

FORM 37

Rule 60(1)

FINDING INTO DEATH WITH INQUEST

Section 67 of the Coroners Act 2008

Court reference: 5806/08

Inquest into the Death of LAUREL FAITH HOWARD

Delivered On: 20th May, 2010

Delivered At: Coroners Court of Victoria at Melbourne
Hearing Room,
Level 1, 436 Lonsdale Street, Melbourne

Hearing Dates: 12th May, 2010

Findings of: PARESA ANTONIADIS SPANOS

Representation: N/A

Place of death: Box Hill Hospital, 12 Arnold Street, Box Hill, Victoria 3128

Appearances: Senior Constable Kelly RAMSEY, State Coroners Assistants Unit

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Court reference: 5806/08

In the Coroners Court of Victoria at Melbourne

I, PARESA ANTONIADIS SPANOS, Coroner,

having investigated the death of:

Details of deceased:

Surname: HOWARD

First name: LAUREL

Address: 12 Comptom Street, Mitcham, Victoria 3132,

AND having held an inquest in relation to this death on 12th May, 2010 at Melbourne

find that the identity of the deceased was LAUREL FAITH HOWARD born on the 6th December, 1956,

and that death occurred on the 27th December, 2008,

at Box Hill & District Hospital, Nelson Road, Box Hill, Victoria 3128

from:

1(a) ASPIRATION PNEUMONIA

1(b) ALZHEIMER'S DISEASE

in the following circumstances:

1. Ms Howard was a fifty-two year old single woman who resided in the care of the Department of Human Services. Ms Howard was born with Down's Syndrome and developed Alzheimer's Disease in her later years. Over the year or so preceding her death, her carers observed deteriorating cognitive function and decreased mobility. Ms Howard previously resided at another Community Residential Unit, but moved to Comptom Street, a higher level care facility for the disabled, on 31st January 2008 due to her increasing care needs.

2. On referral from her general practitioner, Ms Howard was reviewed by Consultant Physician Dr V. I. Karlov on 25th November 2008. In a report dated 6th July 2009, he advised

that Ms Howard's cognitive decline was not outside the norm for Down's Syndrome patients after the age of fifty. He ordered further investigation of her blood sugar and insulin levels, in response to one test which showed levels on the low side. He also noted an irregular pulse and ordered a 24 hour Holter Monitor to check whether she was developing a cardiac dementia such as "sick sinus syndrome" or the like. When seen on 25th November 2008, she had a loose cough but her chest was difficult to examine properly as she was unco-operative, so he suggested a chest x-ray.

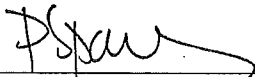
3. While resident at Comptom Street, Ms Howard spent most of the day in a bed or lounge chair as she could no longer walk and could no longer attend any day programs. She needed to be fed in a certain position to minimise the risk of aspiration and her diet was limited to soft mashed foods in accordance with the directions of a Speech Therapist.

4. On 21st December, 2008, Ms Howard was taken to Box Hill & District Hospital (BHH) with a history of decreased oral intake, pallor, shortness of breath and cough, and increasing drowsiness. Investigations revealed anaemia and a likely right lobar pneumonia. It was unclear whether her anaemia was from chronic disease or associated with some form of gastrointestinal disturbance. Discussions between hospital staff and Ms Howard's family resulted in her being subject to a "not for resuscitation" order. As Ms Howard could not swallow, the option of PEG feeding was discussed, but rejected. Ms Howard was treated palliatively and reviewed on 24th December 2008 by the Palliative Care Team who commenced morphine and midazolam to keep her comfortable. Ms Howard continued to deteriorate and died on 27th December 2008.

5. There was no autopsy as I allowed the family's objection to autopsy pursuant to section 29 of the *Coroners Act* 1985. However, Forensic Pathologist Dr Sarah Parsons from the Victorian Institute of Forensic Medicine performed an external examination in the mortuary; reviewed the circumstances as reported by the police, the medical records and medical deposition from BHH and post-mortem whole body CT scan and advised that it would be reasonable to attribute the cause of death to "aspiration pneumonia secondary to Alzheimer's Disease".

6. I find that Ms Howard died from aspiration pneumonia secondary to Alzheimer's Disease. I further find no evidence to support a finding of any causal connection or contribution between her death and her status as a person in the care of DHS when she died.

Signature:



Paresa Antoniadis SPANOS
Coroner

Date: 20th May, 2010

