From: Mills Hugh
Sent: 24 March 2004 18:13
To: Fee Eugene; O'Rawe Bridget; Kelly Jim; Cody Diana; Hall Janet
Subject: FW: DHSSPS Dr Campbell on children's deaths Evening Extra 18 Mar

DHSSPS,DR CAMPBELL,CHILDREN'S ... The radio transcript.

Hugh

-----Original Message-----
From: Mulhern, Kevin [mailto:Kevin.Mulhern@[redacted]
Sent: 24 March 2004 07:55
To: Mills Hugh
Subject: FW: DHSSPS Dr Campbell on children's deaths Evening Extra 18 Mar

Hugh

As agreed

Kevin

-----Original Message-----
From: [redacted][mailto:[redacted]
Sent: 19 March 2004 15:58
To: Colm Shannon; Don McAleer; ERIN BEGLEY; Jeremy Gardner; John McKervill; Kevin Mulhern; Leona Edgar; LESLEY DEMPSTER; MARTIN MOORE
Subject: DHSSPS Dr Campbell on children's deaths Evening Extra 18 Mar 04

Programme: Evening Extra @ 17.10
Date: 18 March 2004

Dr Etta Campbell speaks about the probe into children's deaths.

<<DHSSPS,Dr Campbell,Children's deaths,EE 18.3.04.doc>>

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LC – SLT

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Programme	**Evening Extra**
Date & Time	**18.3.04 17.10**
Subject	**Chief Medical Office to probe children's deaths**
Prepared By	**Typist:** [redacted] **MMU KC/KC**

AUDREY CARVILLE

Well with me in the studio now is the Chief Medical Officer for Northern Ireland, Dr Etta Campbell. Dr Campbell, good evening to you. At the inquest last month into Lucy Crawford's death, the coroner John Leckey said Lucy died from poor treatment compounded by poor record keeping. You've studied the case, could her death have been prevented?

DR ETTA CAMPBELL

Well firstly, if Mr & Mrs Ferguson are listening, I would like to extend to them my personal heartfelt sincere sympathy to them. Based on the knowledge that we now have, the deaths of Lucy and Raychel may indeed have been entirely preventable and as a parent I share with the Fergusons, I know how dreadful that conclusion is for them and I don't know they can be comforted or how that can be reconciled with them. What I would say is that I would like to meet with Mr and Mrs Ferguson because I think there are important lessons beyond the issue of fluent investment and medical care which we need to learn. The broad message is for the health service about communicating particularly with parents.

AUDREY CARVILLE

In relation to Lucy's case at the Erne Hospital. You've read the case notes, what is your own opinion of the treatment that the baby received?

DR ETTA CAMPBELL

What we now know is that the fluids which were given to Lucy were the ones that were being used in ordinary custom and practice throughout the whole of the National Health Service except for one or two practitioners who'd begun to recognise this issue of hyponatraemia where the body goes through this abnormal response in just a very few cases and you begin to get oedema or swelling of the brain. Now in retrospect, and knowing all the evidence that has been published since Lucy's case and over the

last 4 years, we now know that that condition exists, that it can happen, albeit in very few patients but we need to be very alert and very aware to assure that it never happens again.

AUDREY CARVILLE

But when Lucy died, she died a year before Raychel did, shouldn't that have been known in the immediate aftermath of her death that maybe then Raychel's death could have been prevented?

DR ETTA CAMPBELL

On speaking with Sperrin Lakeland Trust it's quite clear that they did not realise at the time, nor would they have been expected to, that there were implications for the wider service from that case and certainly on looking back and with the benefit of hindsight, had we been able to reflect on that case, had we been able to begin gathering the evidence that it might have been that Raychel's death might never have happened.

AUDREY CARVILLE

So should the investigation, should an inquest into Lucy's death happened a lot sooner that it did?

DR ETTA CAMPBELL

Well the coroner did not feel at that time that an inquest was required and it wasn't until Raychel's death that he put the 2 deaths together and began to realise that there might be a pattern and at that time we were then alerted to this new and emerging problem of hyponatraemia or retention of fluids in a very small number of children. And it was after that, that we then quite urgently began to gather together the evidence and put in place guidelines for the whole health service, the first time those guidelines had been done across the UK and we've now shared those guidelines with the rest of England, Wales and Scotland so that they too might be helped in their practice.

AUDREY CARVILLE

So those guidelines are in place which you hope will not lead to a similar situation happening again, that cannot be guaranteed though, can it, because at the end of the day it's human error that's involved?

DR ETTA CAMPBELL

It's a very complex issue because there's still a great deal of debate in the medical journals as to what causes hyponatraemia and who indeed will be affected by it. So there's still much that we have to learn. What we do recognise now are the early symptoms of hyponatraemia and what we would hope is that with that knowledge out in the health service, with people being kept up to date and aware of those early symptoms, that something like that might be prevented.

AUDREY CARVILLE

You heard there the Fergusons saying that they want someone to be held accountable for the death of their daughter. The Crawfords say all they want from the Sperrin Lakeland Trust is an apology, they were very critical of the way they were treated by the Trust. Didn't you accept that confidence within the medical profession from the public has been damaged as a result of these cases?

DR ETTA CAMPBELL

I can see why that might be the case. What I can say is that with the guidelines in place, and with careful monitoring and implementation of those guidelines, the risk of that happening again should be markedly reduced but we do need to learn more about that condition. However I believe that we do need to engage with patients, with parents in a new and different way and certainly we need to listen to what people are saying, to what Mr and Mrs Ferguson are saying, about ways of improving that communication.