IN THE CORONERS COURT
OF VICTORIA
AT MELBOURNE

Court Reference: 5107/07

FINDING INTO DEATH WITH INQUEST

Form 37 Rule 60(1)
Section 67 of the ***Coroners Act 2008***

Inquest into the Death of KENNETH AGNEW

Delivered On:	30 April 2012
Delivered At:	Coroners Court of Victoria Level 11, 222 Exhibition Street Melbourne Victoria
Hearing Dates:	14 October 2009
Findings of:	JOHN OLLE, CORONER

Police Coronial Support Unit: Leading Senior Constable Hose

10. On the 4th November, 2007, Mrs Sui was concerned about the excessive alcohol intake of Mr Agnew. She made an entry in the Total Care Plan on 4/11/2008 noting:

"Kenneth still drinking heavily in his room."

11. Her Action Plan stated:

"Manager told him not to drink in his room, otherwise there would be potential fatal side effects alongside his medication."

12. Mrs Sui believes she would have told Dr Lum of Mr Agnew's alcohol problem. Of note, Mrs Sui and Dr Lum communicated regularly, including 4th November, 2007, when Dr Lum consulted Mr Agnew.

13. Dr Lum had access to the Ferntree Manor file in which she made the entry referred to above.

14. Mrs Sui acknowledges that Dr Lum would have not ordinarily read the Care Plan when making his entries in the Progress Notes section of the file.

Dr Lum

15. Dr Lum consulted Mr Agnew on a number of occasions from July until December, 2007. Ordinarily, he would only consult residents who did not have a general practitioner. He made an exception in the case of Mr Agnew whom he treated for minor complaints. He acknowledged, however, on several occasions he altered Mr Agnew's psychotic medication and also referred him to a Liver Disease Specialist.

16. Dr Lum did not advise Dr Kavanagh who he believed was Mr Agnew's treating general practitioner. He accepted he should have.

17. Dr Lum:

- Didn't know the deceased was on a methadone program
- Didn't know the deceased abused alcohol
- Says he would have been very concerned about both methadone and alcohol abuse, had he known and would not have altered his medication. He would have insisted Mr Agnew return to his general practitioner
- He should have advised Dr Kavanagh he altered the medication regime, and that he referred Mr Agnew to a liver specialist
- Agrees that general practitioners who are licensed to prescribe methadone must access a full history of medications being prescribed.

18. In this case:

25. Dr Robertson commented:

> *"This 37 year old male, Kenneth Agnew, died from the combined toxic effects of ethanol and a number of drugs including methadone and benzodiazepines. The deceased had underlying positive hepatitis C serology. This is seen in association with chronic intravenous drug abuse. There was also marked fatty change of the liver.*
>
> *No other significant natural disease was identified."* [2]

Finding

I find the cause of death of Kenneth Agnew to be combined ethanol and drug toxicity.

I direct that a copy of this finding be provided to the following:

Senior Next of Kin
Dr Lum
Dr McRae
Ms Li Ling Sui
Mr Stephen Lanini, Eastcare (Salvation Army).

Signature:

JOHN OLLE
CORONER

Date: 30 April, 2012

[2] Page 6, Post Mortem report