

IN THE CORONERS COURT
OF VICTORIA
AT MELBOURNE

Court Reference: 1890/10

FINDING INTO DEATH WITH INQUEST

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

Inquest into the Death of LAWRENCE GEORGE NOYES

Delivered On:	27 February 2012
Delivered At:	Coroner's Court of Victoria Level 11, 222 Exhibition Street Melbourne
Hearing Dates:	27 February 2012
Findings of:	JOHN OLLE, CORONER
Police Coronial Support Unit:	Leading Senior Constable Greig McFarlane

I, JOHN OLLE, Coroner having investigated the death of LAWRENCE NOYES

AND having held an inquest in relation to this death on 27 February 2012
at Melbourne

find that the identity of the deceased was LAWRENCE GEORGE NOYES

born on 16 October 1937

and the death occurred on 19 May 2010

at St Vincent's Hospital, Victoria Parade, Fitzroy, Victoria 3065

from:

1a. PNEUMONIA IN A MAN WITH METASTATIC COLON CANCER

in the following circumstances:

1. Lawrence Noyes was aged 72 years at the time of his death.
2. The coronial brief has fully addressed the circumstances of death of Mr Noyes.
3. A summary of evidence was read at today's inquest.
4. In March 2010, Mr Noyes was undergoing a sentence at Barwon Prison.
5. On 7 March 2010, he presented at St Vincent's Hospital Emergency Department. A comprehensive report of Mr Noyes medical management at St Vincent's Hospital¹, as contained in the inquest brief.
6. I note various procedures were performed, commencing with a colonoscopy on 10 March 2010.
7. At a multi disciplinary meeting on 15 March 2010, the decision to proceed to surgery was made. It was noted the tumour was likely invasive and there maybe a possibility of irresectability. A mid transverse colon carcinoma had been found on a CT scan conducted earlier.
8. On 18 March 2010, Mr Noyes underwent a laparotomy. Dr Woods explained:

*"The tumour was clearly irresectable and incurable and palliative bypasses were performed. He underwent a gastro-enterostomy and an ileosigmoid bypass."*²
9. I note that Mr Noyes was very slow to improve over the ensuing weeks despite appropriate medical care and attention, it was noted that Mr Noyes condition was terminal and all treatment should be palliative.

¹ Statement Mr Rodney James Woods, Director of Colorectal Surgery, St Vincent's Hospital.

² Report, Dr Woods.

10. Dr Woods explained:

"It was felt that his gradual deterioration was most likely related to the tumour and after discussion with the patient and his family it was agreed that he should have a trial of chemotherapy. Mr Noyes has some chemotherapy starting on 16 April 2010. Unfortunately the chemotherapy did not produce any improvement and, after further discussion with Mr Noyes and his sister it was decided that he would like to have any intervention that could be performed to allow him to eat and drink and not have nausea. Upper GI surgeons were consulted and they decided to perform a laparotomy. The laparotomy was performed on 18 May 2010, where it was noted that he did not have any obvious obstruction and a gastrostomy for venting of his upper gut and a jejunostomy for feeding purposes was inserted.

*Mr Noyes had a cardiorespiratory arrest later the following day, on 19 May 2010. Because Mr Noyes was not for resuscitation, as discussed with him previously, he was not resuscitated and he succumbed at that time."*³

11. I am satisfied the medical care and attention provided Mr Noyes whilst an in-patient of St Vincent's Hospital was appropriate. I do not consider further investigation warranted.

Post Mortem Medical Examination

12. On 20 May 2010, Dr Sarah Parsons, Forensic Pathologist with the Victorian Institute of Forensic Medicine, examined the body of Lawrence Noyes.

13. Dr Parsons found the cause of death to be pneumonia in a man with metastatic colon cancer.

14. Dr Parsons commented:

"Lawrence Noyes was a 72 year old male who according to the circumstances as detailed in the Police Report of Death Form 83 was currently serving a prison sentence at the St. Augustine's ward at St. Vincent's Hospital. He suffered from advanced in-operable cancer and had not reacted well to chemotherapy.

The medical notes were reviewed, these showed that the deceased was admitted with advanced colon cancer and abdominal pain. CT scan of the abdomen and pelvis showed a 9cm mass invading the duodenum, stomach, head of pancreas plus tumour deposits in the SMV extending into portal vein. The deceased was taken to theatre and an ileosigmoid bypass and a gastroenterostomy was performed on the 17th March, 2010. The patient continued to deteriorate and passed away despite chemotherapy and active treatment.

³ Report, Dr Woods.

Postmortem CT scan shows pneumonia, staples in transverse colon, large tumour mass in the abdomen and kidney stones."

Finding

I find the cause of death of Lawrence George Noyes to be pneumonia in a man with metastatic colon cancer.

I direct that a copy of this finding be provided to the following:

The family of Mr Lawrence George Noyes,
Investigating Member, Victoria Police,
Interested Parties.

Signature:

JOHN OLLE
CORONER

27 February 2012

