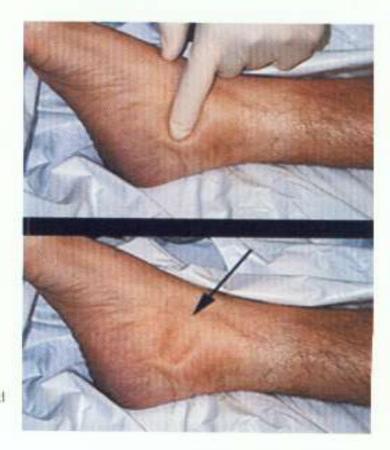


FIGURE 5.12 This obese man died suddenly. The arrow points to the dark and thickened skin of the lower legs, which is a sign of poor circulation and heart disease.

skin of the lower legs, which is a sign of poor



FIGURE 5.13 Swelling of the ankles is a sign of heart failure. See next photo.



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FIGURE 5.15 An enlarged heart is a sign of chronic heart failure. This heart (between the arrows) is more than twice the size of normal. See next photo.

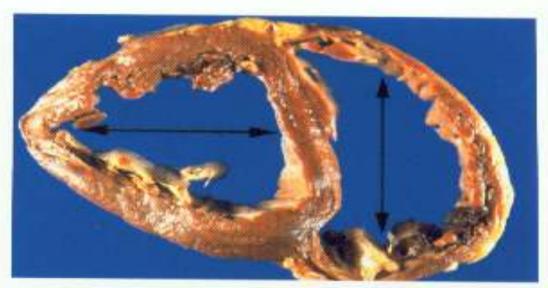


FIGURE 5.16 A cross-section of the heart in the previous photo would look like this. The chambers are dilated and the walls are thinner than normal.



FIGURE 5.33. An unlarged heart is a sign of choose baset failare. The heart thereeze the across is more than rouse the sain of strengt Societal photo.

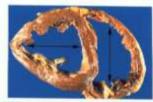


FIGURE 3.10: A count-section of the heart in the provious photo would look like this. The distribution are dilated and the scale are thinned than sorreal.



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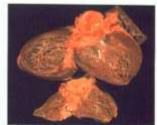


FIGURE 5.08. As entarged front from objects or high blood protects (kep) searchs rotes the use of second (bottom).



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FIGURE 5.18 An enlarged heart from obesity or high blood pressure (top) may be twice the size of normal (bottom).

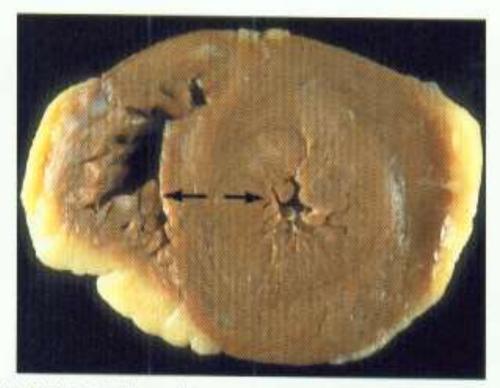


FIGURE 5.19 The wall (arrows) in this cross-section is very thick. This is a sign of hypertension (high blood pressure).

FIGURE 5.20 This is a normal aortic valve. See next photo.

16. Color Atlas of Foremic Pathology

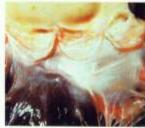


FIGURE 3.34 This is a control porty valve, for rest place



PSGURE 2.21 Tim seeks who has regulations of horizonal persons from possible channe, deng above. Compare with previous photo.



PRODUCE 5.22 Mornal remail tolor, for morphoto-



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FIGURE 5.24. The transference is studing through a source to support below to provide which to a congress of absorbed by which concerns within death.



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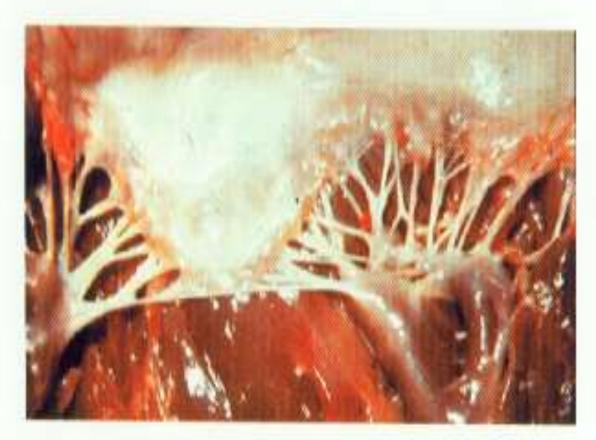


FIGURE 5.22 Normal mitral valve. See next photo.

16. Color Atlas of Foremic Pathology

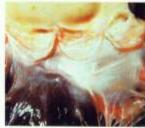


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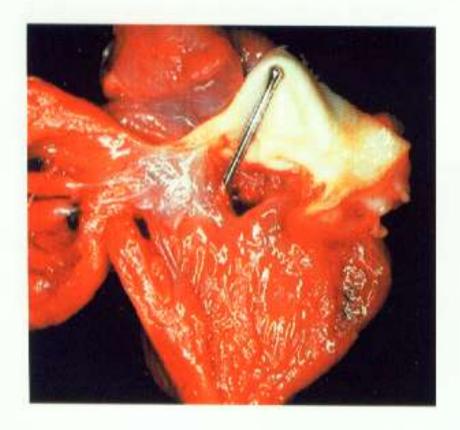


FIGURE 5.24 The metal probe is sticking through a ventricular septal defect (opening) which is a congenital abnormality which can cause sudden death.

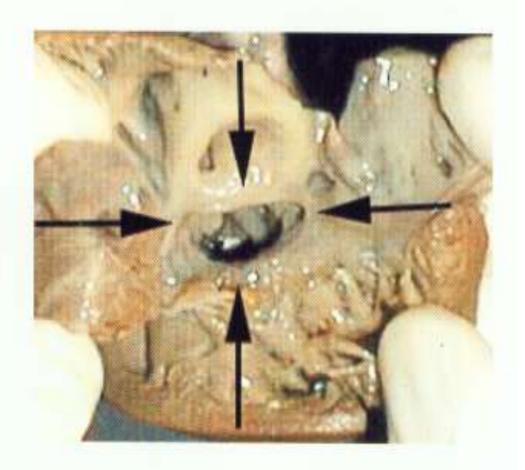


FIGURE 5.25 This is another septal defect in a three-weekold child who occasionally stopped breathing and would turn blue. The defect was not detected at birth or upon regular check-ups.

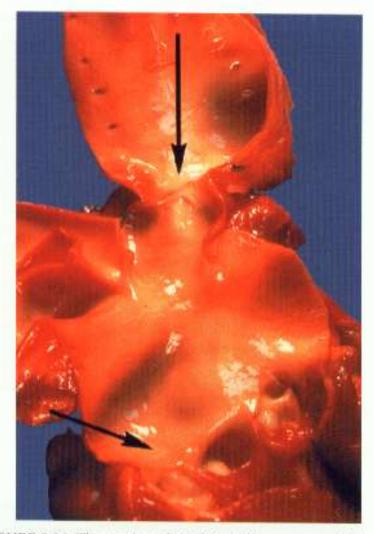


FIGURE 5.26 The aortic arch in this child was congenitally narrowed. The upper arrow shows the constriction. The lower arrow points to the aortic valve.

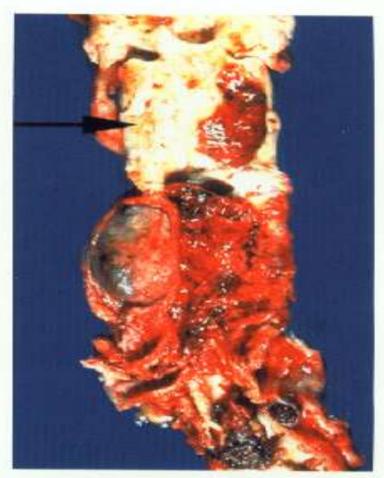


FIGURE 5.27 This is the lower part of the aorta which shows advanced atherosclerotic disease. A normal aorta should be thin and yellow (arrow). This aorta is thickened and has so much wall damage it is prone to rupture.

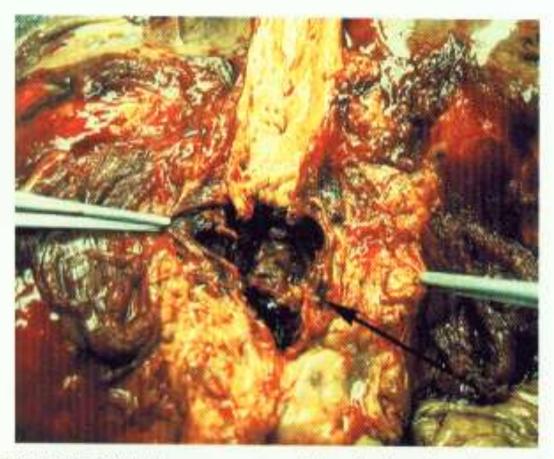


FIGURE 5.28 This aorta ruptured into the bowel and caused sudden death by bleeding. The initial body examination might show bleeding from the rectum



FIGURE 5.26. The aretic arch in the child sear consentable amoved. The appearance shows the construction. The lower army points in the serie, valve.



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HGURE 3.27. This is the lower part of the north which shows advanced afteroxiconic disease. A normal acrea decald be this and school arrive). This serie is discharged and has somuch sail damage it is prose to repose.



FIGURE 5.29 This lady's left leg is more swollen than the right. Blood clots in the legs will cause them to swell. A blood clot can break loose, travel through the heart, and plug up the blood vessels in the lungs. See next photo.

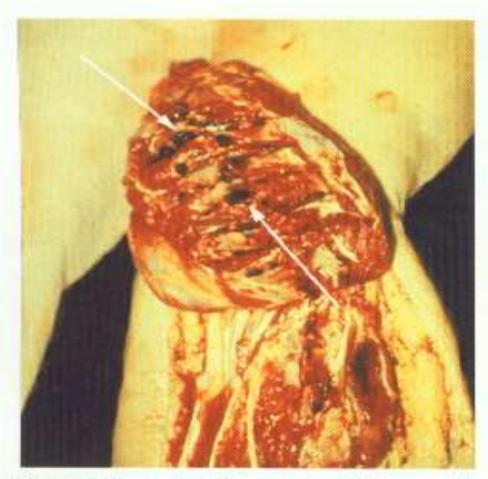


FIGURE 5.30 This swollen leg was opened to reveal the dark blood clots (thrombi) in the calf muscle vessels (arrows).



FIGURE 5.31 Pulmonary thromboemboli. Blood clots (arrow) have broken away from the legs and traveled up the body to lodge in the large blood vessels of the lungs. This caused chest pain and sudden death.



FIGURE 5.32 This lung has abundant black pigment (anthracosis) on its surface. The person with this lung either smoked or worked in a coal mine.

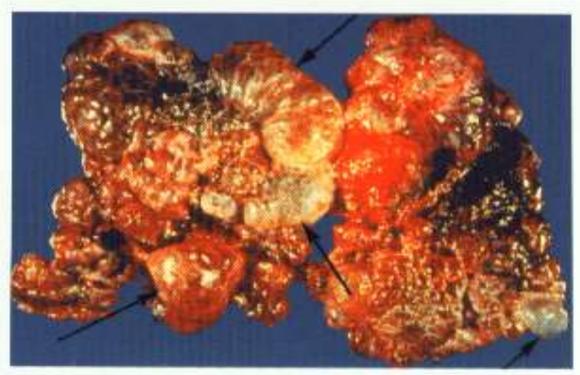


FIGURE 5.33 These lungs have dramatic emphysema with balloon-type expansions on their surfaces (arrows). This means the lung tissue has been destroyed (usually from smoking) and the person has difficulty getting oxygen into the lungs.

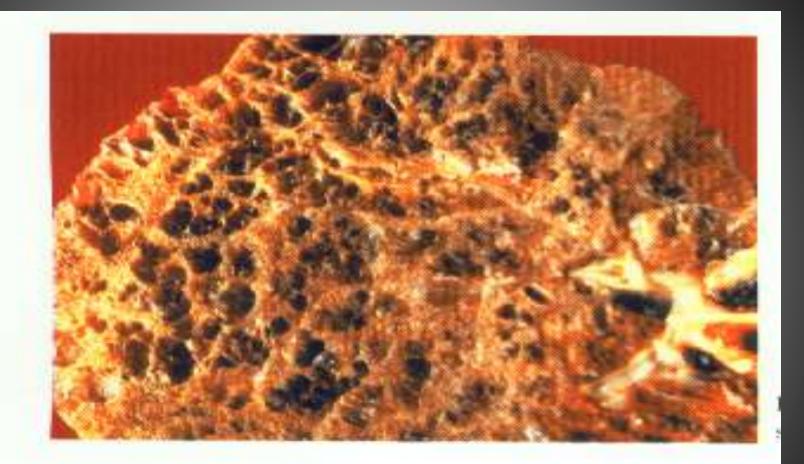


FIGURE 5.34 This lung has smaller holes than the previous case. This sponge-like appearance is also typical for advanced chronic emphysema.



FIGURE 5.35 Another presentation of emphysema showing the holes in the lungs caused by smoking. This change causes the right side of the heart to thicken which renders it prone to failure.



FIGURE 5.36 This lung has firm white areas (arrows) of pneumonia.

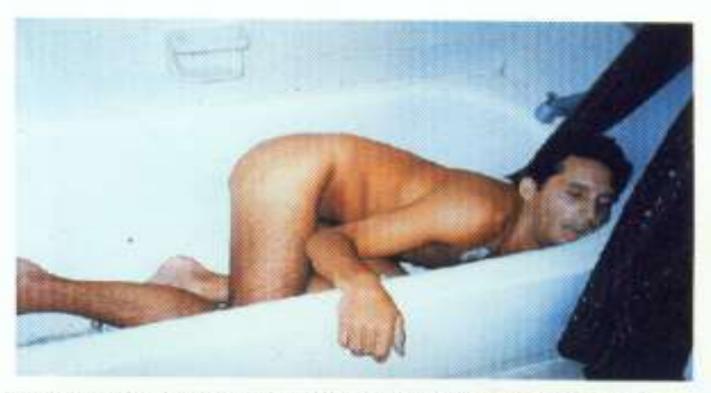


FIGURE 5.37 Sudden death in the bathtub. He ruptured a cerebral (brain) aneurysm.

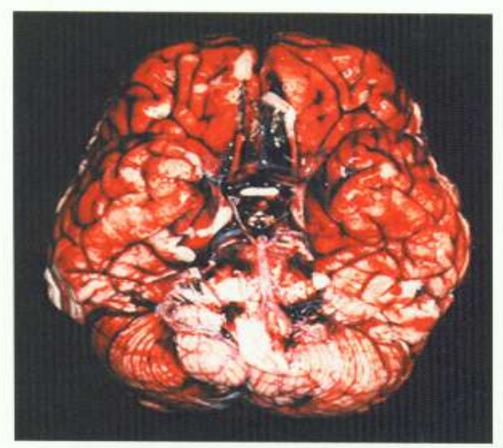


FIGURE 5.38 Ruptured cerebral aneurysm. A ballooned blood vessel ruptured over the bottom of this brain. This caused a marked hemorrhage (subarachnoid) over the base, sides, and top of the brain.

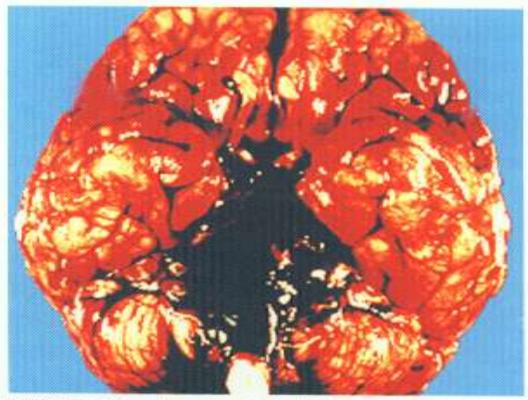


FIGURE 5.39 Another case of marked subarachnoid hemorrhage originating over the base of the brain. Most of these hemorrhages occur naturally from ruptured aneurysms; however, some can be caused by minor trauma or rupture secondary to drugs such as cocaine and methamphetamine.

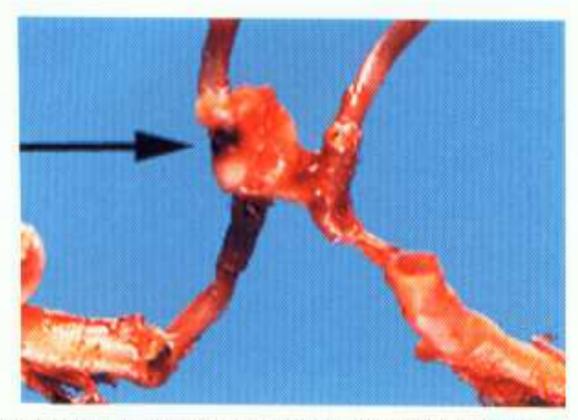


FIGURE 5.40 This is an aneurysm (ballooned-out blood vessel) which was located on the base of the brain. It ruptured and caused death.



FIGURE 5.41 The darker masses are cancer of the brain. Brain cancer rarely causes sudden unexpected death, but it may.

FIGURE 5.42 This area of swelling at the base of the brain was the finding in the sudden death of an eight year old. He complained of a headache the night he died. See next photo.

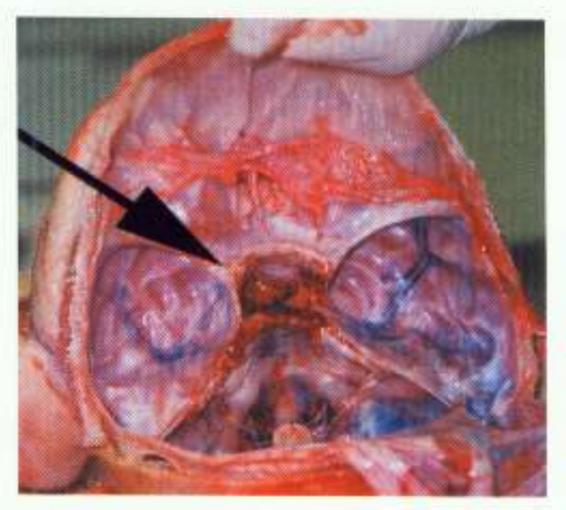


FIGURE 5.43 The pituitary gland rests in this area at the base of the skull. This area is much more expanded than usual due to the growth of a tumor. See next photo.

to the growth of a tumor. See next photo.

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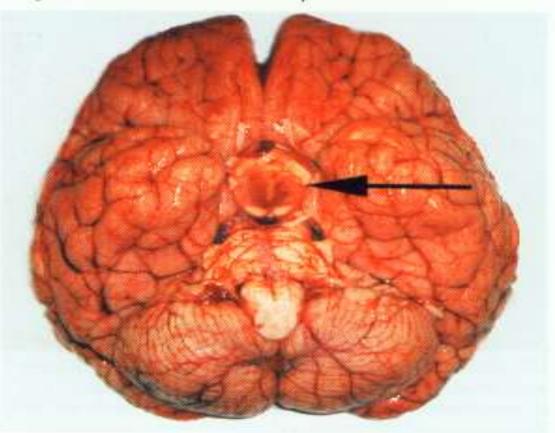


FIGURE 5.44 This photo of the base of the brain shows the area of the tumor.

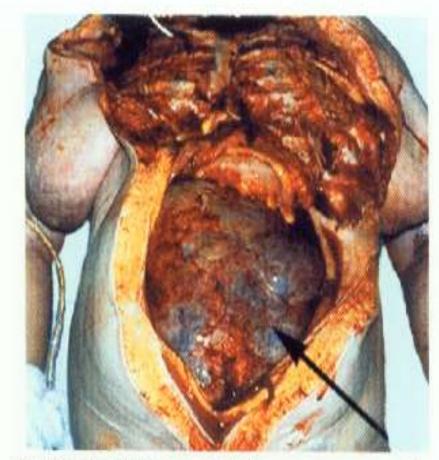


FIGURE 5.45 This lady came into the emergency room and died within a few hours. No one knew she had a huge tumor in her abdomen. See next photo.



FIGURE 5.46 The tumor was of ovarian origin and it weighed 26 lbs.

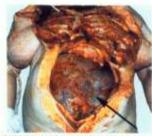


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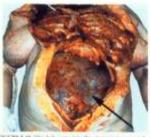


PIGURE 5.49 Mountain carrier to the lines. The white revision are the correct



FIGURE 5.48 This woman had received treatment for cancer of the lung. There was a hole in her chest wall (arrow) through which the lung could be seen. She died of infection.

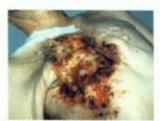
Sudden Natural Death of



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FIGURE 5.48. This recent had more of trustment for career of the lung. Their was a hole in fact shock will larger through which the lung could be upon. The shock of informat.



PIGURE 5.49 Mountain carrier to the lines. The white revision are the correct



Marked emaciation. This woman died of



FIGURE 5.51 This man collapsed in the bathroom. There was blood on the toilet and the floor. See next photo.



FIGURE 5.52 All of the blood on the floor came from his mouth. He was an alcoholic who had a damaged liver (cirrhosis) which caused blood vessels in the esophagus to become thickened. These thickened vessels (varices) are prone to rupture, as in this case. He bled to death.



FIGURE 5.53 Chronic alcoholics can also bleed from varices in the rectum.

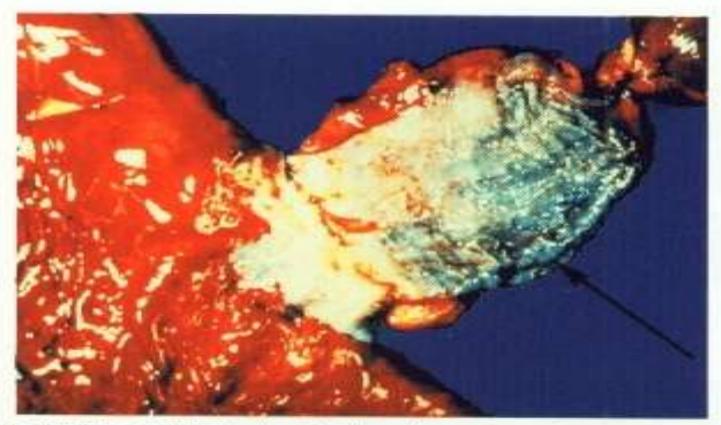
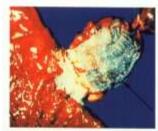


FIGURE 5.54 This is the distal esophagus in a chronic alcoholic. The arrow points to the thickened varices. The stomach (to the left) is red because of irritation from the alcohol.



ENGLISH LAST This is the distal emphasis in extreme above indic. The arrow points as the trickets of extract. The attendants to the last) is not because of invention town the above.



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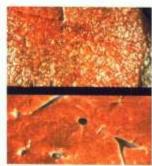


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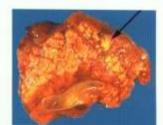


FIGURE 5-37. Alcoholica can also have inflammation to the present (parameter). The array points to the soline area of information.



FEGURE 5.38. The African Assertion man developed a seven reaction transitioning. This type of reasy should not be confined with decreal places. Income phone

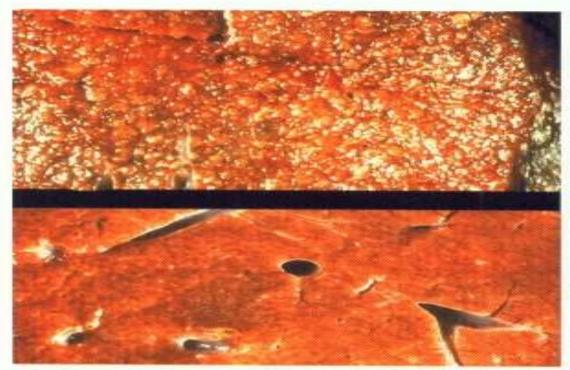


FIGURE 5.56 This illustrates the difference between a cirrhotic liver from alcohol abuse (upper) and a normal liver (lower).

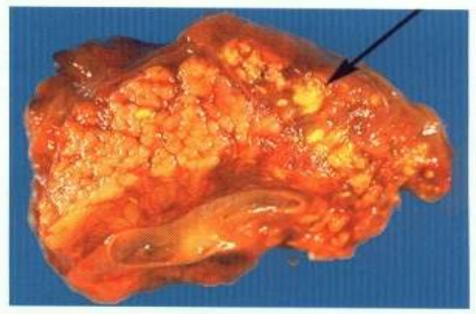
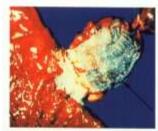


FIGURE 5.57 Alcoholics can also have inflammation to the pancreas (pancreatitis). The arrow points to the yellow area of inflammation.



ENGLISH LAST This is the distal emphasis in extreme above indic. The arrow points as the trickets of extract. The attendants to the last) is not because of invention town the above.



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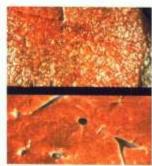


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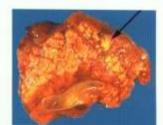


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FIGURE 5.59 The outer layer of his skin slipped off most of his body. Some of the skin (arrow) on his chest became mummified while he was alive. See next photo.



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FIGURE 3.60 The lower communities were also affected, but most places.



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chest. See next photo.



FIGURE 5.61 The lower extremities were also affected. See next photo.



FIGURE 5.62 Another case of skin slippage from a reaction to antibiotics. A view of his back reveals the extent of the injury to this African-American man. This change should not be confused with thermal injury.