From: Linda Iles To: Caitlin Healey-Nash

Cc: Kate Lockery; Matthew Fletcher

Subject: RE: Special Commission of Inquiry into LGBTIQ hate crimes: Summons to produce (DOFM4)

Wednesday, 9 August 2023 5:28:46 PM Date:

Attachments: image001.png

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Dear Caitlin

Apologies for the delay.

In my view, the primary cause of death can be expressed as: Hypoglycaemic brain injury secondary to insulin toxicity

The bronchopneumonia is best viewed as an indicator of the mechanism of death (prolonged central nervous system depression).

Some might suggest a COD as "Bronchopneumonia in the setting of hypoglycaemic brain injury secondary to insulin toxicity". However there is not sufficient material available to determine whether the bronchopneumonia in isolation absent anything else) would be sufficient to cause death in an otherwise young and healthy person, so I think it best to keep it direct as per above.

Regardless, the critical issue in deaths where bronchopneumonia is present is what brought about the pneumonia. Probably the best equivalent example I can give are cases of blunt head injury where a decedent passes away in hospital after a number of days of treatment, almost inevitably developing bronchopneumonia. COD in those circumstances is usually given as blunt head injury.

Kind regards

Linda

Dr Linda Iles B Med Sci MB BS(Hons) FRCPA DMJ(Path) FFPMI (RCPA)

Forensic Pathologist Head of Forensic Pathology Services, Victorian Institute of Forensic Medicine Adjunct Associate Professor, Department of Forensic Medicine, Monash University

65 Kavanagh St Southbank VIC 3006 Australia







From: Caitlin Healey-Nash < Caitlin. Healey-Nash@specialcommission.nsw.gov.au>

Sent: Monday, 31 July 2023 4:37 PM To: Linda Iles

Cc: Kate Lockery <Kate.Lockery@specialcommission.nsw.gov.au>; Matthew Fletcher

<Matthew.Fletcher@specialcommission.nsw.gov.au>

Subject: RE: Special Commission of Inquiry into LGBTIQ hate crimes: Summons to produce (DOFM4)

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Dear Dr Iles

Thank you very much for your further report ("your third report").

In your third report, at [3], you express the likely cause of Ms Raye's death as "hypoglycaemic brain injury secondary to insulin toxicity". In your earlier reports, you note that Ms Raye developed acute bronchopneumonia as a result of a period of CNS depression.

Further query re cause of death

Is it still appropriate to list acute bilateral bronchopneumonia as a cause of Ms Raye's death? Or is the brain injury now considered the primary cause of death? If the former, would you be able to please update [3] of your third report to refer to the bilateral bronchopneumonia?

Our sincere apologies for hassling you about this matter – we are trying to be as precise as possible as we will likely be making a recommendation for the cause of Ms Raye's death to be updated on her death certificate.

Thank you very much for your ongoing assistance, and please do not hesitate to contact me should you wish to discuss further.

Kind regards, Caitlin



Caitlin Healey-Nash (she/her)

A/Principal Solicitor

Special Commission of Inquiry into LGBTIQ hate crimes

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I acknowledge the traditional owners and custodians of country throughout NSW and their continuing connection to the land, culture and community. I pay my respects to Elders past and present.

From: Linda Iles

Sent: Friday, 21 July 2023 4:17 PM

To: Caitlin Healey-Nash < Caitlin. Healey-Nash@specialcommission.nsw.gov.au >

Cc: Kate Lockery < <u>Kate.Lockery@specialcommission.nsw.gov.au</u>>

Subject: RE: Special Commission of Inquiry into LGBTIQ hate crimes: Summons to produce (DOFM4)

[CAUTION: This email originated from outside of the organisation. Do not click links or open attachments unless you recognise the sender and know the content is safe.]

Hi Caitlin

Please find report attached.

Apologies for the delay

Kind regards Linda

Dr Linda Iles

B Med Sci MB BS(Hons) FRCPA DMJ(Path) FFPMI (RCPA)

Forensic Pathologist

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