

## Police probe into 62 deaths at hospital

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Author/Byline: Lois Rogers Medical Editor

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POLICE are investigating the "suspicious" deaths of 62 patients in a single hospital, the biggest inquiry of its kind in Britain.

Relatives of the patients who died at Gosport War Memorial hospital in Hampshire believe they were given unnecessarily high doses of morphine and other powerful drugs which led to their deaths.

Many of the families cannot understand why relatives, who in some cases were expected to leave hospital within days, were instead fitted with syringe drivers - automatic injection systems that can deliver regular heavy shots of painkillers. They believe that a policy of heavily sedating people was practised at the hospital.

Police sources confirmed this weekend that officers were investigating 62 deaths over four years. Dozens of nursing and medical staff are being interviewed.

Alarm about drug cocktails administered at the hospital was first raised after the death of Gladys Richards in 1998. Her family alleged she had been unlawfully killed but a police inquiry petered out.

Ten other families came forward with similar complaints and the Commission for Health Improvement reported last July: "It is clear that had adequate checking mechanisms existed ... this level of prescribing would have been questioned."

Last autumn Liam Donaldson, the chief medical officer, announced that Richard Baker, professor of clinical governance at Leicester University, was to investigate trends and patterns in the deaths at Gosport. Baker also investigated statistical patterns in the practice of Harold Shipman, the GP now serving life imprisonment for the deaths of at least 236 elderly patients.

Last week the Gosport families were invited to a meeting later this summer to update them on the progress of the inquiry. Many are angry that the police and health authorities have persistently failed to investigate their complaints fully.

Ann Reeves, whose mother Elsie Devine died in suspicious circumstances at Gosport at the same time as Richards, said the police had originally told her it was "not in the public interest" to investigate.

Last week she said: "We do all hope this criminal investigation is now going somewhere and that we will get some answers. It has been a nightmare for the families."

Hampshire and the Isle of Wight Strategic Health Authority said it had already introduced changes in procedures at Gosport. There is no suggestion that any doctor or nurse currently working at the hospital was involved in wrongdoing.

It is acknowledged that securing convictions in such circumstances is difficult.

In recent years there have been six police investigations into misuse of medication in institutions caring for the elderly, but only one has led to a conviction.

Two years ago Phillip Reed, 43, a nurse, was convicted of administering poison with intent to endanger life while working in a care home and a hospital in south Wales. Like Shipman, Reed was accused in court of being "fascinated" by the power of life and death.

Ann Alexander, the solicitor representing the Gosport families, said: "The Gosport patients were all people who were meant to be getting better, not dying. A lot of the time people do not notice patterns of behaviour among clinical staff, there is a lack of scrutiny of untoward incidents in hospital, and we believe this is part of a widespread problem."

Since the case came to light, dozens of families from elsewhere in the country have come forward with fears that the sudden deaths of their elderly relatives in hospitals and nursing homes may have been the result of deliberate drug overdosing.

The charity Action on Elder Abuse (AEA), which receives thousands of calls to its helpline, believes up to 20% of old people in nursing or hospital care are being drugged or sedated for no medical reason.

Lack of controls in systems for giving powerful drugs to old people mean that huge doses can be administered without raising questions, according to AEA.

"There is no national awareness of this issue," said Gary Fitzgerald, its chief executive. "When someone goes into a caring environment,

you cannot assume they are automatically going into a safe environment."

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