



**STATE CORONER'S COURT  
OF NEW SOUTH WALES**

<b>Inquest:</b>	Inquest into the death of Leonie Margaret Philpott
<b>Hearing date:</b>	20 January 2016
<b>Date of findings:</b>	20 January 2016
<b>Place of findings:</b>	State Coroners Court, Glebe
<b>Findings of:</b>	Magistrate Barnes , NSW State Coroner
<b>Catchwords:</b>	CORONIAL LAW – natural causes, unascertained
<b>File number:</b>	2014/379012
<b>Representation:</b>	Counsel Assisting the Coroner, Snr Sgt Sasha Harding
<b>Findings</b>	
<b>The identity of the deceased</b>	The person who died was Leonie Margaret Philpott.
<b>Date of death</b>	Ms Philpott died on 25 December 2014.
<b>Place of death</b>	She died in Kurrajong, NSW.
<b>Cause of death</b>	The cause of death is unascertained.
<b>Manner of death</b>	She died from natural causes.

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*The Coroners Act in s81 (1) requires that when an inquest is held, the coroner must record in writing his or her findings as to various aspects of the death. These are the findings of an inquest into the death of Leonie Margaret Philpott.*

## **Introduction**

On 25 December 2014, Leonie Philpott's husband left for work at about 5.45am. He kissed his wife goodbye and noticed nothing unusual about her as he left. She was still in bed and half asleep due to the time of day.

Throughout the day Mr Philpott attempted to contact his wife on a number of occasions by telephone without success. At 7.45pm he returned home and found Leonie lying face down in the bed – sadly, she was deceased.

Police attended and after inspecting the scene and speaking to Mr Philpott they concluded there was no basis to suspect any third party involvement in the death. It appeared to be due to natural causes.

A three cavity internal autopsy confirmed that there was no evidence of any third party involvement in the death and that it was almost certainly due to natural causes. However, the pathologist was unable to identify what that cause was. As a result an inquest was mandatory.

## **The evidence**

Ms Philpott was 47 years of age at the time of her death. She had been in a relationship with her husband, Morgan Philpott, for about 9 years. They had no children together.

For many years Ms Philpott had been a bush regeneration worker. That was physically demanding work that required her to work long hours in trying conditions. As a result she was fit and appeared to be healthy.

Since her youth she had suffered from a mild form of asthma but was not on medication as she was not known to have any severe or acute attacks in the years prior to her death. Her husband said she very rarely used an inhaler.

In her mid-twenties, Ms Philpott suffered from cervical cancer. This was effectively treated and there was no indication it recurred.

Ms Philpott was a moderate smoker and moderate drinker of alcohol. She occasionally used marijuana.

About 10 months before her death Ms Philpott was diagnosed with Barmah Forest Virus. This is a mosquito transmitted disease. As Ms Philpott worked in the bush it is possible that she suffered further incidents of this disease which were not diagnosed as in the months prior to her death she was complaining of feeling tired and suffered from headaches.

Also as a result of her bush work she had from time to time been infected by scrub ticks.

In June 2014 she suffered from a chest infection and sought medical treatment for it. It seemed to resolve. In September 2014 she suffered from gastroenteritis which she thought may have been connected with her falling into a stagnant pond at work. Stool tests described no abnormalities.

The doctor who had been responsible for Leonie's medical care throughout that period could offer no opinion as to the cause of death.

Mr Philpott gave evidence at the inquest. He said that in the weeks prior to her death, his wife had been very fatigued but managed that by going to bed early. He could recall nothing else out of the ordinary in relation to her health. He said that for some years she had symptoms of what he believed may have been sleep apnoea, in that on occasions when she was sleeping on her back and snoring, Leonie would stop breathing for brief periods.

### ***Autopsy evidence***

Dr Rebecca Irvine, the forensic pathologist who undertook the autopsy on Ms Philpott's body also gave evidence. She said she found no evidence of any injury or trauma to Ms Philpott. Internal examination revealed no gross acute cause of death and no significant medical conditions were identified. Microscopic examinations of selected tissues also failed to provide any explanation for the death.

There were mild changes to parts of the lungs due to smoking and possibly asthma but not so severe as to suggest a serious asthma event had ever previously occurred. In those circumstances, a sudden fatal attack is most unlikely.

Biochemical analysis of vitreous fluid provided no evidence of any increased blood glucose; abnormal renal function or derangement of sodium metabolism.

Toxicological examination revealed non toxic concentrations of ibuprofen and naproxen- both non steroidal anti inflammatory pain medications. No drugs of abuse or other common therapeutic drugs were detected. No increased insulin concentration was found during the examination of serum.

In particular, the pathologist looked for and found no evidence of myocarditis or cardiomyopathy.

Dr Irvine said that sleep apnoea does not of itself usually cause sudden death unless it has been so entrenched as to cause damage to the heart or lungs. She found no such disease in Ms Philpott.

In response to an inquiry from Ms Philpott's parents, Dr Irvine indicated she found no evidence of chronic or acute herbicide or pesticide poisoning.

Dr Irvine acknowledged that occasionally, apparently healthy people suddenly collapse and died as a result of a disorder in the electric pulses that regulate the rhythm of their heart. However, this cause of death, cardiac arrhythmia, is almost always preceded by some symptoms such as fainting or palpitations and is very

rarely first detected in people over the age of 35. Accordingly, Dr Irvine considered it could be discounted in this case.

In the circumstance, the pathologist was able to offer no opinion as to the cause of death.

## **Conclusions**

I am confident that no third party played any role in Ms Philpott's death. She was not the victim of any foul play. She died of natural causes in her bed. She was not seriously unwell the day before her death and so whatever condition ended her life struck suddenly. I have insufficient evidence on which to make a reliable finding as to what that cause was. I realise that this may add to the family's distress but the available evidence does not allow to me to explain Leonie's death.

## **Findings required by s81(1)**

As a result of considering all of the documentary evidence and the oral evidence given at the inquest, I am able to confirm that the death occurred and make the following findings in relation to it.

### **The identity of the deceased**

The person who died was Leonie Margaret Philpott.

### **Date of death**

Ms Philpott died on 25 December 2014.

### **Place of death**

She died in Kurrajong, NSW.

### **Cause of death**

The cause of death is unascertained

### **Manner of death**

She died from natural causes.

I close this inquest.

M A Barnes

NSW State Coroner  
Glebe