



**Kally CHEEMA LLB
HER MAJESTY'S SENIOR CORONER
COUNTY OF CUMBRIA**

	<p>REGULATION 28 REPORT TO PREVENT FUTURE DEATHS</p> <p>THIS REPORT IS BEING SENT TO: Steven Eames, chief executive, North Cumbria University Hospitals NHS Trust Chief executive, Medicines and Healthcare Products Regulation Agency</p>
1	<p>CORONER</p> <p>I am Dr Nicholas Shaw Assistant Coroner for County of Cumbria</p>
2	<p>CORONER'S LEGAL POWERS</p> <p>I make this report under paragraph 7, Schedule 5, of the Coroners and Justice Act 2009 and regulations 28 and 29 of the Coroners (Investigations) Regulations 2013. http://www.legislation.gov.uk/ukpga/2009/25/schedule/5/paragraph/7 http://www.legislation.gov.uk/uksi/2013/1629/part/7/made</p>
3	<p>INVESTIGATION and INQUEST</p> <p>On 19/02/2019 I commenced an investigation into the death of Liane Davenport. The investigation concluded at the end of the inquest 4th October 2019. The conclusion of the inquest was Liane Davenport was on high doses of two anti-psychotic medications to control symptoms of chronic schizophrenia, she also had significant coronary artery disease and left ventricular dysfunction. It is most likely that her death at home, [REDACTED] Cumbria on December 4th 2019 was due to a combination of her heart disease and the high blood level of Amisulpride needed to control her schizophrenia.</p> <p>1a Coronary Artery Atherosclerosis 2 Amisulpride toxicity</p>
4	<p>CIRCUMSTANCES OF THE DEATH</p> <p>Liane had a 45 year history of Schizophrenia, and a 10 year history of Lupus with associated arthritic problems. Over the last year of her life she had had hospital admissions for sepsis associated with pneumonia and endocarditis, for which she had prolonged but successful treatment. She had however become physically frail and lost up to 10Kg weight over her final year. She had been on long term antipsychotic treatment requiring high doses of Quetiapine and Amisulpride -800mg daily of each drug – to control her mental state. It was acknowledged at inquest that the Amisulpride dose was significantly higher than the 300mg suggested by BNF but at review shortly before her death her consultant felt it was safe to continue as there had been no physical problems and her blood chemistry and ECG were within normal limits. There was no evidence to suggest she had taken more than her prescribed doses. At post mortem toxicology her plain blood Quetiapine level was 433ng/ml –within the quoted therapeutic range but her Amisulpride level was 10698ng/ml –against a suggested therapeutic upper range of 400ng/ml. [REDACTED] at Leicester comments on the the large volume of distribution for Amisulpride which may raise the level somewhat. He tells me he could not find any quoted toxic or lethal ranges but points to a reported case where a level of 9600 was survived with treatment whereas 2 fatal cases involved levels of over 40,000.</p>
5	<p>CORONER'S CONCERNS</p> <p>During the course of the inquest the evidence revealed matters giving rise to concern. In my opinion there is a risk that future deaths will occur unless action is taken. In the circumstances it is my statutory duty to report to you.</p>

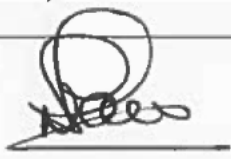
The **MATTERS OF CONCERN** are as follows. –

[BRIEF SUMMARY OF MATTERS OF CONCERN]

(1) Should monitoring of blood levels of powerful antipsychotics be considered and recommended for patients on long term high dose treatment, particularly as they become older & more frail?

(2)-----

(3)-----

6	<p>ACTION SHOULD BE TAKEN</p> <p>In my opinion action should be taken to prevent future deaths and I believe your trust/agency has the power to take such action.</p>
7	<p>YOUR RESPONSE</p> <p>You are under a duty to respond to this report within 56 days of the date of this report, namely by 17th December 2019. I, the coroner, may extend the period.</p> <p>Your response must contain details of action taken or proposed to be taken, setting out the timetable for action. Otherwise you must explain why no action is proposed.</p>
8	<p>COPIES and PUBLICATION</p> <p>I have sent a copy of my report to the Chief Coroner and to the following Interested Person, [REDACTED] [REDACTED] I have also sent it to Duncan Selbie, chief executive, Public Health England and Jim Mackey, chief executive, Northumbria NHS Trust who may find it useful or of interest.</p> <p>I am also under a duty to send the Chief Coroner a copy of your response.</p> <p>The Chief Coroner may publish either or both in a complete or redacted or summary form. He may send a copy of this report to any person who he believes may find it useful or of interest. You may make representations to me, the coroner, at the time of your response, about the release or the publication of your response by the Chief Coroner.</p>
9	<p>10/10/2019</p>  <p>Dr Nicholas Shaw Assistant Coroner County of Cumbria</p>

