



The morgue and the pandemic

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Some weeks ago, we attended an online class on primary care psychiatry offered by a government institute. It was a session on psychosis, and we had an opportunity to ask questions. We asked, “We hear about burnout in doctors practicing different specialties - how do psychiatrists handle the vicarious trauma when they deal with patients with psychosis?”

Perhaps, it was an extremely easy question for the speaker. She answered at once, “You will be trained during your residency to handle that very easily. Just like surgeons handle life and death, and people in other specialties manage things specific to their field, this is also as simple as that.” The answer unsettled our thoughts and feelings because not all of us are blessed to view the workplace from such an easy-going standpoint. Come what may, we suppose, a medical practitioner should display a bold public face and save confessions in the deepest recesses of their heart. It is not always so easy to keep all the confessions locked inside for everyone. Many things perturb the conscience of a doctor on a day-to-day basis.

Work life balance is a bit of challenge for all of us who are part of the health sector. In addition, the challenges thrust upon the medical fraternity during the COVID-19 pandemic have changed our perceptions of existence and our outlook of the future as well. The following narrative exposes how the egocentric human psyche and stiff-necked attitude of people is more offensive and bitter than death.

We had been working in casualties and mortuaries regularly over the past six years as part of our job as medical practitioners. In that sense, for us, death is as much a social event as it is a medical definition. The sociology of death is a vast subject in itself, and we are not delving into that in this paper. Though we are used to dealing with the dead on a day-to-day basis, there are several circumstances that made us cringe inside when we got engulfed by the COVID-19 dead body management wave. During the initial days of the pandemic, the next of kin of the persons who had died with COVID 19 were reluctant to receive the bodies to perform the last rites. Later, state authorities were adamant in not

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releasing the same to even the willing relatives fearing the spread of the disease and also being concerned about the ruckus caused by an ill-informed society. Though the conception of COVID-19 being spread from mortal remains is not totally misplaced, it was unnecessarily given undue importance, and that created a slew of issues for those of us who worked in mortuaries.

During the early days of the pandemic many COVID-19 individuals were buried in mass sites in an undignified manner after their deaths. We heard of people who agitated to prevent COVID-19 dead bodies being buried or cremated in burial grounds/cremation grounds close to their localities. [1] As a society we should be ashamed of this behavior where the collective conscience of the country has been reduced to a historic low of selfishness and inhuman attitudes.

Every religion, culture, race and, for that matter, every family has its own methods, practices, and traditions in connection with performing the last rites of their beloved ones, say, for example, the place, procedure, and the scheme of burial. The state had robbed them of this sacrosanct right by citing a health emergency. Scientifically speaking, except during performing autopsies or coming in contact with body fluids, there is no risk in handling a corpse that is packed in the prescribed manner in a double-layered cadaver bag which is handled as per the standard operating procedure.[2]

The World Health Organization (WHO) has time and again, through its advisories, emphasized the importance of giving significance to the sociological aspects of death.[2] They suggest that families be allowed to perform last rites in accordance with their accepted traditions as there is no urgency in disposing of the bodies so quickly in an undignified manner – as time passes, the deceased are as innocuous as

stones with respect to spread of the disease.

Whether you explain the events post-death using the Elisabeth Kubler Ross model or any other, it will take some time for the family members of the bereaved to accept the reality that their loved one is no more. According to Kubler Ross, the normal grief reaction towards death involves five stages: denial, anger, bargaining, depression, and acceptance.[3] Mourning over the mortal remains of the departed is a very essential final catharsis, allowing the bereaved to vent out the mountain of grief choking them, and preparing them to pass through the slew of feelings mentioned above to finally confront the truth of death. Social mourning, funeral services, and condolence meetings are as old as man in many cultures.

As the pandemic unfolded to its fullest, our days at the morgue also became hectic. There were instances where we had close to a hundred COVID positive dead bodies at any time inside the morgue. The state had issued orders for disposal of these bodies in a designated place only, and only a few of the relatives were allowed to be part of it.

At one extreme, we saw people begging for the release of the mortal remains of their loved ones as they needed to take them home first, at all costs, before the burial. At the other end of the spectrum, we were unfortunate to be part of situations where people left behind the dead and asked us to dispose of them as unclaimed bodies in spite of the fact that the relatives could be a part of the miniature funeral being allowed by the state. These people claimed to have a fear of contracting COVID-19 and so they let their dead relatives go where they may so that they themselves could live. All our efforts in dispelling their false assumptions failed every now and then because they were simply not receptive. Sadly, all the people who left the corpses to rot – and to finally be disposed of by the municipality - came forward eagerly to pester the hospital

for a death certificate so they could claim the ex-gratia payment offered by the government.

In a few cases, when we contacted people on the telephone to inform them that they could come claim the corpse and perform the last rites in the prescribed manner, they answered in the affirmative but then they switched off their mobile phones for the next few days. On the other hand, many times the relatives wanted to receive the dead body but lacked the financial wherewithal to manage the last rites.

In some cases, people asked us to retrieve the gold ornaments from the body and then dispose of the corpse - they would come to collect the ornaments at a later date. A few others asked us to inform them of the specific date and time when the municipality would bury the corpse in the common grave – thus informed, they would perform religious ablutions at home at the same time. There were also those family members who could not turn up because of international travel restrictions.

Governmental policies, and the overwhelming numbers, meant that we had decomposing COVID-19 corpses inside the morgue because of a paucity of cold storage systems, while the relatives, some of them COVID positive themselves, had no option except to wait to perform the last rites. Forensic Medicine and Toxicology departments in government institutions crave for funds and are resource limited with respect to both manpower and infrastructure.[4] The pandemic was really tough for us. We should salute our mortuary staff for their yeoman service to the dead.

During those days, we were mute spectators to different human emotions including the most ugly and unappetizing ones. We have seen helplessness and an inconsolable grief among the relatives of the deceased as COVID-19 was a bolt from blue, the consequences of which they could never have imagined. The callousness of relatives who left dead bodies to rot and waited for them to get disposed of as unclaimed bodies demonstrates the hypocrisy of human existence and extreme human selfishness.

The greatness of a society is measured by the way they look after their elders and the most downtrodden, and how they respect the dead. A country's greatness can be gauged by looking at how respectfully they perform the last rites of an unknown or an unclaimed dead body. The Greek tragedy Antigone is one of the earliest available masterpieces which emphasizes the importance of dignity towards the dead.[5] The concept of human rights may be said to have emerged from the issue of a woman, Antigone, defying the orders of the State and fighting for a decent and respectful burial for her brother who died in war.

In hindsight, it may appear we were a bit hypercritical, but the pandemic deflated our ego and reiterated our belief that man is a limited edition. Many of our clinical colleagues, friends and family ask how we could bear the stench of decomposing dead bodies in the morgue. After the experiences we have recounted, we can say with authority that the odors of the morgue are less outrageous and far less despicable than the smells emanating from the vivisection of the egocentric human psyche.

This article has an associated commentary written by [Dr Vina Vaswani](#).

References

1. Johari A. Coronavirus crisis. No dignity in death: How ignorance, irrational fears are obstructing coronavirus funerals. Scroll.in; 2020 Apr 25 [cited 2021 Jul 20]. Available from <https://scroll.in/article/960101/no-dignity-in-death-how-ignorance-irrational-fears-are-obstructing-coronavirus-funerals>.
 2. World Health Organization. Infection prevention and control for the safe management of a dead body in the context of COVID 19, Interim Guidance, September 4, 2020. Geneva: WHO. Available from <https://www.who.int/publications-detail-redirect/infection-prevention-and-control-for-the-safe-management-of-a-dead-body-in-the-context-of-covid-19-interim-guidance>.
 3. Tyrrell P, Harberger S, Siddiqui W. Stages of Dying. [Updated 2021 Apr 6]. In: Stat Pearls [Internet]. Treasure Island (FL): Stat Pearls Publishing; 2021 Jan. Available from <https://www.ncbi.nlm.nih.gov/books/NBK507885/>
 4. Sengupta R. The autopsy report. Mint; 2018 Sep 07. Available from <https://www.livemint.com/Politics/Lofa7q6gweBypR05IoERrO/The-autopsy-report.html>.
 5. Bobrick EA. What the Greek tragedy Antigone can teach us about the dangers of extremism. The Conversation; 2019 Aug 29 [cited 2021 Jul 20]. Available from <https://theconversation.com/what-the-greek-tragedy-antigone-can-teach-us-about-the-dangers-of-extremism-114814>
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