

# Forensic Law in Hypoglycaemia-3

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## Abstract

“Environmental Enrichment” (EE) is a proven alternative therapy for Type 2 diabetes related complications. EE preserves the Purkinje cells in the brain. The latter is a promising therapy for prevention of diabetes related mental disorders. Sensory nerves are at higher risk of damage in the hyperglycemic milieu leading to diabetic neuropathy. Patients lose sensation in their lower extremities making them vulnerable to injury because they do not feel the pain, which is a warning sign of tissue damage. That can lead to catastrophic outcomes because with high blood glucose, wounds get difficult to heal. Gas gangrene and tissue necrosis develop, leading to the only resort being amputation and life change challenge. Early diagnosis of diabetes is nevertheless crucial in prolonging the onset of diabetes and its complication. To date many candidate early biomolecules have been reported which are promising early indicators for diabetes. However, advancement in this field of research has not been reported.

Holistically diet, lifestyle, mental health and clinical treatment of Diabetes and Thyroid Disease, including Addison's Disease, plays an important role in patient welfare. Tragically many patients die young or go through life suffering from the old Victorian Stigma of being tainted by having to treat an incurable illness. This is not a joke as suggested in September 2006 in ignorance by a Hertfordshire Insurance Broker describing Diabetes with Neuroglycopenia as a Joke and Nonsense. This caused Obstructed Justice in Law of a critical life-threatening complication of Diabetes and Endocrinology Disease in Hypoglycaemia Unawareness and now in 2023 Otitis Externa and Osteomyelitis as disclosed in a tragic young law student death with likely clinically undiagnosed Otitis Externa and Osteomyelitis. A patient requiring clinician prescribed Insulin justifies clinical respect and understanding in English Law which has been misunderstood since 1994 with sad consequences in this investigation.

Today in recovering and managing the COVID-19 Pandemic of 2020 we move forward with new welfare ideas. It is a delight to be able to share some latest work for future research based on 44 years T1 Diabetes experience complimented by Purkinje Cell environmental welfare.

**Keywords:** hypoglycaemia, neuroglycopenia, insulin, diabetes, Addison's disease, Addisonian adrenalin crisis, thyroid disease, endocrinology, temporary mental health impairment, statute law, legal issues with hypoglycaemia and neuroglycopenia, fast acting insulin, slow acting insulin, glucose, fast acting glucose to treat hypoglycaemia, hypoglycaemia unawareness, Purkinje cells, ambulance emergency calls for hypoglycaemia, remote online health consultations, clinical and GP doctor understanding

## 1. Case Study

Purkinje Cell Mental Health Welfare Environment Imbalance in Hypoglycaemia—A Proposed Update in UK Law for Judicial and Justice Committee Review.

Clinical: Immunogenic Issues in Genetic Inherited Diabetes, Addison's Disease, Vascular Cardiac Risk, Alcohol, with Purkinje Cell Environment Imbalance in Neurology.

Law: 29 Years after Near Fatal Hypoglycaemia and Neuroglycopenia Event, Bricket Wood, St Albans, Hertfordshire, Forensic Investigation questions is a Statute Law Investigation Inquiry a sensible way forward to address Mental Health Post COVID-19 with Diversion from Prosecution in Forensic Identity contributing to attempted malicious prosecution in wrong lacuna hollow law against Diabetes Victims by attempted wrong use of Harassment Law in Clinical Immunogenic Endocrinology Research after Discovered Obstructed Justice in Negligence cover up of Prescribed Insulin to Clinically Treat Diabetes Endocrine Disorder.

Are criminal allegations against qualified nurses in this time of fast moving Endocrinology and Diet and Cell Welfare Research post COVID fully understood by Hospital Management and Legal Investigators?

## 2. T1D Winning in Insulin Chicanes

On 1<sup>st</sup> February 2023, almost 29 years following near fatal Hypo event 23.2.1994, thanks go to Diabetes UK. You have globally announced to your thousands of on-line followers when Type of Insulin is switched e.g., Animal to Human or different type of insulin and treatment regime to fit lifestyle, fast acting, slow acting, injection sites, dose etc. to be very aware of Hypoglycaemia and Loss of Warning Signs of Hypoglycaemia.

The knowledge share started in 1994 by BBC2 Recording Friday 24 June 1994 in Watford and Bricket Wood, St Albans, televised BBC2 Newsnight 9.50pm Tuesday 28 June 1994 and is now recognised by Diabetes UK, a leading Global Diabetes Charity, when the BDA, British Diabetic Association, Diabetes UK, shared the TV platform in the recording in Watford and Bricket Wood. This follows media publicity in the late 1980's early 1990's in UK Sunday Newspapers research into Insulin Treated T1D

Diabetes Patients experiencing loss of warnings of impending Hypoglycaemia, i.e., Hypoglycaemia Unawareness. Many specific cases were investigated and featured including patient falls, car accidents, irrational patient behaviour now identified in Clinical description as Neuroglycopenia and often requiring immediate family or friend witness support to assist in immediate eating and drinking of fast acting glucose drink or high glucose content snack. If BG Blood Glucose level fell below 2.5-3.0 mmol/l and patient unresponsive in Diabetic Coma immediate Glucagon Injection may be required to prevent BG falling further leading to unresponsive Diabetic Coma and if Untreated tragic Fatality often with complex and difficult to diagnose cause of death and extremely hard for Court Coroner's to reach a conclusion as to cause of death and leaving families asking why? On occasion cardiac arrest may be recorded leaving the legal question of 'Why' and could this fatality have been presented. In many cases it is highly likely that with better education and understanding had the social stigma left over from previous years concerning Diabetes and Endocrine disorders including Addison's Disease with mental health behaviour issues been addressed sooner on the balance of probability many of these tragic loss of life events could have been avoided. This journey for 29 years has tried to address this.

So proud that after learning the motto of my school founder George Heriot, Jeweller to King James VI Scotland, King James I England, 'I Distribute Cheerfully' where my dad also attended in the 1930's when the availability of Insulin to treat Diabetes was gaining awareness and clinical benefit, and the wisdom of Scout Founder Lord Baden Powell 'Be Prepared' and today in 2023 to recognise Hypoglycaemia in patients treated with Insulin especially young children, teenagers, young adults.

Delightful guest and co-author to my 2023 work, Dr Christina Yap, the University of Monash, Malaysia, with her important research in Environmental Health of Purkinje Cells in Neurology with Hypoglycaemia identified as Purkinje Cell behaviour are in this health improvement journey after COVID-19 and presented IDF International Diabetes Federation Conference, Lisbon, December 2022. Delighted

to be invited to present the 2023 update at the Diabetes and Endocrinology Congress, Paris, February 2023.

This educational update and understanding of lacuna hollow old-fashioned law in legal understanding of Hypoglycaemia is now an immediate Social Statute requirement to move forward from the Victorian and Edwardian Stigma Attitude towards Mental Health in Diabetes, Addison's Disease, Thyroid disorder, and other invisible health issues.

Children and Young Adults in Mental Health Crisis was stated in Forensic Aspects of Hypoglycaemia Paper 2 and repeated here in summary:

We start 2023 with the sad 2023 statistic that a 39% rise in the number of children needing help for serious mental health including eating disorders have been statistically analysed from NHS data with 1,169,515 under 18's referred for mental health treatment in 2021/22 compared to 839,750 in 2020/21 and 850,741 referrals in 2019/20. Can Hypoglycaemia Unawareness offer possible understanding of this sad disclosure to help children, youths, and families?

### 3. A Society Problem

References 2023 are included here to confirm the creditability of this Clinical and Legal Research.

1) Environmental enrichment preserves hippocampal neurons in diabetes and stressed rats N. Pamidi, C.G. Yap and S. Nayak, Jeffrey Cheah School of Medicine and Health Sciences, Monash University Malaysia, Kuala Lumpur, Malaysia and Department of Anatomy, Melaka Manipal Medical College, Manipal University, Manipal, Karnataka.

2) Long COVID: major findings, mechanisms and recommendations Hannah E. Davis, Lisa McCorkell Julia Moore Vogel & Eric J. Topol.

*3.1 Mental Health—Fear, Paranoia, Agoraphobia, in Genetically Inherited Addison's Disease, Undiagnosed?*

13.01.2023 R v H M Luton Court

Defence—A committed and family orientated person dedicated his time to caring for his elderly grandfather and sister. The 21-year-old lost his father in 2012 in tragic circumstances. That loss left an indelible mark on his life. It did not stop him from showing dedication and kindness to those close to him with caring deeply about his local community, especially

poverty that exists in certain areas of Luton. That is context and some explanation.

Whatever disagreement one has with somebody, the way to resolve it is not to throw projectiles at them and use violence, false misunderstood malicious allegations of denial of wrongdoing by blaming others. What is the cause of such emotional behaviour? Can it be right that in the UK an NHS GP Practice can blame a patient after having prescribed a patient the wrong medication and dose for 7 years, in this investigation Insulin, having prescribed the drug approved by the MCA Medicines Control Agency of the Department of Health Approval and Safety Licence granted in UK 26 August 1982; 13 October 1982 Germany; 28 October 1982 USA; 10 April 1986 Other Countries; 1992 by 65 other countries.

*3.2 NEW in 2023—IDF International Diabetes Federation Conference, Lisbon, December 2022—Neurology*

#### 3.2.1 Abstract

Purkinje cells are specialized brain cells. There are no Purkinje cells in our legs and feet. Sensory nerves are at higher risk of damage in people with Diabetes leading to diabetic neuropathy. Patients lose sensation in their lower extremities making them vulnerable to injury and they don't feel the pain. That can lead to severe damage and because of high blood glucose, wounds get difficult to heal. Gas and gangrene develop, and this leads to the only resort being amputation and life change challenge.

Diet, lifestyle, mental health, clinical treatment of Diabetes and Thyroid Disease, including Addison's Disease, plays an important role in patient welfare. Tragically many patients die young or go through life suffering from the old Victorian Stigma of being tainted by having to treat an incurable illness. This is not a joke as suggested in September 2006 in ignorance by a Hertfordshire Insurance Broker describing Diabetes with Neuroglycopenia as a Joke and Nonsense causing Obstructed Justice in Law of a critical life threatening complication of Diabetes and Endocrinology Disease. A patient requiring a clinician to prescribe Insulin justifies clinical respect and understanding in English Law which has been misunderstood since 1994 with sad consequences.

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with new welfare ideas. It is a delight to be able to share some latest work with you for future research based on 44 years T1D experience.

### 3.2.2 Why Investigate? What Qualifications?

Derek Beatty graduated from Edinburgh University with a degree in Biological Science and Business Studies and then Marketing. This foundation in Clinical Medicine and forensic interest in cause of illness led to a long career working in healthcare in fields of Pathology; Endocrinology; Radiology including MRI and MRS MR Spectroscopy; Respiratory; Diabetes and Thyroid Health. Here along with sound qualified support from Dr Christina G Yap, University of Monash, Malaysia, the newly researched Purkinje Cell Environmental Health Welfare in Hypoglycaemia and Neuroglycopenia associated with diet, exercise, lifestyle is shared with open invitation for further research for Diabetes Patient Welfare. Dr Yap's work was presented with much interest to 5,600 attendees at IDF, International Diabetes Federation Congress, Lisbon, December 2022.

### 3.2.3 Advice

Advice given and identified in the High Court of Appeal, London, 27 March 1996, and observed 19 July 2021 in the Administrative Court, RCJ London, identified the complaint after event of 23.2.1994 was against the NHS England Harvey House GP Practice, St Albans and Bricket Wood, which led to obstructing justice by Dr ALA now practising at Didcot Medical Centre, Oxfordshire. Dr ALA misled NHS England Watford General Hospital in attempts to make the author believe Dr AN (deceased) and Dr MC were responsible and made the Courts in Civil Law believe they responsible for near fatal Hypoglycaemia with Neuroglycopenia event in Bricket Wood, St Albans, at 6.30pm on 23.2.1994, and near fatal Addisonian Adrenalin Hypoglycaemia Crisis suffered by HB at the same time. Dr ALA deliberately misled Addisonian Patient and her Daughter, HCB, her solicitor, her NHS England employer, and beyond reasonable doubt the GMC General Medical Council, a registered UK Charity, for 28 years and attempted to mislead Derek Beatty he was responsible for his near death on 23.2.1994 after she and her colleagues at Harvey House GP Practice, August 1987 – 1994 having recklessly prescribed the author a 20% overdose of the wrong NHS prescribed insulin in the period and failed to instruct and advise that the

dose be reduced by up to 20% to prevent loss of warning signs of impending Hypoglycaemia and Neuroglycopenia causing the NHS Patient Derek Beatty to suffer injury along with alleged emotional PTSD Mental Health injury to others including HCB, now HW, and HRB to whom Dr ALA had mistreated in the same period, August 1987-1994, and failed to advise all members of the family what to do in an Emergency Diabetes Hypoglycaemia with Neuroglycopenia and Addisonian Crisis Adrenalin Crisis event when Red Alert Emergency Glucose was required to treat Diabetic Hypoglycaemia and Emergency Adrenalin and Hydrocortisone dose adjustment to treat an Addisonian Crisis requiring Emergency Adrenalin Injection.

The **Clinical Error in Law** was compounded when the on call GP General Practitioner Dr Duncan Gorton refused to attend a Red Alert GP House Visit call when summonsed to help by Derek Beatty who refused to attend, requested to speak to Heather Rosemary Beatty and failed on this telephone call to diagnose the possibility of both patients having near fatal Hypoglycaemia Unawareness requiring immediate Paramedic presence at the scene and emergency 999 Red Alert Ambulance transfer to the nearest A and E NHS Hospital.

This compounded failure by all NHS England GP's practising at Harvey House GP Practice St Albans, and at the Church Hall, St Luke's Parish Church, Bricket Wood, St Albans, further led to Dr A and all the GP's obstructing justice and causing injury in breach of the Health and Safety at Work Act 1974 and by implicating the Minister of St Luke's Parish Church, Bricket Wood, caused the Vicar, Revd NL to assist an offender, and then SW and D WW became involved. Both assisted an offender, a criminal offence.

19.1.2023—Police legitimacy is hanging by a thread after the DC rape case say chiefs. The Chief Constable of British Transport Police has expressed her shame and anger that a fellow officer had been free to carry out his 18-year campaign of abuse leading to Humberside's Police Chief Constable identifying one of the darkest weeks for policing known in a career of nearly three decades and numerous times from 2001 until 2021 with admission in December 2022. The reference is to former Metropolitan Police Officer DC aged 48, admitting 49 criminal charges with complaints faced before 2001.



British Transport Police Chief Constable has said she felt shame and anger over the case of DC and wrote 'If I was to commit a crime, get arrested and give my details, there is no obvious system check that would flag that I'm a police officer if I didn't choose to tell them. Yes, you read that correctly. On arrest, my DNA and fingerprints would be taken and checked against national forensics databases. As it stands today, I could be arrested by the police and nobody but me would know I am the police. In my view this is a priority issue for our attention'.

'It's about time we understood and closed the gaps'.

'Otherwise, others could fall through the cracks and go on to do harm'. 'It's about time we understood and closed the gaps'.

A need to strengthen the approach is needed from the moment an allegation is made is echoed from Humberside with Mr F stating, 'public trust in the profession will continue to erode unless the police move from being the silent majority to being guardians of our culture and behaviour'.

This is similar to cases in other professions where teachers or doctors have abused their position to cause harm.

This investigation into Hypoglycaemia associated to Diabetes, Insulin and Addison's Disease identifies beyond reasonable doubt six NHS England GP Doctors; along with a Professional Insurance Broker Sales Representative Mr DW responsible for representing Commercial Union Assurance Company; Mrs CR; a Professional Teacher of Spanish; Mrs HRB; a State Registered Qualified Nurse from Lancaster Royal Infirmary, and now Mr JW; believed to be a Registered Transaction Director of EY Ernst Young Accountants; have all abused their position of trust to cause harm to the author and others for 29 years since 1994 and GP Dr ALA and her colleagues for 36 years since August 1987.

Daughter HW has been misled from being a child aged 11 and abused to cover up the errors in law and trust of the others aforementioned to falsely lay blame on her father and others and has attempted to use her misconceived position of trust granted to her as a Director of EY to along with Mr JW to deliberately misled PC K of Hertfordshire Constabulary and MF, Senior Crown Prosecutor, Hertfordshire, from 2020. In 1999 – 2000 officers of Greater Manchester Police,

and on 9 April 2001 Mr P McN, Principal Crown Prosecutor, Greater Manchester CPS, was misled in Claim for Judicial Review.

On the balance of probability and likely beyond reasonable doubt formal allegation that Genetic Inherited Addison's Disease Thyroid Health Disorder likely Undiagnosed and likely incorrectly treated by NHS England, has been responsible for alleged errors in Statute Law in England and Wales and alleged Obstruction and Miscarriage of Justice. The consequences of this conduct have not only have affected the welfare, health, and emotional financial life for almost 36 years, along with on the balance of probability may have caused unnecessary loss of life in 2020 from COVID-19 infection associated with identified knowledge presented by Schernthaner, 'Immunogenicity and Allergenic Potential of Animal and Human Insulins' Edinburgh 1993, published ADA 3 December 1993 with Clinical Investigation to help others and save lives obstructed from 2020.

- 1) Concern exists for the welfare and health of HW. In 2022 the Crown asked why HW suffers from Fear, Paranoia, Agoraphobia, Classical Clinical Symptoms of Undiagnosed Addison's Disease and Thyroid Disorder? This is self-evident from this statement.
- 2) On 21 April 2022 Mr JW, a Director Ernst Young, Accountants, London, deliberately and with intent in St Albans Court obstructed justice involving an ongoing Clinical and Criminal Investigation into the likely cause of death of NHS patients infected by COVID-19 Virus March to December 2020 of which 25 – 33% were NHS registered patients diagnosed with Diabetes and likely Thyroid Health disorder and likely most were receiving NHS prescribed hyperglycaemic lowering prescribed therapy mostly Insulin. This part of the investigation commenced in 1994 on advice from PC PN, Hertfordshire Constabulary, and previously London Metropolitan Police, to establish whether BHI Insulin had been prescribed to the author August 1987 – 25 May 1994 which it was not, and discovered when warning signs of impaired hypoglycaemia awareness at consultation with Dr S 1.30pm 14 June 1994 then referral 17 June 1994 to Dr L, Medical Centre, Watford, after Dr ALA had arranged for removal from the patient list of Harvey

House GP Practice and when it is suspected arranged for all the paper family medical records to be shredded by Dr ALA and her colleagues in her failure to diagnose Hypoglycaemia Unawareness at consultation with her 8 February 1994, 10.40am, accompanied by HLA, following which she lied to her employer about Hypoglycaemia Unawareness before Obstructing and Perverting Justice in the RCJ, Royal Courts of Justice, London, 27 June 1995 and 27 March 1996 at the Appeal Court RCJ London.

- 3) On 27 June 1995 Dr ALA, NHS Harvey House GP Practice, St Albans, along with 5 other GP's all targeted the author and deliberately and with intent obstructed justice before the Judge in the High Court, Royal Courts of Justice, London. It is suspected Dr ALA caused the NHS Medical Notes of the author August 1987 – June 1995 to be shredded. This was obstructing justice, a criminal offence.
- 4) On 27 March 1996 Dr ALA NHS Harvey House GP Practice, St Albans, and 5 GP's it is alleged deliberately and with intent obstructed justice in the High Court of Appeal, Royal Courts of Justice, London, and failed to deliver up to the Court a Clinical Child Psychiatrist Report on HCB, now HCW. It is alleged Dr A may have caused the Medical Notes of HB to be shredded and by doing so she obstructed and perverted justice.
- 5) It is alleged Mrs HRB on advice from Dr ALA and Mr DWW and Mrs SW and Mrs CR were party to this alleged criminal obstruction involving an innocent non-Gillick Competent child, at the time of this alleged Criminal Offence against the child by use of Munchausen Syndrome by Proxy.
- 6) On 13 July 2000, it is alleged that Mrs HRB and HCB, now HCW, deliberately and with intent obstructed justice and misled the Court to believing contact by the author/victim was harassment in breach of the Harassment Act 1997 when it was to investigate concerns for the welfare of HCB believed at the time to have Genetically Inherited Addison's Disease from her mother with likely Mental Health issues which required NHS England diagnosis, and treatment. A requested Medical Report to the Court has not been supplied following request 2021/22.
- 7) On 23 November 2000 it is alleged that HRB and HCB, assisted by the Chief Executive, Trafford Health Authority, and Trafford Social Services, obstructed justice and failed to disclose to the Court and to the Defence evidence of a meeting between MrGC, Mrs HRB and HCB, and by doing so deliberately and with intent were responsible for an alleged Miscarriage of Justice in Trafford Court, 11 July 2000 and Manchester Court 23 November 2000.
- 8) On 22 September 2006 Mr DW and Mrs CR deliberately and with intent obstructed justice in St Albans Court and failed to inform the Court that the welfare of HCB, now HCW was the reason for the need for contact with on the grounds of welfare concern and the need for NHS England to arrange diagnosis of likely Genetically Inherited Addison's Disease with Mental Health implications.
- 9) On this occasion Mr DW lied when under oath concerning the welfare and whereabouts of HCB when aged 11 after his separation from SW and caused HRB and HCB when aged 11 – 12 to become involved in the NHS therapy treatment for cancer which SW had sadly succumbed to following slow diagnosis and referral by Dr ALA with involvement of others, along with the Vicar, St Luke's Parish Church, was influenced by Dr ALA and her GP colleagues to cover up her errors and Gross Medical Negligence in Public Office.
- 10) It is alleged Mr DW and others caused the author financial loss of £275,000 plus emotional loss since 1994 and by deliberate malicious prosecution caused unlawful financial loss and emotional personal injury with emotional loss to be assessed by the Court.
- 11) It is alleged JW has been deliberately misled by some or all of the aforementioned parties and as a Director of Ernst Young Accountants should have known and understood when married to HW he would not be allowed to blame the author for the suspected Mental Health illness of HW caused by Genetically Inherited and Undiagnosed by NHS England Addison's Disease Thyroid

Hypopituitarism requiring urgent GP referral to a Clinical Endocrinologist for T3 and T4 Pathology Clinical Assay and possibility surgical intervention may be required on diagnosis, untreated could be life threatening.

- 12) It is alleged JW in early 2020 deliberately misled the Registered Charity Diabetes UK, caused an unnecessary conduct investigation by Diabetes UK, caused an unnecessary investigation by ICO, Information Commissioner's Office, and an unnecessary investigation by Police Scotland and by doing so as a Director of Ernst Young wasted Police time. It is known that Ernst Young have a Global Health Division led by Ms A McB. It is known that in 2020 Ernst Young EY received an award for work in Healthcare at the same time as Derek Beatty and Schill Medical achieved an award for introducing the possible use of the Infracontrol Nebuliser which had successfully been used to deliver inhaled therapy to treat NHS patients with diagnosed with Pulmonary Hypertension at Papworth Hospital, England, and other PH Centres in the UK and which the technology offered a likely inhaled antibiotic therapy to treat COVID-19 infection linked to a Ventilator in Critical Care to clear vascular airways has tried in Costa Rica with success pre COVID Vaccine.

### 3.3 USA – Patient R V Investigation – Joslin Medal preparation

- 1) USA T1D patient 50 years. Disclosed his HbA1c results. None disclosed for 1987–1994 his GP does not have them!! Author's GP was unable to disclose my records for the period nor those of my daughter when requested by the Court in 1994 which will show a child experience of witness to Hypoglycaemia and Neuroglycopenia in Diabetes and Addison's Disease 23.2.1994!
- 2) Clinical Legal Case Study papers are peer reviewed for publishing in US clinical journal and new Hong Kong legal case study journal for scholar research and publication.
- 3) Curiosity concerning my missing medical records 1987-1994 remains.
- 4) The question now arises why in 1994 were the daughter's medical records not disclosed to the Court in Watford when ordered to do so with solicitor application the Court ordered, and Dr A failed to comply with the Court order on advice from her legal insurer concerning an 11-year-old child?
- 5) Why did NHS Harvey House GP Practice obstruct justice June 1995 in RCJ London?
- 6) Why did Manchester Court in November 2000 say medical note disclosure of ex-wife/daughter's medical records was 'A fishing trip'? when barrister stated it was 'In Public Interest' which it was.
- 7) Why has a director of EY Ernst Young raised the Mental Health issue of Fear, Paranoia, Agoraphobia, of a 40-year-old daughter with the Crown and the Crown has asked the author to explain the cause while at the same time failing to produce an Expert Witness Endocrinology Report to identify likely Genetically Inherited Addison's disease from mother and placed with the Court when requested?
- 8) NHS Hertfordshire have an immediate duty of care in the terms of the Health and Safety at Work Act 1974 to have prepared such at Public Expense for disclosure to the Court, the CPS, to the author, and to JW, and for Expert Medical Opinion of such report be placed with the Court along with the missing Medical Records 1987 – 2000 as previously requested of the Court in Manchester 23 November 2000.
- 9) In the Court of Appeal, Royal Courts of Justice, London, before the Lord Justices it was ordered that:
  - (i) The Official Solicitor, subject to his consent, be invited to act as Guardian ad litem of the Child.
  - (ii) the said child, by her Guardian ad litem, be joined a party to these proceedings;
  - (iii) the Official Solicitor do have leave to instruct a consultant child psychiatrist;
  - (iv) the Official Solicitor do have leave to send the documents in these proceedings including the transcripts of the judgements of the Civil Appeal to be provided at public expense to the consultant child psychiatrist if it is deemed to be in the child's interest.

This never happened and because of this error and failure in Statute Law alleged breach of

Order by NHS England, obstructed justice; alleged perverted justice; the St Albans Magistrates' Court and Crown Prosecution Service have a legal duty of care to request that the High Court at the Royal Courts of Justice at Public Expense address and correct these errors in law as fast as possible and make the necessary arrangements to bring criminal charges against the alleged offenders responsible for obstructing and perverting justice at the time in 1996 and thereafter and assist in loss recovery.

With Mum's Addison's Disease sperm and Dad's T1D sperm what can this tell us about baby mental health in daughter and in grandchildren risk which NHS England require to investigate as fresh evidence and disclose to the Court.

On 30 August 2020 at a meeting with PC MB, Edinburgh, Police Scotland, advice was:

- (i) The author's record as a resident in Scotland is clean.
- (ii) Complaint against Dr AA be referred to the GMC, General Medical Council. This has raised a Rule 12 GMC investigation with advice that the matter be referred for Judicial Review, May 2022.
- (iii) Disclosure be referred to the Scottish Parliament to assist the Secretary of State for Health to use input to assist in Public Health advice and understanding into Immunogenic Issues involving COVID-19 Infection pre-Astra Zeneca, Roche, Moderna, Vaccine availability late 2020 early 2021. Helpful response from Secretary of State for referral to NICR, National Institute of Clinical Research for update and further research.
- (iv) Check with ICO, Information Commissioner's Office, on issues involving Charity Diabetes UK. Done.

Questions remain that Human Rights Law based on the Human Rights Act 1998 involving Diabetic Discrimination and alleged Hate Crime are identified to justify investigation of alleged offenders.

How is the charity the GMC, and NHS England proposing to answer with Public Apology conduct of NHS England Harvey House GP Practice, St Albans, Hertfordshire, remove all alleged malicious prosecution, conviction, and other discrimination alleged Hate Crime acts against the author and others since 23.2.1994 and arrange loss recovery of £275,000 open to

audit plus recovery of Emotional Loss to be addressed by the Court?

In 2006 Brent Hoadley PhD, Florida, USA, sent the author his book *Too Profitable to Cure* about his father 50 years T1D with personal best wishes addressed to me. 2023 disclosure from USA now shows T1D experience of Richard Vaughn:

US Patient RV—I have read that A1c testing was not available until 1976. My doctor started A1c's with his patients in 1980. I was diagnosed in 1945 when I was 6, and I must have had very high blood sugar until about 1988. That is when my A1c's began improving. Now I am alive after 77 years of type 1, and I have no complications except for some nerve damage and weak muscles. I am 83 years old, so aging is partially responsible for that.

As part of my preparation for my taking part in the Joslin Medallists (Medals for long term T1D)

Study I was supposed to have a listing of all my A1c's. My doctor was very cooperative, but there are several gaps in the list. The years 1990-1994 were not available. Below are the A1c's that my doc was able to retrieve from his files. I have updated for 2013-2016.

1980...10.6, 9.6, 9.0  
 1981...11.8  
 1983...9.2  
 1984...9.2, 9.7, 8.9  
 1986...11.1  
 1987...8.0, 9.8, 10.3  
 1988...10.5, 7.7, 7.7  
 1989...7.3  
 1995...6.8  
 1997...6.0, 5.4  
 1998...6.5  
 1999...6.8, 6.7, 6.5  
 2000...6.3, 6.1, 5.5  
 2001...5.8, 6.0, 5.6, 6.0  
 2002...6.0, 6.4, 6.2, 6.0  
 2003...5.6, 5.4, 5.9  
 2004...5.9, 5.7, 5.8, 5.6  
 2005...5.6, 5.8  
 2006...5.6, 5.7  
 2007...5.5, 5.6, 5.7, 6.1  
 2008...5.7, 5.9, 5.7, 5.6



2009...5.6, 5.8, 5.8  
 2010...5.7, 5.6, 5.6, 5.4  
 2011...5.6, 5.7, 5.8, 5.6  
 2012...6.1, 6.1, 6.0  
 2013...5.8, 6.1  
 2014...5.7, 5.6, 5.8  
 2015...5.8  
 2016...5.9, 6.0, 6.1

Notice the drop from the 10's to the 7's in early 1988. That is when I read an article in a magazine that indicated that carbohydrates affected the blood sugar level. I read that some foods had fast acting carbs, so I started eating small portions of those foods. My doctors never told me about carbs. Then in the late 1990s I was permitted to use basal/bolus control. In 2007 I started pumping. My A1c's have been very good during the new century because I finally knew what to do to get good control. I was very successful for several years before pumping too but using an insulin pump has made good control so much easier.

I took only one injection of beef/pork insulin per day during my first 35+ years. Can you imagine what my A1c's would have been during those years? Those were the years before my doctor started having my A1c's done.

I feel so lucky to be alive and healthy, without serious complications. Is it good genes?

The Joslin Study of long-term type 1's in the Us has reported that many of the participants are still producing some insulin. Those individuals are insulin dependent, but any amount of insulin produced in our bodies is very beneficial in helping to prevent complications. My C-peptide is less than 0.1, so I am producing almost zero insulin. There has to be some other explanation for so many of us living so many years with type 1, and not having any serious complications.

Author's Forensic Comment:

Well done Richard BUT no HbA1c in records NO records 1990 to 1994.

This was the period of Unexplained Death in Bed Syndrome investigation by Low Task Force Investigation with Global input to BDA and time after BHI approval in UK 26 August 1982 when I experienced Hypoglycemia Unawareness for 9 years after BHI prescription of 20% overdose leading to near fatal Hypo Diabetes and

Hypoglycemia Addison's Disease Crisis covered up by alleged obstructive Justice in RCJ High Court London to cover up alleged breach of Health and Safety at Work Act 1974 by NHS Harvey House GP practice St Albans Hertfordshire England and use of Munchausen Syndrome by Proxy of author and estranged daughter aged 11 at the time. Matter is under investigation by CPS in England after the author was asked for reasons for Fear Paranoia and Agoraphobia in undiagnosed and likely Genetically Inherited Addison Disease in family. A big issue in Mental health post Covid Pandemic. Keep positive and strong.

*3.4 Law Student Who Died After GP Phone Consultations 'Should've Been Seen in Person' — Story by Dave Higgins 17.1.2023 Metro*

A law student who died following a series of remote consultations with doctors and nurses should have had an urgent face-to-face appointment after his final contact, an inquest was told yesterday.

David Nash had four remote consultations before he died on November 4, 2020

David Nash, 26, had four phone consultations with a Leeds GP practice over a 19-day period in autumn 2020, the inquest in Wakefield, West Yorkshire was told.

The court heard his condition deteriorated dramatically after the final consultation and he was taken to hospital by ambulance after several NHS 111 calls but died two days later.

It was later found that he had developed mastoiditis in his ear, causing an abscess on his brain which led to his death.

In a statement, GP expert Alastair Bint did not criticise the remote nature of the first three consultations.

However, Dr Bint concluded that the fourth, with advanced nurse practitioner Lynne White on November 2, should have generated a face-to-face appointment which is likely to have led to a hospital admission.

A GP expert says David should've been seen face-to-face by a medic. Provided by Metro.

He said Mr Nash's fever, neck stiffness and night-time headaches were 'red flags' and the nurse's diagnosis of a flu-like virus was 'not safe'. He also said it was for a neurosurgical expert to comment on whether the final outcome would have been different if Mr Nash had been

seen face-to-face.

Dr Bint's report stressed that the NHS was dealing with an unprecedented situation at the time—the COVID pandemic.

In her evidence, nurse Lynne White said she accepted that, when she told Mr Nash on November 2 'you're sounding like you're feeling a bit sorry for yourself', it appeared now as if she was being dismissive. But she insisted she was simply reflecting that he seemed unwell.

In 2016 the author experienced similar Otitis Externa and Osteomyelitis with severe pain and investigation led to the paper 'A Listening Ear' as at the time 150 patients were affected in Scotland and 350 in England with this complaint when there were no NICE Guidelines developed and published by NHS England. Why? Correct treatment was implemented by NHS Scotland on diagnosis both inpatient and outpatient.

An inquest into his death heard that the 26-year-old had four over-the-phone consultations with a healthcare staff at a Leeds GP practice over a 19-day period in October and November 2020. Mirror reports that Mr Nash's condition rapidly declined after his last consultation November 2.

A West Yorkshire court heard that he was taken to hospital by ambulance after a number of calls to NHS 111, but sadly died on November 4, 2020. It was later discovered that his death was caused by a serious bacterial infection, mastoiditis, in his ear which caused an abscess on his brain.

Abigail Combes, assistant coroner, read a statement from GP expert Alastair Bint during the inquest. Dr Bint had told the hearing in Wakefield that a nurse should have organised an urgent in-patient appointment after Mr Nash's fourth phone consultation.

However, the doctor did not take aim at the remote nature of Mr Nash's first three consultations. But he admitted that a face-to-face appointment with Lynne White, an advanced nurse practitioner, could have led to live-saving hospital admission.

In her evidence read to the court, Lynne White told Mr Nash: "You're sounding like you're feeling a bit sorry for yourself, are you feeling a bit rotten." The nurse insisted that she was simply reflecting that the patient seemed unwell and wasn't being dismissive.

Dr Bint claims that the symptoms the 26-year-old presented including fever, neck

stiffness and night-time headaches were "red flags". He concluded that the nurse's diagnosis of a flu-like virus was "not safe".

Dr Bint said: "This was a patient that needed to be seen in person. This was a patient demonstrating some significant red flags and needed to be seen. Had he been seen in-person, it seems likely to me he would've been admitted to hospital."

The doctor's report noted that the law student would have been in hospital 10 hours earlier. However, he conceded that it was for a neurosurgical expert to comment on whether his outcome would have been different.

Mr Nash's parents, Andrew and Anne Nash, described how their son had five "shambolic" calls on November 2 with the NHS 111 system before being taken to St James's Hospital in Leeds by ambulance. They have campaigned to find out whether the mastoiditis would have been identified and easily treated with antibiotics if their son had undergone a face-to-face examination earlier.

Mrs Nash read a pen-portrait of her son to the court as tribute and said that she was "eternally grateful for an amazing 26 years of love and hilarity". She added: "Your huge smile, your compassion and your ability to enjoy every moment could never be replicated."

Author comment. What a tragic case. A face to face GP consultation and emergency referral to be seen by a GP to have the patient painful ear inspected by a GP to identify infection in the outer ear clearly caused by ear infection and late night saliva duct cortisol secretion beyond reasonable doubt led the mastoid inner ear infection to spread onto the skull causing Osteomyelitis and skull infection which would have required hospitalisation with IV Antibiotic treatment several times per day possibly for several weeks depending on the area of infection spread.

The tragic death of Law Student David Nash aged 26 without reasonable doubt is a clear breach of the Health and Safety at Work Act 1974 by the NHS Trust involved and Nurse Practitioner Lynne White disclosure is a disgrace to her profession along with the Doctors, Clinicians, Nurses involved is an event which could easily have been prevented. This tragic loss of life is not only a dreadful loss to his parents, family, and friends, but also a loss to the Legal Profession, where his experience in

education, life, and as a patient, could have been invaluable. A detailed Forensic Investigation is justified by the Health and Safety Commission with possible damage compensation. Derek Beatty 19.1.2022.

'Happiest' girl, 6, died suddenly hours after father tucked her into bed.

ROSS MCGUINNESS 17 January 2023, 8:50 am

- 1) A six-year-old girl with a heart condition died suddenly just hours after her father tucked her into bed. David Hutton, 38, put his daughter Isla to bed at their home in Ainsworth, Bury, Greater Manchester, after a day out in which she had laughed while walking up and down an escalator—one of her favourite things to do.
- 2) But he sensed something was wrong at Isla's bedtime.
- 3) "She climbed into bed but wouldn't settle down," he told the Manchester Evening News. "It was just desperation because I knew something wasn't right."
- 4) Isla was rushed to a nearby hospital but died on 8 October last year.

#### 4. Conclusion

This case study forensic report identifies Diabetes, Addison's Disease, and health tragedies from which society can learn and understand the errors which have cost lives. Doctors and Clinicians along with Surgeons are always keen to learn from experience, errors, and patient views of personal health conditions to enable society to learn and educate new generations in the future. On the balance of probability these tragedies could have been avoided in today's NHS healthcare facility now stretched to its limit. We must learn from these experiences to prevent reoccurrence in future planned healthcare with management and Government support. Funding of further research into the helpful clinical published research observations by the University of Monash in Malaysia by project plan and input to develop a Doctor and Nurse Medical Course over 3 years as an option in part of Doctor and Nurse Clinical PhD Course to be included in Doctor and Nurse training in Diabetes is identified as a sensible way forward to address and improve Hypoglycaemia knowledge and understanding to include Cellular Environmental Health in Brain Purkinje Cells in

the Brain to assist Keto Diet, Mental Health, Neuro Health patient welfare.

Initial funding is for a student at the University of Monash for 3 years, estimated cost is \$25—\$40k then build up a recognised University Course which can be sold to students, healthcare providers.

We believe our knowledge of the subject is valuable to sell to Universities and Governments for Doctor and Lawyer training with Social Understanding Enhancement.

Certified true and correct. Derek C Beatty 2.2.2023 Edited by Dr Christina Yap.

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Prima facie evidence suggests management of information by the MCA and the BDA British Diabetic Association did not address nor involve whether or not GP's were or were not right in prescribing it. Errors in law has left some patients with T1 Diabetes at risk of poor health and put lives at risk (Corby).

Prima facie evidence suggests preparation of the LOW Task Force Report and Human Insulin Advice 1993 addressed by a Steering Committee was limited to investigation of whether insulin was properly marketed as safe having been granted MCA approval in the UK 26 August 1982.

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