

Karen A. Carpenter
Autopsy Report
Case # 83-1611

I performed an autopsy on the body of CARPENTER, KAREN A. at the DEPARTMENT OF CHIEF MEDICAL EXAMINER-CORONER Los Angeles, California on FEBRUARY 4, 1983 @1430 HOURS.

From the anatomic findings and pertinent history I ascribe death to:

- (A) EMETINE CARDIOTOXICITY
- DUE TO AS AS A CONSEQUENCE OF
- (B) ANOREXIA NERVOSA

Anatomical Summary:

- I. Pulmonary edema and congestion
- II. Anorexia Nervosa (clinical).
- III. Cachexia.
- IV. Distended abdomen.
- V. Dehydration.
- VI. Congestion of liver and spleen.
- VII. Hyperplasia of porta lymph nodes.
- VIII. Distention of bowel

Report:

External Description:

The body is unclothed and un-embalmed and is that of a well-developed, thin 32 year old white female which measures 64 inches in length and weighs 108 pounds. The body is at room temperature. Rigor mortis is not present. Liver mortis is in the dependent portions and is unfixated, blanching with pressure. The hair is dark brown. The pupils are widely dilated and are round, regular and equal. They measure .6cm in diameter. The sclerae are injected. The nasal cavity is clear. An endotracheal tube is present in the mouth. No abnormalities are seen. The teeth are natural. The ear canals are clear. No injuries are seen of the neck. A small superficial abrasion measuring 1/4 inch is seen over the pre-cordium of the chest. The abdomen is distended. The female genitalia reveal no evidence of injury or disease. Multiple needle puncture marks are seen in the groin bilaterally. The legs show no evidence of injury. The toe nails contain clear polish. The arms are thin. An intravenous needle is present in the right antecubital fossa. Fresh needle marks are seen in both wrists and on the back of the right hand. A superficial abrasion measuring 1/8 in in greatest extent is present on the back of the left hand. The finger nails are long and contain red polish.

Internal Examination:

Head:

The scalp and pericanial tissue reveal no evidence of injury or disease. The skull is intact and shows no fractures. The dura is intact and shows no hemorrhages, either extradurally or subdurally. The arachnoid is thin and transparent. The cerebrospinal fluid is clear. The arteries of the circle of Willis have their normal anatomic distribution and reveal no arteriosclerosis. The brain weighs 1210 grams and shows no focal alterations of the surface. On multiple coronal sections no abnormalities are seen throughout the cortex, white matter, basal ganglia, thalami, midbrain, pons, cerebellum or medulla oblongata.

Neck:

Pink foamy material is present in the airway to the level of the larynx. No obstruction is seen. No gastric contents are present. The mucosa is unremarkable. No injuries or abnormalities are seen of the tongue. The larynx, trachea and large bronchi show no abnormalities. The soft tissue of the neck reveal no evidence of injury or disease.

Body Cavities:

The pleural and peritoneal cavities are free of fluid and the surfaces are smooth and glistening. The pericardial cavity contains a few cc. of clear yellow fluid. The surfaces are smooth and glistening.

Heart:

The heart weighs 170 grams and is small but of normal shape and configuration. The epicardial surface is smooth. The myocardium is red-brown and firm and shows no focal ulcerations. The endocardial surface and valves are grossly normal. The coronary arteries reveal no arteriosclerosis and no congenital abnormalities. The aorta reveals minimal intimal thickening and plaque formation. The pulmonary arteries and great veins are grossly normal.

Respiratory System:

The right lung weighs 450 grams and the left lung weighs 450 grams. The surfaces are redish-pink and moist. The consistency is soft and doughy. The cut surface is dark red in the lower lobes and pale grayish-pink in the upper lobes. Frothy pink fluid is present on the cut surfaces. No focal alterations are seen and no evidence of aspiration, pneumonia or tumor is seen grossly.

Liver:

The liver weighs 1820 grams. The capsule is reddish-brown and smooth. The liver is enlarged and protrudes below the costal margins. The cut surface has a uniform reddish-brown appearance and shows no focal alterations. The gallbladder contains an estimated 10cc. of yellowish-brown viscid bile. No stones are noted. The mucosa is velvety. The extrahepatic bile ducts are patent. The porta hepatic lymph nodes are enlarged to about the size of a pea.

Spleen:

The spleen weighs 140 grams and is enlarged. The capsule is grayish-purple, smooth and tense. The consistency is firm. The cut surface is dark red and shows congestion.

Pancreas:

The pancreas is grossly normal. No focal alterations are seen and no evidence of tumor is noted.

Gastrointestinal Tract:

The esophagus is dilated and contains gastric content to the level of midesophagus. The upper portions of the esophagus are grossly normal. The stomach contains an estimated 50 to 60 cc. of a dark green, dry and hydrous material which has the consistency of dried tea leaves. No solid material or identifiable food is seen. No pills, capsules or other forms of medications are identifiable. The mucosa is rugose and intact and reveals no ulcerations or other abnormalities. The duodenum is dilated and full of a soft semiliquid yellowish-green material. The mucosa is intact. The small bowel is also distended and full of a yellowish-green semisolid dehydrated material. The appendix is grossly normal. The colon is also distended and dilated with a greenish-brown dehydrated material to the level of the terminal sigmoid. The rectum is empty and shows no abnormalities.

Genitourinary System:

The right kidney weighs 130 grams and the left kidney weighs 130 grams. The capsules strip with ease revealing a smooth reddish-purple surface. The cut surface reveals good corticomedullary distinction. The cortices and medullae are grossly normal. The pelvis and ureters are unremarkable. The bladder is empty, the mucosa is intact. The vagina is clear, the mucosa is intact. The cervix is smooth and small. The uterus is of normal size, shape and configuration. The myometrium is firm. The endometrium is thick and mucoid. The fallopian tubes are grossly normal. The right ovary is unremarkable. The left ovary contains a corpus luteum showing recent hemorrhage.

Endocrine System:

The pituitary, thyroid and adrenal glands are grossly normal.

Musculoskeletal System:

The bone marrow is red-brown and juicy. There are no traumatic or other lesions noted throughout the muscles and bones.

Signed by: Ronald N. Kornblum, M.D. Acting
Chief Medical Examiner-Coroner.
RNK:ljh:c
February 28, 1983.

Medical Report

Autopsy On:
Date 2/4/83
Time 2:30pm
Dr. Kornblum
Final on 3/11/83

Death was caused by:
Immediate cause:
Emetine Cardiotoxicity

Due to:
Anorexia Nervosa.

Other conditions contributing but not relating to the immediate cause of death:
Natural cause.

Hospital Report

Case # 83-1611.
Date February 4, 1983.
Deceased: Karen Anne Carpenter.
Age: 32.
Sex: Female
Race: Caucasian

Karen Anne Carpenter was pronounced dead on the 4th day of February 1983 at 0951am by I. Edwards, M.D. at Downey Community Hospital.

Hospital #: ED#7139520
Admitted: 4th day of February 1983 at 0923am by ambulance. From home- 9828 Newville Avenue Downey.
Admitted by G Monnet, M.D.
Symptoms Cardiac arrest.
Laboratory Data: 1,110 Blood Glucose Level.
Remarks: Anorexia Nervosa / Depression.

In my opinion the immediate cause of death is: Hyperosmolar Coma.

Case Report:

Informant:
Pam Tomlin RN, Downey Community Hospital.

Incident
The decedent is a 32 year old female with a reported history of "Anorexia Nervosa."

The decedent was last known to be alive this morning when her mother heard her activity in the kitchen of their residence. The decedent's mother entered the kitchen at approximately 0850 Hrs 2-4-83 and found the decedent unresponsive on the floor.

Paramedics were summoned responded and initiated CPR while transporting the decedent to the hospital. The decedent was admitted to the Emergency Room of Downey Community Hospital where life saving efforts proved to be of no avail. Death was pronounced at 0951 Hrs, 2-4-83 by Dr. Edwards.

This investigator viewed the decedent at Downey Community Hospital. Close examination revealed no indications of trauma or foul play. Ms. Tomlin relinquished a vial of "Ativan" 2mg tablets which she stated was found in the decedents clothing. The medication and the decedent were transported in to the FSC.

Clothing (Red Jogging Suit) released to friend of the family per request of Evelyn Wallace who says she was the secretary to deceased.

No additional information known by this investigator at this time.

End of Autopsy / Report.