

IN THE CORONERS COURT
OF VICTORIA
AT MELBOURNE

Court Reference: 5007/09

FINDING INTO DEATH WITH INQUEST

*Form 37 Rule 60(1)
Section 67 of the Coroners Act 2008*

Inquest into the Death of GEORGE ILES

Delivered On: 14th February, 2012

Delivered At: Coroners Court of Victoria
Level 11, 222 Exhibition Street,
Melbourne Victoria 3000

Hearing Dates: 14th February, 2012

Findings of: IAIN TRELOAR WEST

Police Coronial Support Unit

Leading Senior Constable Greig McFarlane

I, IAIN TRELOAR WEST, Deputy State Coroner having investigated the death of GEORGE ILES

AND having held an inquest in relation to this death on 14th February, 2012
at Coroners Court of Victoria, Level 11, 222 Exhibition Street, Melbourne 3000

find that the identity of the deceased was GEORGE ILES

born on 13 May, 1926

and the death occurred on 21 October 2009

at Port Phillip Prison, Laverton, Victoria 3028

from:

1a. METASTATIC OESOPHAGEAL ADENOCARCINOMA

in the following circumstances:

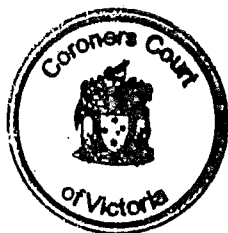
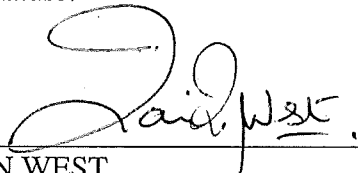
1. George Iles, was an 83 year old male and a prisoner at Port Phillip Prison, at the time of his death. Mr Iles was incarcerated on the 19 October, 2007 for criminal offences committed between 1984 and 1985. He had a past medical history that included asthma, hypertension, heart disease and gout. During his period of incarceration both at Port Phillip Prison and Ararat Prison, a number of incident reports regarding his health were recorded with these including multiple falls and shortness of breath. A review of his prison record indicates that Mr Iles visited numerous medical and related institutions on 14 occasions, including East Grampians Health Service, Stawell Hospital, The Royal Victorian Eye and Ear Hospital, the Ararat Hospital and St Vincent's Hospital, Melbourne.

2. In April 2009, Mr Iles was transferred from Ararat Prison to the St John's Hospital Ward at Port Phillip Prison where he could remain under constant medical supervision, due to his deteriorating physical and mental condition. Subsequent medical examination disclosed that he was suffering heart fibrillations and in June 2009, he was admitted to St Augustines at St Vincent's Hospital, Melbourne, where he remained until early July. On the 2nd September, 2009, he was noted to have developed a chest infection and was significantly unwell, with an oesophageal biopsy showing adenocarcinoma and a CT scan of the brain, disclosing a brain tumour which could not be treated with conventional methods due to his age and ailing health. On the 28th September, he was transferred back to St John's Unit at Port Phillip Prison for comfort and palliative care. On the 16 October, 2009, a personal care assistant was arranged to be with Mr Iles continuously to offer him appropriate care. Mr Iles' condition continued to deteriorate with him subsequently developing an irregular respiratory rate with periods of apnoea. Mr Iles died at approximately 8.30am on the 21st October, 2009.

3. No autopsy was performed in this case as the coroner, on advice from Associate Professor David Ranson, Senior Pathologist with the Victorian Institute of Forensic Medicine, directed that no autopsy was required. Associate Professor Ranson performed an external examination of Mr Iles at the mortuary, reviewed the circumstances of his death, the clinical notes, the post mortem CT scan and provided a written report of his findings. Associate Professor Ranson reported that in all the circumstances a reasonable cause of death appeared to be Metastatic Oesophageal Adenocarcinoma.

4. I find that George Iles died of natural causes and that his management whilst a prisoner within the Victorian Correctional System, was within the normal parameters of reasonable health care practice and that no further investigation is warranted.

Signature:



IAIN WEST
DEPUTY STATE CORONER
14 February 2012