

Witness Name: Sam
Shuster
Statement No.:
Exhibits:
Dated: 31/10/2024

THIRLWALL INQUIRY

WITNESS STATEMENT OF Prof Sam Shuster

I, Sam Shuster, will say as follows: -

1. The need for a detailed review of the post-mortem procedures

Since Letby has been found guilty of murdering babies in her care, the post-mortem reports of death from natural causes cannot be correct (I exclude the possibility that Letby discovered murder methods that simulate the "natural causes" reported). Furthermore, the post-mortem defects reported in the babies in Letby's care who died suddenly and unexpectedly, are not those found in neonates suffering sudden unexpected death in whom defects were found in 58%, and 40% of these were congenital cardiac abnormalities (*Weber MA, Ashworth MT, Risdon RA et al. Sudden unexpected neonatal death in the first week of life: Autopsy findings from a specialist centre. J Matern Fetal Neonat Med ; 2009; 22(5): 398-404*).

These facts suggest an error in the post-mortem procedure, such as failure to carry out the procedure adequately, unreliability of the conclusions from them and failure of their proper consideration with the clinicians in charge.

This will have delayed suspicion, police involvement and arrest of Lucy Letby, thereby allowing her to continue murdering, and is therefore relevant to the Thirlwall Inquiry's terms of reference. If, as I suspect, failure of post-mortem procedures is found by the Inquiry to have been a major factor in the Letby murders, its correction should facilitate prevention.

2. Evidence of inadequate post-mortem procedures

i) It appears that a post-mortem thought to be necessary was not done on one baby because the physician in charge didn't wish to upset the parents. A similar reluctance could be a factor in the greatly decreased use of post-mortem investigation in hospitals since the end of the last century. Decreased use reduces skill, and because this may be relevant to the Letby murders, the social and technical reasons for this change in post-mortem practice in hospitals, and its adverse effect needs further examination.

ii) In the other six babies, the clinical and post-mortem findings were contradictory: all the babies were in a clinically stable condition, and death was not expected; yet, in stark contrast, the pathologists reported findings gross enough to cause death by natural causes.

iii) Such an extreme difference of clinical and pathological opinion is exceptional, and an explanation should have been sought immediately by discussion between clinicians and pathologists, preferably in the post-mortem room. I have seen no evidence of this.

iv) There is a need for more evidence of the attempts made to resolve uncertainty about a number of post-mortem findings, e.g. the physical damage to the livers of two babies, likewise the appearance of the skin and its relationship to vascular blockage by air embolism – was a request made for a specialist opinion, or photographs taken for identification, e.g. to exclude *erythema ab igne*, a dermatological consequence of blocked blood vessels?

v) There are different types of post-mortem examination corresponding to clinical as well as pathological questions; further evidence is needed on awareness of the possible need for a forensic examination.

vii) The post-mortem reports of death by natural causes were not upheld when reviewed in court. This is curious, and so is the failure of the defence to use the reports as evidence of innocence. Both suggest awareness that the post-mortem procedures were unreliable; this needs further investigation.

viii) The evidence now available does not answer many of the questions relevant to the post-mortem procedures. Therefore, direct questioning about the whole procedure, including discussions between clinicians and pathologists at the time and thereafter is needed, and all written notes and other communications should be submitted for examination.

3. Consequences of failure of the post-mortem procedure

In addition to delayed detection and prevention (section 1 above), in the absence of immediate post-mortem evidence the prosecution case was indirect. This allowed expression of technical quibbles about insulin measurement, statistical analyses that suggested Letby's presence at the deaths was chance and the use of "experts" such as statisticians in future trials (although their analysis has been shown to be incorrect), media indulgence and public protests. These have not served the administration of justice.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

Signed: __ Sam Shuster _____

Dated: _31/10/2024_____