



FINDING OF INQUEST

An Inquest taken on behalf of our Sovereign Lady the Queen at Adelaide in the State of South Australia, on the 25th day of February and the 22nd day of December 2011, by the Coroner's Court of the said State, constituted of Anthony Ernest Schapel, Deputy State Coroner, into the death of John Bruce Porter.

The said Court finds that John Bruce Porter aged 72 years, late of Clements House, 200 Fosters Road, Oakden died at Clements House, Oakden, South Australia on the 10th day of July 2009 as a result of inanition of terminal metastatic carcinoma of the left lung. The said Court finds that the circumstances of his death were as follows:

1. Introduction and reason for Inquest

1.1. Mr John Bruce Porter was 72 years of age when he died on 10 July 2009 at Clements House in Oakden. At the time of his death Mr Porter was detained under a continuing detention order pursuant to Section 13(1) of the Mental Health Act 1993¹. His death was therefore a death in custody within the meaning of section 21(1)(a) of the Coroners Act 2003 and this Inquest was held as required by that section.

2. Cause of death

2.1. A pathology review was undertaken by Dr Neil Langlois, a forensic pathologist with Forensic Science South Australia, who expressed the cause of Mr Porter's death as

¹ Exhibit C13e, Continuing Detention Order issued by the Guardianship Board on 18 December 2008

‘inanition of terminal metastatic carcinoma of the left lung’². I find that to have been the cause of Mr Porter’s death.

3. Background and events leading to death

- 3.1. Mr Porter had a medical history of chronic obstructive airways disease, previous pneumonia, manic depression and bipolar affective disorder. Mr Porter had been suffering from mental health difficulties since his early twenties and had been in and out of hospital since that time.
- 3.2. In 1977 Mr Porter moved to Adelaide and began attending Glenside Hospital, primarily in relation to his manic depression. He was diagnosed as suffering from a major affective psychosis that required inpatient psychiatric care under detention for most of his adult life.
- 3.3. In July 2006 Mr Porter was the subject of a continuing detention order when he was moved to Oakden Services for Older People after the ward he was staying in at Glenside closed down. He was administered olanzapine and valproate daily.
- 3.4. Physically, Mr Porter suffered from advanced lung disease due to chronic smoking and used ventolin to help him breathe. In early 2009 he was diagnosed as suffering from an extensive metastatic tumour on his brain and primary cancer of the lungs. After investigations by a specialist, it was found that the cancer was inoperable and aggressive in nature. Palliative care was instituted from that point forward.
- 3.5. Over the last couple of months before his death, Mr Porter’s cancer spread to his liver and bones and he deteriorated rapidly. He was given comfort care in the form of morphine.
- 3.6. Mr Porter died between 9:00pm and 9:30pm on Friday 10 July 2009 in the single bedroom he occupied at Oakden Services. At about 9:00pm he was noted to be asleep in his room, number G38. When checked upon again at 9:30pm he was located in his bed but was not breathing. No resuscitation was attempted at this time.
- 3.7. Mr Porter remained the subject of a continuing detention order at the time of his death with the most recent order being dated 18 December 2008 and expiring on 18 December 2009. It should be noted that this order states that the place of detention

² Exhibit C3a

was to be the Flinders Medical Centre. However, Mr Porter's treating doctor suggests that this was an administrative error and should have read Oakden Services for Older People as previous orders had done. In addition, Mr Porter's residential address was Clements House, Oakden. Mr Porter's treating doctor, Dr Fletcher Lane, confirms that, to his knowledge, Mr Porter has never been detained at the Flinders Medical Centre throughout his life. In any event there is no suggestion that Mr Porter's continuing detention had not been appropriate or that Oakden Services for Older people did not provide an appropriate level of ongoing care. The precise location for detention could easily have been the subject of administrative rectification had the error been identified.

4. Conclusion

- 4.1. I have concluded that Mr Porter's detention at Clements House was both lawful and appropriate and that whilst detained he was appropriately cared for.

5. Recommendations

- 5.1. I have no recommendations to make in this matter.

Key Words: Death in Custody; Natural Causes

In witness whereof the said Coroner has hereunto set and subscribed his hand and

Seal the 22nd day of December, 2011.

Deputy State Coroner