## **CONSULTANT NEUROSURGEONS**

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Attn: N Walker Detective Senior Constable Surry Hills Police Station 151-241 Goulburn Street DARLINGHURST NSW 2010

Dear Sir

Re: Mr Carl G. STOCKTON - D.O.B. 31/10/44 Mort Street, SURRY HILLS, 2010.

I reviewed the hospital notes on Carl Stockton, the x-rays of his skull and the attendant photographs.

Mr Stockton first came to attention when he apparently came back into the pub on Cleveland Street where he was confused but conscious. He was taken to Campbell House where they identified the fact that he had injuries. He was then taken to Sydney Hospital. At Sydney Hospital he was still able to walk in and was conscious at that stage but confused and unable to give an account of himself. He had skull x-rays done there and a CT scan and was found to have multiple skull fractures without displacement. He was then transferred to St. Vincent's Hospital. CT scan at Sydney Hospital had shown a multiple small intra-cerebral contusion scattered around the brain being in the right temporal, frontal and the posterior parietal regions.

At St. Vincent's Hospital he was again noted to be conscious but whilst he was there he began to deteriorate. Consequently he was taken to theatre in an attempt to try to do something about his deterioration. The fact was that he was obviously not going to survive unless some attempt was made to do something about it. He had a right fronto-temporal craniotomy with excision of part of the contused frontal lobe and some haematoma. This operation really did not make any difference to him which is not surprising in view of the fact that he had other areas of bleeding throughout the brain. Despite the best attempts he gradually deteriorated and finally died on 11.11.96. There is not much to be gained by detailing the attempts to keep him alive but they were certainly vigorous.

I also noted some other St. Vincent's Hospital notes. There was an assault in 1984 with a fractured finger.

I looked at the skull x-rays taken at St. Vincent's Hospital dated 6.11.96. These show an egg shelled skull with multiple fractures and spreading of the sutures. They do not show any of the fractures to be particularly depressed.

I also reviewed the coronial photographs and note the contused brain with multiple haemorrhage throughout it and the multiple skull fractures extending onto the base of the skull with multiple basal skull fractures as well.

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There are a number of comments which can be made about this injury. The first is that this was an injury which involved primarily multiple skull fractures. Mr Stockton then went on to develop multiple areas of haemorrhage throughout the brain. This had gone on to the complication of cerebral oedema and finally, death. The process here is consistent with multiple blows to the head with low momentum. By way of explanation, head injuries involved in high momentum impacts, in other words, with a lot of acceleration / deceleration components, often produce a pattern of severely contused brain and often without skull fracturing. These injuries are associated usually with immediate loss of consciousness and not with a long lucid period such as occurred here. By contrast, direct blows to the brain such as being hit with a blunt object generally cause skull fracturing and do not cause loss of consciousness necessarily. There is usually a lucid interval as occurred here and the deterioration is then from late bleeding from these fractures or from lacerations to the brain.

In Mr Stockton's case it seems fairly clear that extensive fracturing of the skull involving all sides and the base could only have occurred from multiple repeated blows and is therefore inconsistent with impaction from a motor vehicle accident. One would expect that with impaction from a motor vehicle accident there would be more confined fractures and for the fractures to be associated with depression. One would also have expected a lack of a lucid interval. Mr Stockton's injuries therefore point clearly to an assault with repeated head injuries and are inconsistent with impaction from a motor vehicle accident.

Yours sincerely

JOHN MATHESON

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