

1 B.C.22

2 assistance one way or the other because of the rapidity of  
3 death?

4 A. No, I didn't say that, My Lord, at all. What I said  
5 was that this syndrome is not associated with a sudden  
6 rapid demise in the space of a matter of minutes. It is a  
7 condition that develops often over a period of days and in  
8 which these signs become emphasised, and which can then  
9 be seen at post mortem.

10 Q. If he had very high temperature over the previous  
11 days it may have been? A. Then one would have  
12 expected to have seen changes in the liver, kidneys and  
13 brain at post mortem.

14 Q. Or there is an alternative possibility that it  
15 manifested itself with great rapidity because of the  
16 dosage? A. I don't know of any case that that  
17 has occurred. In my experience of dealing with this  
18 syndrome and we have had some is that there are changes  
19 that are apparent and can be detected. In the cases that  
20 have been examined in the Department of Neuropathology  
21 in the Royal, there were all changes apparent in the brain.

22 Q. Likewise in none of those cases was there a rapid  
23 death from improvement? A. Correct.

24 Q. Finally, in terms of the circumstances that might  
25 have given rise to this axonal injury, you said that a fall  
26 accelerated by a punch could cause it?

27 A. Yes. What I said was that the view taken again is  
28 that a simple fall from a person's own height, in other  
29 words, if you fall down onto the ground will not cause this,

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