

Day 50 - Wednesday, 14 December 2022

Witness statement of DR STAVROS STIVAROS (read)

MR ASTBURY: The next statement, my Lord, is the statement of Stavros Michael Stivaros. In his report Dr Stivaros says this:

"I am Stavros Michael Stivaros. My specialist field is paediatric neuroradiology. I am the lead consultant paediatric neuroradiologist at Royal Manchester Children's Hospital, which is one of the largest paediatric teaching hospitals in Europe.

"I have researched into paediatric neuroimaging and I am professor of paediatric neuroradiology and translational imaging at the University of Manchester. I hold a clinical contract as an honorary consultant paediatric neuroradiologist at the Royal Manchester Children's Hospital. My clinical duties include the routine clinical reporting of paediatric brain and spine scans, of which I routinely report approximately 2,500 per year.

"As part of my duties I report the majority of the neuroradiological imaging pertaining to suspected non-accidental injury that presents to the royal Manchester Children's Hospital as well as supra-regional peer reviews of said imaging due to our role as a tertiary referral centre. I also routinely report

brain imaging looking for abnormalities which may relate to birth asphyxia.

"[Baby G] was born extremely prematurely. Despite this, neuroradiologically, she appeared to be well until the ultrasound scan performed on 8 September 2015. Prior to that scan, no significant brain abnormality had been detected. I defer to my expert neonatal colleagues' opinions in regards to the clinical events that occurred on 7 September 2015.

"From a brain imaging perspective, the imaging from that point onwards was in keeping with [Baby G] having suffered a significant global hypoxic ischaemic injury to her brain.

"The scans cannot determine a cause for this injury. The event that occurred on 21 September 2015 may or may not have contributed to the brain injury that [Baby G] had already suffered from. This cannot be determined from the scans given the extensive nature of the injury already suffered and identified on the MRI scan dated 15 September 2015.

"As evidenced by the scan of 12 August 2016, [Baby G] has suffered a severe and profound brain injury from which she will not recover."

My Lord, I am invited, and will include, the chronology that follows in the statement, which is as follows. It deals with the chronology of [Baby G]'s scans:

"Between birth and 15 September 2015 [this is 2.7],

[Baby G] had multiple cranial ultrasound scans. There was a further ultrasound scan dated 1 June 2015. There was an ultrasound scan dated 4 June 2015. The following day, 5 June, a repeat ultrasound scan was performed by Oliver Rackham. On 6 June 2015, Sarah Thompson performed a repeat scan on [Baby G]. Sixteen images are presented for review from 9 June 2015. These again show no significant change in appearances as reported by Naomi Eastwood as follows:

"Cranial ultrasound, normal midline. Normal gyral pattern for gestation. No intraventricular haemorrhage. Normal ventricular size. Will repeat scan in 14 days.'

"On 12 June 2015 Pek Wan Lee performed a repeat scan. [Pek Wan Lee] was able to better assess the brain on 14 June 2015. [Baby G] remained stable and as such no further imaging was undertaken until 29 June 2015. The scan was performed as she had a pulmonary haemorrhage.

"[Baby G] did not have any further imaging until 31 July 2015. An ultrasound was undertaken on 3 August 2015. On 13 August 2015 [Baby G] was transferred to the Countess of Chester Hospital. [Baby G] was then re-transferred to Arrowe Park Hospital for full intensive care measures. This occurred at 00.30 hours on 8 September 2015. She had a further ultrasound scan performed later that day.

"An MRI scan of her brain was performed on 15 September 2015. The final brain scan that [Baby G]

had was an MRI scan dated 12 August 2016."

So that's the chronology upon which Dr Stivaros  
based his opinion.

MR JUSTICE GOSS: Yes.

MR ASTBURY: That concludes the statements to be read.