

A diagnostic challenge in peripheral neuropathy

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I attended a tutorial on peripheral neuropathy in March 1969. The patient was a 45-year-old married mother of two primary school children. She had been unwell since the beginning of the year and had been admitted for investigation to the Warneford Hospital, Leamington Spa.

The tutorial was conducted by a neurologist, for the benefit of four medical registrars about to sit the MRCP exam. The main focus was not on the patient's history or diagnosis, but rather on the conduct of the neurological exam. Each of the registrars demonstrated a part of the examination. My task was to examine the patient's legs. I recall commenting on the dry scaly skin. Our tutor murmured that this was hardly worthy of a referral to a dermatologist. He further informed us that, as was often the case with peripheral neuropathies, no cause had been found.

The following month I became an MRCP and moved back to Australia to the remote town of Bourke in western New South Wales. In March 1970, I received a letter from Dr Stephen Whittaker, my chief at Warwick Hospital. He expressed disappointment at my failure to diagnose the peripheral neuropathy as being due to arsenic poisoning from which the patient eventually died. He enclosed a report on the case written by Dr Derek Barrowcliff, a forensic pathologist:

This woman was seen by 20 doctors (and her case considered) on a teaching discussion round, but if ever any of the bright young men who were up for the membership said 'I supposed she might be suffering from arsenic poisoning', it passed unheard.¹

The scene of the crime

Stoneleigh Abbey was built on the site of a 12th century Cistercian monastery by Sir Thomas Leigh, the Lord Mayor of London in 1558 and made famous by cameo descriptions in Jane Austin's novels, *Mansfield Park*, *Southerton Court* and *Persuasion*. The Leighs were ardent royalists. In 1642, one of Sir Thomas Leigh's descendents sheltered Charles I on his flight from London at the beginning of the Civil War.

The story

The patient was the 45-year-old wife of the long time personal chauffeur of Lord Leigh. They had two children and appeared to be a happy family. Her husband had been brought up as a member of Lord Leigh's family. He had their affection, lived in an abbey house and had access to the hunting and fishing privileges of his aristocratic employers.

The patient became ill at the beginning of 1969. Despite a month in hospital during March and April, the cause of her illness remained

a mystery. In September 1969, she became acutely unwell with diarrhoea and vomiting and despite two urgent house calls from an experienced general practitioner (GP) she died at 1.00 am on 8 September. Her GP wrote the cause of death as 'gastroenteritis with associated allergic polyneuropathy'. The Registrar of Deaths accepted this death certificate. But the GP worried about his stated cause of death, some 36 hours after writing the certificate and, three hours before the cremation, rang the pathologist of the South Warwickshire Hospitals Group for advice about the possibility of some unusual cause of death. The pathologist, Barrowcliff, had forensic training and was a consultant to the Home Office. He decided to perform a post mortem. The stomach contents, liver and hair analyses showed the cause of death to be acute arsenic poisoning on a background of nine months of chronic poisoning.

Diligent police work uncovered a trail of both Paris Green (a copper acetoarsenite) and the more soluble, sodium arsenite. The latter was probably administered in emptied out Tuinal® (a mixture of two short-acting barbiturates) and vitamin capsules.² The patient's husband was charged with murder. The trial, conducted at the Birmingham Assizes, lasted three weeks. Despite being defended by one of England's leading barristers (paid for by Lord Leigh) the jury took less than three hours to pronounce a verdict of guilty. He was sentenced to life imprisonment, which he served in Maidstone prison in Kent.³ His motive for the murder was his infatuation and passionate affair with an attractive 20-year-old typist employed by the abbey.² Lord Leigh refused to accept the guilty verdict and organised an appeal on the grounds that the trial judge had not excluded the possibility of suicide or Münchausen's syndrome. This appeal was rejected. Four years later Lord Leigh was still giving press conferences about his conviction that his chauffeur's wife died by her own hand. In 1974, he convinced two of his local MPs to appeal the conviction to the home secretary but this too was rejected.

Intentional poisoning is cowardly and a rare cause of diagnostic error. The opportunity to become a medico-legal hero, like the patient's GP, is rare. He kept his diagnostic antenna twitching and, in my view, would make a worthy recipient for the, yet to be inaugurated, Agatha Christie Award.

References

- 1 Barrowcliff D. The Stoneleigh Abbey poisoning case. *Med Leg J* 1971;39:79–90.
- 2 Chauffeur gets 'life' in poison case. *The Times* 6 March 1970.
- 3 Police 'find of powder'. *The Times* 19 February 1970.

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