		Witness Statement Ref. No. 007//
NAME OF CE	IILD: Adam St	rain
Name: Stepher	ı Brown	
Title: Consult	tant Paediatric	Surgeon (Retired)
Present position	on and institution	n: Retired
Previous positing As at the time of Consultant Paedi	f the child's death	
[Identify by date Hon Sec Medica Chairman Medi Member RVH F Chairman RBH	and title all of the 1 Staff Committee cal Staff Committe Research Sub-com SC Research Sub-	els and Committees: ose between January 1995-December 2004] RBHSC 1995-97 ee RBHSC 199-2001 mittee 1997-98 committee 1999-2002 n Secretary, Society for Research into Hydrocephalus and Spina Bifida 2001-
[Identify by date	and title all those	ons and Reports: made in relation to the child's death] December 1995 Ref no 059-060-146
OFFICIAL USE: List of previous s		ons and reports attached:
Ref:	Date:	

Particular areas of intere	
	n the general care of Adam prior to his transplant surgery.
infancy to maximize his renathe stages in his management	finished some time before the transplant. I was involved in his management from I function. Once he reached end stage renal failure my role ended. I was aware of from personal contact with Prof Savage. I was therefore aware when a suitable then the operation was scheduled I offered my services to Mr Keane as surgical
(i) meetings with other	ole in the preparation for the transplant surgery on Adam, including: medical personnel; and it and provided to other medical personnel.
I had no role in the preparation	on for Adam's transplant operation, apart from offering my services as surgical

Particular areas of interest (Cont'd)

- 3. Describe in detail the course of the transplant surgery, including:
 - (i) your own actions;
 - (ii) the condition of the transplant kidney at the completion of surgery; and
 - (iii) the condition of Adam at the completion of the surgery.

My role was as surgical assistant. Since I have not personally performed a transplant operation and have been involved in very few, I can only make general comments.

The operation was technically difficult. Adam had had a number of previous operations in the kidney and bladder area, so the dissection in the pelvis to identify the artery and vein was complicated. However it appeared to have been achieved satisfactorily. Following the vascular anastomosis the kidney appeared healthy and was a good colour. My recollection was that it did not produce any urine during the course of the operation Throughout the operation I have no memory of any concerns related to Adam's general condition, and his condition at the end of the operation was satisfactory.

Other points you wish to make including additions to any previous Statements, Depositions and or Reports
[Please attach additional sheets if more space is required]
My involvement with Adam went back to his infancy in both the Royal Belfast Hospital for Sick Children and the Ulster Hospital. He had a number of operations during his early childhood to attempt to maximize his renal function. However he was born with cystic dysplastic kidneys and failure was probably inevitable. My dealings with Adam are summarized in my report to HM Coroner on 20 th Dec 1995 Ref no 059-060-146
THIS STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF
Signed: Dated:15th July 2005