

[REDACTED]

12 September 2019

To Whom It May Concern

Dear Sir/Madam,

**SPECIALIST MEDICAL REPORT FOR** Nicola Gobbo [REDACTED]

1. I am Dr. [REDACTED] consultant in anaesthesiology and [REDACTED]. I am also the [REDACTED]
2. I have been asked to provide a medical report on the [REDACTED] of Ms Nicola Gobbo [REDACTED]
3. Ms Gobbo [REDACTED] consulted me on 18 January 2019 for the first time. She suffered from a [REDACTED] stroke in 2004 and as a result, she developed [REDACTED]. She produced a letter from her regular physician, Dr [REDACTED] of [REDACTED]. She has [REDACTED] resulting from the stroke and has been treated by [REDACTED] with the following medications for [REDACTED]  
[REDACTED]
4. Based on my assessment, Ms Gobbo's [REDACTED] symptoms are consistent with the diagnosis of [REDACTED]. I have allowed her to continue with the same or equivalent medications since 18 January 2019 and she has been consulting me every month for prescription refills.
5. During the initial consultations in January 2019 and February 2019, Ms Gobbo's [REDACTED] was fairly well managed with the abovementioned medications. Her discussions with me revolved around threats to her life as well as [REDACTED] because of ongoing issues [REDACTED] lack of a conducive environment [REDACTED]

[REDACTED]

[REDACTED], lack of family and social support, [REDACTED]. As a result, she had expressed difficulty with sleep. She was constantly worried about [REDACTED]

6. She reported an [REDACTED] in March 2019 despite medications. I felt that her [REDACTED] was aggravated by a combination of factors, including lack of social support, constant stress [REDACTED] as well as poor sleep. Therefore, I had referred her to see a psychologist to manage her low mood and anxiety symptoms. [REDACTED] has been the psychologist looking after her since then.
7. I had to make changes to her prescription, including switching from [REDACTED] and depressive symptoms at the same time. She had also started seeing a psychiatrist, Dr [REDACTED] since April 2019.
8. Ms <sup>Gobbo</sup> [REDACTED] was prescribed with [REDACTED] in March 2019 in an attempt to help [REDACTED] and to improve her sleep. However, she was unable to tolerate this medication due to the side effect of drowsiness. [REDACTED] was thus discontinued in April 2019.
9. Her last consultation with me with on 20 August 2019. [REDACTED] and her mood had improved. Her list of medications included:  
[REDACTED]
10. [REDACTED] depression and anxiety are closely inter-related and worsening of any one of this condition will surely magnify the other two conditions. The multi-disciplinary care provided by myself, Dr [REDACTED] and [REDACTED] is merely helping Ms <sup>Gobbo</sup> cope with her current delicate situation as the future remains uncertain for her. [REDACTED] will also be detrimental to her physical and mental well-being, including [REDACTED]. I believe that Ms <sup>Gobbo's</sup> health [REDACTED] would only improve when she [REDACTED]

[REDACTED]

[REDACTED]