



FINDING OF INQUEST

An Inquest taken on behalf of our Sovereign Lady the Queen at Adelaide in the State of South Australia, on the 28th day of May and the 2nd day of November 2020, by the Coroner's Court of the said State, constituted of Brian Malcolm Nitschke, Deputy State Coroner, into the death of Christopher Raymond Hausler.

The said Court finds that Christopher Raymond Hausler aged 61 years, late of 255A Swanport Road, Murray Bridge, South Australia died at the Royal Adelaide Hospital, Port Road, Adelaide, South Australia on the 13th day of March 2018 as a result of Creutzfeldt-Jakob disease. The said Court finds that the circumstances of his death were as follows:

1. Introduction and cause of death

- 1.1. Christopher Raymond Hausler was born on 15 October 1956 and died on 13 March 2018 at the Royal Adelaide Hospital. He was 61 years old.
- 1.2. Following Mr Hausler's death, Dr Owen Siggs completed a '*Death Report to Coroner - Medical Practitioner's Deposition*' on 13 March 2018. In that report, he provided his opinion that the cause of Mr Hausler's death was Creutzfeldt-Jakob Disease (CJD). I accept Dr Siggs' opinion and find that to have been the cause of Mr Hausler's death.
- 1.3. Creutzfeldt-Jakob Disease is a fatal degenerative brain disorder which presents with memory problems, behavioural changes, poor coordination, visual disturbance and, in the late stages, dementia and eventually coma and death.¹

¹ Exhibit C3

2. Reason for inquest

- 2.1. This is a mandatory Inquest pursuant to section 21(1)(a) of the Coroners Act 2003 as Mr Hausler was subject to an Inpatient Treatment Order (ITO) at the time of his death. A Level 1 ITO had been made pursuant to section 21 of the Mental Health Act 2009 by Dr Katherine Grant at the Royal Adelaide Hospital on Friday, 23 February 2018.² The order was reviewed and confirmed by psychiatrist Dr Maree De Jong on 23 February 2018. The Level 1 ITO expired on 2 March 2018.
- 2.2. A Level 2 ITO was instituted by Dr Maree De Jong on 2 March 2018.³ This order was due to expire at 2pm on 13 March 2018 and was therefore current at the time of Mr Hausler's death. His death was therefore a death in custody as defined in the Coroners Act 2003.

3. Background, medical history and Mr Hausler's diagnosis of CJD

- 3.1. Mr Hausler and his wife of 41 years, Heather, lived in Murray Bridge where Mr Hausler was employed by the Mid Murray Council. They had three adult daughters, Rebecca, Alison and Bianca.⁴
- 3.2. Mr Hausler suffered from diabetes and was prescribed medication to manage this condition, along with his cholesterol and blood pressure, but overall, he was in relatively good health.⁵
- 3.3. In around November 2017, Mr Hausler started to experience a decline in his memory. Mr Hausler attended on his general practitioner, Dr Aldyni, in Mannum complaining of poor concentration for the previous fortnight, as well as hearing an echo in his head. Mr Hausler reported being under a lot of stress at work. Dr Aldyni conducted an examination of Mr Hausler's ears, mouth, nose and neck, all of which were normal. Mr Hausler's blood pressure was stable. Dr Aldyni concluded that Mr Hausler may have been overworked and exhausted. He advised Mr Hausler to have rest from work and to keep hydrated and return to see him if he did not improve.⁶

² Exhibits C3 and C7a

³ Exhibit C7b

⁴ Exhibit C2

⁵ Exhibit C5

⁶ Exhibit C5

- 3.4. Mr Hausler sought a second opinion from Dr Peter Rischbieth at the Bridge Clinic on 15 January 2018. He presented with trouble with his speech and memory. Mr Hausler was not able to properly form sentences and his wife, who was present, had to do most of the talking for him. Dr Rischbieth referred Mr Hausler for a brain scan, chest X-rays and blood tests.⁷
- 3.5. Dr Rischbieth saw Mr Hausler again two days later on 17 January 2018. The brain scan results were normal as were the blood tests. The chest X-ray showed Chronic Obstructive Pulmonary Disease, however this did not account for Mr Hausler's symptoms. Dr Rischbieth referred Mr Hausler for an urgent neurology appointment.
- 3.6. Mr Hausler travelled to New Zealand with his wife on a cruise from 28 January to 11 February 2018. Mr Hausler's wife noticed her husband's health deteriorate during the cruise. He was forgetting things and his speech was becoming harder for her to understand. Upon their return to Australia Mr Hausler had trouble signing his name at customs.⁸
- 3.7. Mr Hausler attended an appointment with Dr Rischbieth on 14 February 2018 and reported having increased difficulty with his memory and writing. Dr Rischbieth observed there had been a rapid decline in Mr Hausler's presentation, in particular, his memory, speech and movement. An MRI scan of Mr Hausler's brain showed a volume loss of soft tissue in the brain, referred to as cerebral atrophy.⁹
- 3.8. On 22 February 2018, Dr Rischbieth followed up with Mr Hausler who was still unable to acquire a neurology appointment. Dr Rischbieth telephoned the Royal Adelaide Hospital and spoke to neurologist, Dr Martin Robinson. Following his conversation with Dr Robinson, Dr Rischbieth was so concerned about Mr Hausler's condition that he advised him to attend the Emergency Department of the Royal Adelaide Hospital. Dr Rischbieth also wrote to Dr Eddie Chung, the Neurology Registrar at the Royal Adelaide Hospital, on 22 February 2018 requesting that Mr Hausler be admitted for further investigation as to his cognitive decline and poor motor function.
- 3.9. Mr Hausler attended at the Royal Adelaide Hospital and was admitted on 22 February 2018. He presented with rapidly deteriorating dementia, global aphasia¹⁰ and dystonia,

⁷ Exhibit C4

⁸ Exhibit C2

⁹ Exhibit C4

¹⁰ Damage to the left side of the brain that affects receptive and expressive language skills

(a neurological movement disorder that causes muscles in the body to contract or spasm involuntarily).

- 3.10. Dr Katherine Grant instituted a Level 1 ITO on 23 February 2018 following a code black¹¹ involving Mr Hausler attempting to hit nursing staff, throwing objects and attempting to leave the ward.
- 3.11. Dr Grant made the order to ensure treatment for Mr Hausler as well as for his protection and the protection of others. A guard was placed outside of Mr Hausler's room and he was allocated a nurse special to monitor him on a one-on-one basis.
- 3.12. Further code blacks were called due to Mr Hausler's behaviour on 23 and 24 February 2018. This behaviour was clearly a result of Mr Hausler's illness and bore no reflection to his usual manner.
- 3.13. A lumbar puncture procedure was conducted on 24 February 2018 to obtain a sample of cerebrospinal fluid for testing.
- 3.14. The Level 2 ITO dated 2 March 2018 was instituted due to Mr Hausler's rapid onset of a neurodegenerative condition that resulted in displays of impulsive, confused, disorientated and agitated behaviour. He remained a risk to himself and others and could not be safely managed without treatment and management in hospital.¹²
- 3.15. The results from the lumbar puncture procedure were received on 8 March 2018 and indicated Mr Hausler had sporadic Creutzfeldt-Jakob disease.¹³ Mr Hausler's family were notified of the diagnosis and the resulting prognosis. Following discussion with the Palliative Care team, and with consent from Mr Hausler's wife, palliative measures were initiated on 9 March 2018.
- 3.16. Mr Hausler continued to require close complex nursing care to manage his behaviour and to keep him safe due to his aggressive and agitated behaviour. He was also at risk of falls due to his deteriorating motor skills.
- 3.17. Mr Hausler's oral intake of foods and fluids were persistently low, with a progressive decline. Mr Hausler passed away on the morning of 13 March 2018.¹⁴

¹¹ A Code black is a personal threat, for example assault, violence, threatening behaviour

¹² Exhibit C7b

¹³ Exhibit C8

¹⁴ Medical Practitioner's Deposition of Dr Owen Siggs; Royal Adelaide Hospital Notes

4. Coronial investigation

- 4.1. Brevet Sergeant Edward Schonfeldt from the Murray Bridge Criminal Investigation Branch of SAPOL investigated the death of Mr Hausler and prepared a comprehensive report for the State Coroner¹⁵. Brevet Sergeant Schonfeldt did not identify any issues of concern regarding the treatment and medical care of Mr Hausler at the Royal Adelaide Hospital.
- 4.2. I make mention that in Mrs Hausler's statement she raised concerns regarding the lack of continuity with the nursing staff used to 'special'¹⁶ her husband. She also felt that the nurses did not engage with Mr Hausler to try to work out what he was saying. In considering this issue it is important to note that the nurse special was utilised primarily to prevent Mr Hausler from harming himself. In addition, his behaviour and impaired communication abilities because of his deteriorating condition would have caused considerable difficulties. Whilst unfortunate, it does not represent a deficiency in the care provided to Mr Hausler.

5. Conclusion

- 5.1. I find that Mr Hausler was in lawful detention at the time of his death. I further find that the care and treatment afforded to Mr Hausler whilst detained at the Royal Adelaide Hospital was appropriate in the circumstances.
- 5.2. I have no need to make recommendations in this matter.

Key Words: Death in Custody; Natural Causes; Inpatient Treatment Order

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

Seal the 2nd day of November, 2020.

Deputy State Coroner

¹⁵ Exhibit C7

¹⁶ One-on-one nursing care