

MEDICO LEGAL LETTER
18 September 2019

Solicitor
MinterEllison Lawyers
Level 23, Rialto Towers
GPO Box 769
MELBOURNE VIC 3001

Email: [REDACTED]

Dear Sir,

Name: **Nicola Gobbo**

UR: [REDACTED]

Address: [REDACTED]

Date Of Birth:

16 November 1972

YOUR REF No: 1239987

Thank you for your request for a medical report concerning Ms Gobbo. I am currently [REDACTED]

SUMMARY

Ms Gobbo was referred to me by Dr [REDACTED], her GP, and was first seen on 19 February 2008. At the time she presented with [REDACTED] and [REDACTED] post a [REDACTED] stroke in July 2004. There was a background of a [REDACTED]. From a physical perspective, she made an excellent recovery from her stroke, although [REDACTED] in the early phases.

In October 2006 she developed [REDACTED]

[REDACTED] She had undergone multiple investigations and seen multiple specialists and along with a diagnosis of [REDACTED] and [REDACTED] was noted to have [REDACTED]. She had been seen by neurologist, [REDACTED] and investigations did not reveal any other sinister causes. At the time of first assessment she was [REDACTED]

She was also treated with [REDACTED] an antidepressant, which does temper [REDACTED]

From that time on Ms Gobbo has had a fairly turbulent course. Unfortunately, her [REDACTED] all that greatly and she has had issues with depression and anxiety. I did refer her to a psychiatrist, Dr [REDACTED] who felt that she had a complex psychiatric picture and she has been seen by [REDACTED] psychologist, on a regular basis since that time.

Also in 2009 she started developing stress-related dermal and epidermal breakdown with ulceration requiring hospitalisation and surgery which was managed by St Vincent's Hospital.

I have not physically assessed Ms Gobbo since 16 October 2018, and had two phone correspondences with her on 4 December 2018, and 2 January 2019. Any comments made in this report about her current state relate back to principally 16 October 2018.

DIAGNOSIS

1. [REDACTED] post stroke.
2. Severe stress disorder.
3. Stress-related dermal and epidermal breakdown with ulceration requiring hospitalisation and surgery.
4. [REDACTED]

RESPONSE TO QUESTIONS

1. **Over what period did I treat Ms Gobbo:** I commenced treating Ms Gobbo as of 19 February 2008 and I have seen her consistently on a 2 to 4 monthly basis since that time until 16 October 2018.
2. **What were her presenting features:** Ms Gobbo presented with [REDACTED] There is no evidence of [REDACTED] asymmetry nor neurological deficit.
3. **What was her diagnosis:** [REDACTED] post stroke, with complications including severe stress disorder, stress-related dermal and epidermal breakdown with ulceration requiring hospitalisation and surgery, depression and anxiety.
4. **What medications did I prescribe her:** Ms Gobbo has been prescribed an array of medications in an attempt to [REDACTED] and improve her quality of life. Initially, she was treated with [REDACTED] Unfortunately in 2010, the situation deteriorated and her [REDACTED] She also was trialled with [REDACTED] with limited success.
 - a. Over time her medications have altered. She has had trials with [REDACTED] an antiseizure medication, but this did lead to weight gain and side effects including drowsiness and cognitive dampening. She has been on a number of antidepressants.
 - b. Her most recent regime medications include [REDACTED] In the past she had been on [REDACTED] As such, over the past 4-5 years there has been a [REDACTED] to manage her situation. There were some days where she would not take [REDACTED]
5. **When last treated had her condition improved, deteriorated or remained the same as compared to when I first treated her:** From a functional perspective, Ms Gobbo was a little more active but her [REDACTED] had not altered all that greatly. Her [REDACTED] and impacted upon her quality of life enormously. One would suggest that her situation had stabilised in terms of [REDACTED] but she had [REDACTED] She had at one stage tried to decrease her antidepressants but unfortunately this led to decreased mood and she is now consistently taking her [REDACTED] which does stabilise her mood.
6. **How would I describe Ms Gobbo's mental health during the period I have treated her:** She has certainly had issues with lowered mood as well as frustration and anxiety. There is associated sleep disturbance. As a result, she has required some psychological support over the timeframe. Certainly the work done with [REDACTED] has assisted in stabilising her mood, but she is fragile with respect to her mood.
7. **What effect has [REDACTED] had on her ability to concentrate:** [REDACTED] significantly impacts upon her attention and concentration. This impacts also on her frustration tolerance, which is lowered and impulsivity. [REDACTED] by lowering her frustration tolerance, distracts her from her focus and as such limits her ability to concentrate for extended periods of time. This has a significant impact at higher levels of cognitive functioning.
8. **What effect has [REDACTED] had on her mental health and during the periods that I treated, was she ever suicidal:** At no stage has Ms Gobbo expressed suicidal ideation to me. She certainly has expressed her frustration with her ongoing situation. With the birth of her [REDACTED] children, this has allowed her to focus on the positive aspect in her life and has been quite valuable in terms of improving her creativity and planning for the future. There is no doubt, however, that [REDACTED] has a

negative impact upon her mental health and was a principal reason for referral to psychiatrists and [REDACTED]

9.

[REDACTED] With respect to the question about giving evidence, there is no doubt that this would be a psychological and emotional stressor and depending on the period of time within the court room would also have physical stressors. It is likely that presenting evidence would lead [REDACTED] decrease in concentration and attention and lowered frustration tolerance with associated emotional lability.

10. **How would isolation affect Ms Gobbo's [REDACTED] and mental health:** Isolation is a stressor and lack of support would place her under significant stress. This in fact would [REDACTED] and likely lead to a decrease in her mental health.

11. **Is there any other information that I can provide which would assist the condition and understanding of how [REDACTED] plays with a physical mental ability to give evidence:** The principal concern for Ms Gobbo is that in the court room significant pressure, whether direct or indirect, would lead to increased stress [REDACTED] This would impact upon her ability to give evidence and potentially lead to deterioration in her general health and well being.

I trust the above assists you in your determinations.

Kind regards,

Electronically Signed on 18 September 2019 19:57:49 by

[REDACTED]