

Through Special Messenger

Regular Matter

Copy of order

No. 5041/W /DHC/WRITS/D-3/2013

Dated 25/2/13

From

The Registrar General
High Court of Delhi
New Delhi.

To

1. Ms. Ritu Kumar, Counsel for the Petitioner, 576, Masjid Road, Jangpura, New Delhi-14.
2. Mr. N. Waziri, Counsel for R-1 to 4, 6 & 7, Chamber No. 423, Lawyers Chamber Block, Delhi High Court, New Delhi.
3. Mr. Mehmood Pracha, Counsel for AllMS, Chamber No. 134, Patiala House Court Complex, New Delhi.

WRIT PETITION (CIVIL) NO. 3146/2012

Sh. Jose Abraham

...Petitioner/s

Vs.

Govt. of NCT & ors.

...Respondent/s

Sir,

I am directed to forward herewith for information and immediate compliance/necessary action a copy of order dated **20.2.2013** passed by Hon'ble **Division Bench** of this Court in the above noted case alongwith a copy of Memo of Parties and copy of report of The Learned District Judge dated 12.2.13.

Please acknowledge receipt.

Yours faithfully

R Dhanraj 24/2/13

Assistant Registrar (Wrts)

for Registrar General

OR

AB/22 2.13

IN THE HIGH COURT OF DELHI AT NEW DELHI

ORIGINAL WRIT JURISDICTION

WRIT PETITION (C) NO. ³¹⁴⁶ OF 2012

IN THE MATTER OF PUBLIC INTEREST LITIGATION

NO. Of 2012

MEMO OF PARTIES

Jose Abraham,

S/o Shri P.M. Abraham

R/o P-15B, Jungpura Extn.

New Delhi – 110014

...Petitioner

VERSUS

1. GOVT. of NCT

Through its Principal Secretary

Prison Department

Delhi-110058

...Respondent No. 1

2. Director General of Prisons

Police Head Quarters,

Tihar Jail,

New Delhi- 110058

...Respondent No. 2

3. Superintendent,

Central Jail No. 4,

Tihar, New Delhi- 110058

...Respondent No. 3

4. SMO,

Central Jail No. 4,

Tihar, New Delhi-110058

...Respondent No. 4

5. Superintendent of AIIMS,

Aurobindo Marg

New Delhi- 110029

...Respondent No. 5

6. Superintendent of DDU

Deen Dayal Upadhyay Hospital.

Harinagar, New Delhi-110064

...Respondent No. 6

7. Ministry of Health and Family Welfare

Through its Secretary

9th Level, Delhi Secretariat,

T.P. Estate, New Delhi – 110002

...Respondent No. 7

8. National Human Rights Commission

Through its Chairperson

Faridkot House, Copernicus Marg,

New Delhi, PIN 110001

...Respondent No. 8

Filed by:

Petitioner,

Through,

Ritu Joishu
RITU KUMAR/AMIY SHUKLA

SVETLANA CORREYA/SUMA SEBASTIAN

ADVOCATES FOR THE PETITIONER,

576 MASJID ROAD, JUNG PURA,

NEW DELHI-14

DATED: 4/5/2012

PLACE: NEW DELHI

TRUE COPY

or

EXAMINER

\$~2.

* **IN THE HIGH COURT OF DELHI AT NEW DELHI**

+ W.P.(C) 3146/2012

JOSE ABRAHAM

..... Petitioner

Through: Ms.Ritu Kumar, Adv.

Versus

GOVT OF NCT AND ORS.

..... Respondents

Through: Mr.N.Waziri, Adv. with Mr.Vikrant Pachnanda, Adv. for R-1-4, 6&7.

Mr.Sumit Babbar, Adv. for Mr.Mehmood Pracha, Adv. for AIIMS.

Ms.Madhurima Ghosh, Adv. for Ms.Mrinalini Gupta, Adv. for DDU Hospital.

CORAM:

HON'BLE THE CHIEF JUSTICE

HON'BLE MR. JUSTICE V.K. JAIN

ORDER

20.02.2013

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Report of the learned District Judge dated 12.02.2013 is filed. The same is taken on record. A copy of the said report be furnished by the Registry to counsel for the parties. Response, if any, be filed within four weeks from today.

For further hearing, list this matter in the category of 'Regular Matters' at its turn.

sd/

CHIEF JUSTICE

sd/

V.K. JAIN, J

FEBRUARY 20, 2013

'anb'



IN THE COURT OF SHRI I.S. MEHTA,
DISTRICT & SESSIONS JUDGE,
NEW DELHI DISTRICT, NEW DELHI.

Miscellaneous Application No. : 09/12

Jose Abraham Vs. 1. Govt. of NCT
Through its Principal Secretary
Prison Department
Delhi-110058.

2. Director General of Prisons,
Police Head Quarters,
Tihar Jail,
New Delhi-110058.

3. Superintendent
Central Jail No. 4,
Tihar, New Delhi-110058.

4. SMO
Central Jail No. 4,
Tihar, New Delhi-110058.

5. Superintendent of AIIMS,
Aurobindo Marg,
New Delhi-110029.

6. Superintendent of DDU,
Deem Dayal Upadhyay Hospital,
Harinagar, New Delhi-110064.

7. Ministry of Health and Family
Welfare,
Through its Secretary
9th Level, Delhi Secretariat,
I.P. Estate, New Delhi-110002.

8. National Human Rights
Commission
Through its Chairperson
Faridkot House, Copernicus
Marg, New Delhi-110001.

For Petitioner : Ms. Ritu Kumar , Ld.
Counsel for the petitioner.

For Respondents : Sh. Atul Rathi, Ld.
Counsel for the respondents No. 1 to 4.
Ms. Mrinalini Sen Gupta, Ld. Counsel for
the respondent No. 6.

INQUIRY REPORT

1. This is a inquiry report as directed by the Hon'ble High Court of Delhi in W.P.(C) 3146/2012 vide order dated 18.7.2012 in the matter Jose Abraham Vs. Govt. of NCT and others.

2. Precisely, the brief facts stated are that the deceased V.R. Santosh Kumar @ Anand Raghvan was a resident of State of Kerela. He consumed acid (poisonous substance) in the year 2002 due to which his oesophagus got burnt and he was not in a position to eat, drink or consume food through his mouth. He could not even swallow his own saliva. Consequently a gastrostomy feeding tube (jejunostomy tube) was placed in his stomach for feeding purposes. After placing gastrostomy feeding tube (jejunostomy tube) he was totally dependent on the liquid food which was to be fed through the said tube. The deceased i.e. V.R. Santosh Kumar somewhere in the year 2009 came to Delhi.

3 Deceased V.R. Santosh Kumar was a destitute and was living in home for ill and destitute at Bhai Veer Singh Marg, New Delhi (Old Age Home). A fire took place in the said old age home on 20.12.2010 in which one person was died due to the fire injury caused on his person. An FIR bearing No.244/2010 dated 20.12.2010 regarding the said fire

incident was registered with the PS Mandir Marg. During the investigation of the said FIR the involvement of the deceased i.e. V.R. Santosh Kumar was suspected and he was arrested on 20.12.2010 u/s 302/307/324/436 IPC. He was sent to JC in Jail No. 4, Tihar, New Delhi.

4. When the deceased V.R. Santosh Kumar was initially sent to the jail, the jail authorities did not provide a grinder to break down the food. However, later he was provided with a grinder and a special diet by the jail authorities by the order of the Court. In December 2011 health of Santosh Kumar was started deteriorating. It is around this time that his special diet was also cancelled by the Senior Medical Officer of Jail no. 4, Central Jail, Tihar. The tube in his stomach has also started leaking and Santosh Kumar lost around 20 kg weight in a span of two months but the prison authorities turned a blind eye to his condition. On 9.1.2012 Santosh Kumar made a representation to the court of Sh. Lal Singh Ld. ASJ, Delhi and the Ld. Judge directed the jail authorities to take Santosh Kumar to AIIMS for necessary treatment but the jail authorities ignored the said order. Finally upon the court intervention he was taken to AIIMS on 16.1.2012. In AIIMS Santosh Kumar was further diagnosed with tuberculosis and anti tubercular treatment was started from 7.2.2012. He was discharged from the AIIMS on 14.2.2012 and sent back to jail. However he had to be admitted in Deen Dayal Upadhaya Hospital on the same day and he was found to be extremely unwell to be kept in jail. He ultimately died in DDU hospital on 25.2.2012. The court was informed by the jail authorities on 29.2.2012 about the death of Santosh Kumar on 25.2.2012.

5 In all 18 witnesses have been examined in this inquiry. PW1 is Dr. Anil Kumar Garg, PW2 is Dr. Vaibhav, PW3 is Dr. Sameer Kapoor, PW4 Dr. Neeti Jail, PW5 is Dr. Puneet Chhibber, PW6 Asst. Dietician, PW7 is Dr. S. N. Mishra all from DDU Hospital, New Delhi, PW8 is Dr. Ram Rattan Rathi SMO Central Jail No. 8 & 9 Tihar, N. Delhi, PW9 is Dr. Ajay Kumar DDU Hospital, PW10 is Dr. Rabindra Kumar MO Central Jail Tihar, PW11 is Mrs. Jolly George Staff Nurse Central Jail, Tihar, PW12 is Rajesh Kumar (earlier working as nursing orderly in Central Jail Tihar), PW13 is Dr. Amit Kumar from AIIMS, PW14 is Dr. Rahul Rajput SMO Central Jail No. 4, Tihar, PW15 is Dr. Satya Prasad Samantaray of AIIMS, PW16 is Dr. Vikas Kumar Raj the then SMO CJ-4, Tihar, PW17 is Sister Suma Jose and PW18 is Sh. Shinu Joseph. Besides that affidavits of Shinu Joseph, Jose Abraham, Jacob Phillips, Sonu Singh and Suma Jose, the five witnesses who had seen the condition of the deceased were also filed. The affidavits are Ex. PW8/A to PW8/D and Ex. PW17/A.

6 I have heard the counsel for the parties.

7 Sh. Atul Rathi, Counsel for the respondent no.1 to 4 has submitted that deceased i.e. V.R.Santosh Kumar first time entered the custody of Central Jail No.4 on 20.12.2010 as medically sick inmate. As per medical report V.R.Santosh Kumar was referred to DDU Hospital on 22.12.2010 for displaced gastrostomy feeding tube/jejunostomy tube where his gastrostomy feeding tube/jejunostomy tube, was replaced. He was being regularly given 1 liter milk, one loaf bread, two eggs per day and boiled food as per advise from the dietician of the G.B.Pant hospital. On 29.9.2011 he was reviewed in G.B.Pant hospital Department of

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G.I.Surgery and as per the advise of the concerned doctor " no surgical intervention required" As per medical records the patient reported at CJ no. 4 dispensary on 1.1.2012 for complaint of leaking from the perigastrostomy site for which he referred to DDU hospital Emergency immediately. He was referred to DDU hospital emergency, Dept for Peritubular leakage on 17.1.2012 where he was advised admission but patient refused for admission. He was sent to Gastro Surgery Dept of AIIMS on 16.1.2012 where he was advised blood investigation and chest x-ray and need for possible admission. It is further submitted by the counsel for respondent no.1 to 4 that the deceased i.e. V.R.Santosh Kumar was sent to Gastro Surgery Dept of AIIMS where he got admitted till 8.2.2012. During the course of investigation at AIIMS the patient was diagnosed with pulmonary tuberculosis and anti tubercular treatment was started from 7.2.2012. On 9.2.2012 the patient was referred to DDU emergency for unexplained hypotension where he got admitted till 13.2.2012. On 15.2.2012 he was referred to DDU hospital emergency from Central Jail hospital CJ no.3 for leakage in gastrostomy feeding tube as per records. It is further submitted that his gastrostomy feeding tube was fixed and antiseptic dressing was done and was advised to continue anti tubercular treatment, feeding via gastrostomy feeding tube and was discharged from DDU hospital on 15.2.2012. On 15.2.2012 at about 9.10 pm patient was again referred to DDU hospital emergency from Central Jail hospital CJ no.3 for complaint of drowsiness with low B.P and pulse and dehydration, his random blood sugar was 24 mg/dl as per record of CJ no.3. He got admitted in DDU hospital on the same day. On 22.2.2012 information received from DDU hospital regarding the critical condition of the patient. It is further submitted by the learned



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counsel for respondent no. 1 to 4 that as per wireless message received from DDU hospital the abovesaid patient expired at DDU hospital on 25.2.2012.

8 It is further submitted that the deceased i.e. V.R.Santosh Kumar was provided with necessary medical facility and he was being provided by the diet prescribed by the Medical authority without any break. It is further submitted that in view of the direction given by the court vide order dated 23.1.2012 the warm cloths, nursing, orderly/attendant has been provided to the deceased i.e. V.R.Santosh Kumar. It is further submitted that the Jail administration has done its level best in providing the best medical facility to the deceased.

9 It is further submitted that there is no negligence on the part of prison authority in providing the treatment to the deceased i.e. V.R.Santosh Kumar. It is further submitted that the cause of death of deceased i.e. V.R.Santosh Kumar is natural.

10 It is further submitted by learned counsel for respondent no. 1 to 4 that the case has been filed to gain popularity. It is further submitted that jail authorities and medical staff have performed their duties under the rules and procedures and have provided the best medical treatment available to deceased i.e. V.R.Santosh Kumar.

11 Ms. Mrinalini, Ld. Counsel for respondent no.6 submitted that the answering respondent has not committed any negligence and has made diligent efforts to treat the deceased i.e. V.R.Santosh Kumar. It is



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further submitted that there was no delay in the treatment of deceased i.e. V.R.Santosh Kumar and that he was given correct medicine for T.B. Shortly prior to his death the deceased i.e. V.R.Santosh Kumar was admitted in the respondent no.6 hospital from 9.2.2012 till 13.2.2012. He was discharge from AIIMS hospital on 8.2.2012 after a period of nearly three weeks at AIIMS in a stable condition.

12 The deceased i.e. V.R.Santosh Kumar was again brought to the hospital in the morning on 15.2.2012 with the complaint of leakage in gastrostomy feeding tube/jejunostomy tube which was fixed and he was discharged accordingly. The deceased i.e. V.R.Santosh Kumar was again brought to the answering respondent hospital and was admitted in the ICU on 16.2.2012 until his expiry on 25.2.2012. It is vehemently argued by counsel for respondent no. 6 that the patient died a natural death.

13 It is further submitted that it is unlikely that the deceased i.e. V.R.Santosh Kumar had septicaemia. Dr. Sameer (PW 3) in his affidavit on 17.1.2013 stated that here were neither any microbs nor any toxin in the deceased i.e. V.R.Santosh Kumar urine report and therefore, one cannot conclusively state that the deceased i.e. V.R.Santosh Kumar had septicaemia.

14 It is further submitted by counsel for respondent no.6 that the petitioner has deliberately mislead this Hon'ble Court by alleging that sepsis (septic) was suspected on 21.2.2012 and was not treated, which is contrary to the record. In light of the above arguments the counsel for respondent No. 6 submits that there has been no negligence on the part

bale

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(poisonous substance) in the year 2002 due to which his oesophagus got burnt and he was not in a position to eat, drink or consume food through his mouth. He could not even swallow his own saliva. Consequently a gastrostomy feeding tube (jejunostomy tube) was placed in his stomach for feeding purposes. It is further stated that deceased UTP Santosh Kumar somewhere in the year 2009 came to Delhi for further treatment and he received certificate of disability from the department of Gastrointestinal Surgery on 25.2.2009. It is further stated that he was a destitute and was living in home for ill and destitute at Bhai Veer Singh Marg, New Delhi (Old Age Home). There was a fire took place in the said old age home on 20.12.2010 in which one of the occupant was died due to the fire injury caused on his person and an FIR bearing No.244/2010 dated 20.12.2010 regarding the said fire incident was registered with the PS Mandir Marg. During the investigation of the said fire incident, the involvement of the deceased was suspected and he was arrested on 20.12.2010 U/s 302,307,324 and 336 IPC and he was sent to judicial custody in jail no. 4, Tihar, N. Delhi.

Delhi

19 The wireless message dated 26.2.2012 and Death Summary Record dated 25.2.2012 medical mullaiza report Ex. PW8/D shows that deceased Santosh Kr. UTP was sent to Tihar Jail on 20.12.2010 and his height was 165 cms and weight was 58 Kgs. On medical examination his health was found to be stable and he was taken as inmate in the normal course with the report that UTP was having corrosive injury to oesophagus which means he cannot take food orally. He can take liquid diet through the jejunostomy tube. The placement of the jejunostomy tube on his person is evident at the time of admission of Santosh Kumar

22/10

UTP in Tihar Jail on 20.12.2010. He was referred to DDU hospital for replacement of the jejunostomy tube on 22.12.2010 and his tube was replaced in DDU hospital on 22.12.2010 at 3.00 PM.

Loss of Weight

20 The deceased Santosh Kumar UTP was sent to the JC on 20.12.2010 when his weight was monitored vide first Mullaiza report Ex. PW8/D to be 58 KG and the Jail Administration was supposed to follow the procedure laid down in Jail Prison Chapter 14 (Medical Administration) Rule 16 of 1988 for monitoring the weight of the inmates. Thereafter the weight of Santosh Kumar UTP was monitored on 7.2.2011 where his weight is shown to be 5 kg less than what he was having at the time when he entered the jail for the first time. Thereafter there is no document on record to show that his weight was regularly monitored by the jail authorities as per Jail Prison Chapter 14 (Medical Administration) Rule 16 of 1988.

21 The website of the Delhi Government of Tihar Jail as on 13.12.2012 shows that total number of inmates are 12,113 whereas its capacity is 6,250/- only and the annual death of the inmates in the Tihar Jail is 21 in 2006, 33 in 2007, 13 in 2008 and 15 each in 2009 and 2010.

22 The weight of the deceased Santosh Kumar UTP came to light subsequently when his weight was monitored by AIIMS hospital and not by the jail authorities that he has lost 30 Kg of weight after his admission in Tihar Jail within a span of 15 months. It is something very

ehk.

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serious which the jail authorities should have taken care of it but it is either the over admission in Tihar Jail or the reasons best known to them the weight of deceased Santosh Kumar UTP could not be monitored as there is lack of co-ordination between the Jail Administration Office and the Medical Superintendent of the Jail Hospital/Dispensary. As such there has to be complete centralization of the computer systems within the Tihar Jail itself to connect the Medical Superintendent of Tihar Jail Hospital/Dispensary and Superintendent Jail of Tihar by which all the data of inmates could be stored.

Causes of loosing weight.

23 Generally it is found that the causes of loosing weight is because of two reasons i.e. malnutrition and other one is due to catching of bacterial diseases.

Malnutrition

24 The deceased Santosh Kumar UTP was a patient in the Tihar Jail Hospital who was having jejunostomy tube in his stomach and could not take food from his mouth. He was totally dependent on the liquid diet to be placed through the jejunostomy tube from day one when he was brought to Tihar Jail. The jail authorities was in the knowledge of this fact vide document Ex. PW8/D Medical Mullaiza Report that deceased Santosh Kumar UTP could not take food directly through his mouth but it was to be placed into his stomach through jejunostomy tube. It is on the record that initially he was not provided with the grinder but

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2/11

2011 shows that only one 01 liter milk, 01 bread, 02 boiled eggs and boiled food was provided to him & three liter of milk was not provided to him as per advise given by the doctors of AIIMS hospital. Consequently deceased Santosh Kumar UTP was subjected to the malnutrition resulting into entering in various ailments.

Catching of Bacterial Diseases.

27 Santosh Kumar UTP was disabled with lifelong dependability on gastrostomy tube for feeding on day one when he joined Tihar Jail on 20.12.2010. Within two days on 22.12.2010 his jejunostomy feeding tube was displaced and the same was replaced at DDU hospital. Thereafter he was advised Gastrograffin study which was not done and on 29.9.2011 Santosh Kumar UTP was referred to Gastroentrolgy Department (G. I. Surgery), G. B. Pant hospital for review where doctor advise that no surgical intervention is required. The deceased Santosh Kumar UTP was taken to DDU hospital on 30.12.2012 when his tube was leaking and the same was replaced at DDU hospital. It is in the affidavit of Mr. Jacob Phillips Ex. PW18/C in para no. 5 that the said tube which was replaced was loose and the food was over flowing out of the tube. The deceased UTP Santosh Kumar started stinking because of tube leakage and no one wanted to come near him and no one was ready to help him.

28 This fact is further evident from the application of Santosh Kumar UTP written to the Superintendent as Annexure-2 wherein it is stated that he was taken to the DDU hospital last week where his feeding

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tube was inserted. Since then there is leakage around his stomach due to which infection is prone. He is unable to move around freely because of loose tube inserted in his stomach and travelling in the jail bus due to the current condition is very dangerous to his health and life and requested for arranging transport to his Court hearing for 9.1.2012. It seems that when he did not receive help from the jail authorities he sought the help of the Court and filed application Ex. PW14/B before the Court of Sh. Lal Singh Ld. ASJ which is reproduced as under:-

Subject: Deprivation of food with sadistic intention of making me suffer by "Hunger" under the supervision of SMO (Senior Medical Officer)
Your honour

I don't eat food, drink water from my mouth, neither can I swallow my own saliva. All my feeding is directly done through a tube/pipe connected directly to my stomach directly. All the food is grinded inside a grinder to liquid form and then fed via a tunnel to the tube which reaches his stomach. There is no sense of taste when food reaches my stomach through a tube connected to my stomach.

The SMO recently cancelled my diet due to which my health deteriorated drastically, leaving me to suffer in a state of hunger, a basic hardship knowing my physical condition deriving me of basic necessities such as food (milk, eggs and fruit).

Fruits which are very essential for my survival to stay alive has been denied by the SMO for no apparent reason with no valid explanation either. I have become very weak with no physical strength to over around, and day by day my health deteriorating.

"Fruits from which nutrition is extracted for my survival has been denied by the SMO leaving me to suffer a slow and steady yet painforl form of death. My life is left under the MERCY of the SMO.

I plead, humbly, to the Hon'ble Court to enquire about the SMO's motive of depriving me of my food, such as milk, eggs, fruits, knowing my physical state of feeding (Gastronomy). Also passing necessary order to start my diet effectively and immediately in order for me to stay alive and rebuild my lost health.

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-15-

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The Court direction is as under:-

9.1.2012

Present Sh. Salim Khan, Ld. Addl. PP for the State.

Accused V. R. Santosh @ Anand Raghwan is produced from JC.

Sh. Chandan Malik, Ld. Amicus Curiae for the accused V. R. Santosh Kumar @ Anand Raghwan.

PW1 Jawaharlal is present. Further examined-in-chief and partly cross examination and further cross examination is deferred at the request of Ld. Amicus Curiae for the accused.

An application for seeking medical treatment on behalf of accused V. R. Santosh @ Anand Raghwan has been moved by the Ld. Amicus Curiae for accused stating therein accused is a acute patient gastrostomy feeding and the condition of the accused is deteriorating, since he has been operated his stomach which has developed some problem, he is to be properly treated and put under the medical care of expert doctors from AIIMS. It is prayed that the Jail authorities be directed to take the accused to AIIMS for adequate medical treatment and care in order to save his life.

I have gone through the application and also heard the Ld. Amicus curiae for the accused and also seen the physical condition of the accused in the court today. Keeping in view the above facts and circumstances, the application is allowed and the Jail Superintendent is directed to take the accused to AIIMS Hospital for his treatment and necessary medication and Jail Superintendent is further directed to submit the report and medical status of accused on or before next date of hearing ie on 30.1.2012. The copy of this order be sent to the Jail Superintendent.

Summons be also issued to PW's at serial no. 6, 11 and IO and MHCM for 30.1.2012. Be put up on 30.1.2012 for PE.

(Lal Singh)

ASJ-02/FTC, New Delhi District
Patiala House Courts, New Delhi
9.01.2012

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In existence of the Court directions when he still require more help as he was not taken to the AIIMS hospital on the proper date after 9.1.2012 he has written letter Annexure P5 which is reproduce as under:-

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I am writing this to inform you about the atrocity inside the jail premises under the supervision of the SMO at the OIPD and also the jail superintendent. The staffs are not taking care of my health wanting me to die inside this place without proper treatment. They are not taking necessary action to sent me to AIIMS in spite of the instruction of the judge ordering the jail officials via and order sent on 9th January 2012.

I am documenting this information to let the authority know that:

- My nose has been bleeding
- My throat has become dried, I am unable to talk much
- Even feeding little what I get is becoming difficult as my stomach has shrunk.
- I am asking for glucose drips, to get a little energy which the OPD is not providing.
- I have no more energy; have become weak due to which I cannot walk
- It's hurting a lot inside my stomach

SMO , the jail superintendent is giving me the run around when I approached them. SMO is not on duty during night hours. I have been complaining about my problems to the nurse, doctors from the night and everyone is asking me to wait for SMO who will come to duty sometime in the morning. Nobody inside the jail no. 4 is willing to take authoritative decisions knowing my health is deteriorating. Jail officials are waiting me to die so they have my level best to attain their attention with the help of other inmates. SMO and jail staff has taken th is matter as a joke, when I have severe pain and could possibly die. After my death under the supervision of SMO jail superintendent, DS, AS, the jail will cover up family and other deponents as a tragedy, due to unfortunate circumstances making up false stories.

I want to report the truth which I am writing with great difficulty,



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tears and pain.

Horrifying truth is the SMO, jail authority wants immediately required medical help and support.

No treatment is given at the right time until and unless one suffers from the extreme condition close to death. "Am I an animal ? Even animals in the Zoo have given better treatment and doctors unlike th is substandard treatment".

Truth about this place is never known to the outside world and if these people wants to kill me then this murder should be known to the public.

My name is Anand @ V. R. Santosh Kumar s/o V. N.

Raghavan

[Handwritten signature]

31 The aforesaid letters of Santosh Kumar UTP is a crystal clear picture at the relevant point of time that he was in need of better food, better medical treatment and better treatment in jail. The plea from the side of the Jail Administration that the patient was non co-operative looses its significance as the Santoshi Kumar UTP started loosing faith in the Jail Administration for his betterment which indicates that there is a requirement of either trained staff or sensitization of training of good human behavior towards the destitutes or inmates.

32 By December 2011 on the one side there was malnutrition and because of malnutrition the weight of Santosh Kumar UTP came down drastically and on the other hand he caught in bacterial infection in his chest and when his health started further deteriorating, he approached to the Court for his treatment at AIIMS hospital on 9.12.2012. But the deceased Santosh Kumar UTP was made available at AIIMS Hospital on 16.1.2012 for his medical examination after a gap of 07 days which was the period when he lost his weight further rapidly and was

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admitted in AIIMS hospital where he was diagnosed for the first time as additional patient of tuberculosis. The discharge summary of the AIIMS hospital Ex. PW3/B is reproduce as under:-

Diagnosis. Corrosive stricture esophagus Status Feeding gastrostomy with Pulmonary tuberculosis.

Previous admission: No.

Advice Gastrostomy feeds- as explained to the paramedical staff from jail and as per diet sheet provided by the dietitian.

Care of gastrostomy site-explained, to regularly change the stoma bag in case of leakage.

Keep a chart of gastrostomy site stoma bag output

Tab INH 200 mg OD x 2 months

Cap Rifampicin 300 mg OD x 2 months

Tap Ethambutol 600 mg OD x 2 months

Tab Prazinamide 500 mg BD x 2 months

Tab benadone ½ OD x 2 months

Review in Chest clinic with LFT reports after 2 weeks

Review in GIS OPD Mon/Wed/Fri b/n 2-4 PM after 2 weeks

Chest Physiotherapy

Weight charting weekly

History. Corrosive injury to esophagus in 2003 due to suicidal intent ingestion of acid-was managed with feeding gastrostomy 15 days later and then followed by endoscopic dilatations. Has been on gastrostomy feed but now admitted with complaints of excoriation around gastrostomy site and retrosternal burning sensation also had loss of weight due to decreased gastrostomy feeds.

Examination Thin built, emaciated with signs of dehydration

Handwritten signature

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pallor + no icterus/LNs
per abdomen-gastrostomy insitu with peritubal leakage with
extensive excoriations.

Chest: B/L crepitations+

Operative Procedure and Findings.

The gas tube was replaced with a Ryles Tube and negotiated
into Proimal Jejunum Endoscopically to prevent reflux.

The Gastrostomy Excoriations were managed with stome care
and later a stome bag was applied to collect the peritubal
drainage.

Hospital Course

Hydration restored, chest physiotherapy
gastrostomy feeds were started and advanced in consultation
with the dietician and is tolerating 6 feeds/2100Kcal per day.
Was found to have pul TB (Sputum AFB+) and chest
physician consultation sought and started on ATT W on
7.2.2012.

Details

Progressive fibrocavitary lesion with consolidation LT lobe
evidence of B/L Pulmonary tuberculosis with consolidation.

33 The discharge summary Ex. PW3/B was prepared after the
clinical examination and found to have pul TB (Sputum AFB+) and chest
physician consultation sought and started on ATT W on 7.2.2012. and
was having progressive fibrocavitary lesion with consolidation LT lobe
evidence of B/L Pulmonary tuberculosis with consolidation.

34 The discharge summary Ex. PW3/B indicates that deceased
Santosh Kumar UTP was suffering from tuberculolosis not for 3-4 days or a
week but he was suffering from the said disease for the months together.

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It is the hard luck of the deceased Santosh Kumar UTP that he was never sent to undergo clinical examination on the point of tuberculosis in absence proper monitoring of the weight and it just skip away and kept on reducing his weight and further the infection accrued around jejunostomy tube which ultimately spread into the stomach and taken the course of septicemia which resulted into his death.

CAUSE OF DEATH

The deceased died on 25.2.2012 in DDU hospital and the cause of death of deceased as per the postmortem report is reproduce as under:-

Brief History (As per. inquest Papers): Alleged history available on record of Tihar Jail and death summary of DDU hospital it is mentioned that since entry in the Tihar Jail the UTP Santosh @ Anand had oesophageal stricture and on later stage in Tihar Jail the feeding tube was instituted externally on abdomen and repeated referral took place to AIIMS, GB Pant Hospital and DDU Hospital with regard to further complications and associated pulmonary tuberculosis. On dated 15.2.2012 patient (deceased) referred to DDU hospital in stage of drowsy, hypotension and hypoglycaemia. On dated 25.2.2012 at about 10.00 PM person expired.

General Description of the Cloths: The body of the deceased was wrapped in hospital bed sheet.

General Examination:

The rigor mortis was passed off i.e. the stiffness of the body after death was not observed as the same was disappeared



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due to completed the duration of postmortem rigor mortis. Postmortem staining on the body was not significantly observed [i.e. a redish discolouration of the body on its dependent parts towards (towards gravitational force) after death].

Both eyes were partially opened with cornea was dry and hazy. The mouth was partially opened. Multiple IV cannula prick marks were present on both hands and cubital fossa (i.e. elbow). Bed sore was present over the sacrum on the back (lower part of the back). Feeding tube was present at situ (on the body part) on abdomen.

External Examination: No any fresh external injuries were observed on the body.

Internal Examination:

A. **Head:** The scalp, skull and base of skull were observed without showing any abnormality except the brain and meninges (brain covering) was seen congested and oedematous (i.e. reddening and swelling).

B. **Neck:** All cartilages and soft tissue of neck appeared normal and tracheal mucosa was found congested and covered by accumulated bloody froth into lumen of trachea (i.e. the congestion of trachea attributed by many pathological and physiological variations like septicemia, toxic, hypoxic etc.).

C. **Chest:** (Thorax). The ribs and chest wall did not show any abnormality (pathology etc.). The oesophagus (food pipe) at its upper one third part showed narrowing due to stricture formation. Both thoracic cavities (pleural cavities) were contained of about 150-200 ml of turbid and yellowish fluids (pleural effusion) i.e. collection of fluids whether it is a water, pus, blood or mixed into pleural

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cavities more common in the case of pulmonary tuberculosis. Both lungs were decreased in volume by about 25-30% with darkening in colour, fragile in nature and adherent on the thoracic wall. On dissection of the same, the multiple pus pockets and caseation formations were observed within the lungs parenchyma (i.e. the findings are suggestive of pulmonary tuberculosis). Caseation means the granular tissue formation within the vicinity of lesions into tissue (lungs in the stage of chronic inflammatory changes like tuberculosis etc.) In the case of caseation of lungs in regard to pulmonary tuberculosis, the stage of pathology cannot be accurately ascertained as it is associated since its very initial stage and persists till the existence of pathology.

The heart and large blood vessels did not show any significant changes (i.e. NAD).

D. Abdomen: The abdominal wall showed one incision for jejunostomy. The peritoneal cavity contained about 250-300 ml of turbid free fluid with sloughing surface of mesentery and abdominal organs.

The stomach was empty with mild congestion of mucosa and did not emit any abnormal smell on dissection of it.

The small intestine was sloughed and the jejunum part of it bears one surgical incision for institution of feeding tube.

The large intestine, liver, gall bladder, biliary passage, spleen, kidney, renal pelvis and urethra did not show any remarkable or significant pathological changes except exhibited congestion.

E. Urogenital Organs: The urinary bladder and rectum were empty and external and internal genital organs did not show any abnormality.

Spinal column was intact.

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OPINIONS:

- 1 Time Since Death: consequent to time of hospital death as mentioned in death summary
- 2 The cause of death was due to septicemia caused by peritonitis consequent upon leakage of gastric contents (chyle i.e. partially digested foods and gastric contents) into peritoneum associated with pre-existed pulmonary tuberculosis.
Manner of death is natural.

35 It seems that prior to the death the deceased Santosh Kumar UTP was taken to the AIIMS hospital for the treatment on the directions of the order passed by the Court of Sh. Lal Singh ASJ where on clinical examination for the first time he was found to have tuberculosis. His discharge summary Ex. PW3/B shows deceased Santosh Kumar UTP on clinical examination was found to have "pul TB (Sputum AFB+) and chest physician consultation sought and started on ATT W on 7.2.2012."

36 As per postmortem report the cause of death is due to septicimia caused by peritonitis consequent upon leakage of gastric contents associated with pre-existed pulmonary tuberculosis and the deceased Santosh Kumar UTP was suffering from tuberculosis much prior the evidence of septicemia. The weight of the deceased Santosh Kumar UTP came down to some extent due to the malnutrition resulting into tuberculosis before Dec/January 2012 and he further lost weight more than double, triple in January/February what he has lost earlier during the detention period and followed with the septicemia. Consequently infection accrued around the jejunostomy tube of the stomach and spread

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into whole of the stomach resulting into the septicemia and his body was not in a position to respond to the medicines and ultimately he died on 25.2.2012 for the reasons recorded above. Submitted please.

Dated 12th February 2012

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12/2/2013
(I.S. Mehta)
District & Sessions Judge
cum- Enquiry Officer
Patiala House Courts/New Delhi

