



FEATURE

EXPERT WITNESSES

"Shaken baby" expert with unconventional views struck off

The GMC has ruled that the expert witness Waney Squier deliberately misled the courts with her unconventional views. **Jacqui Wise** considers the implications

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The consultant neuropathologist Waney Squier, who gave evidence for parents in alleged "shaken baby" cases, has been struck off the medical register. The Medical Practitioners' Tribunal took five months to rule that Squier deliberately and dishonestly misled the courts, showing a blatant disregard for one of the basic tenets of the medical profession.

The ruling not only destroys her career but also may discourage doctors from appearing as expert witnesses or speaking out against mainstream views.

The tribunal ruled that Squier failed to recognise the limits of her knowledge and competence in giving evidence and failed to respect the skills and contributions of colleagues. It said: "Your attitude towards your colleagues was shocking, openly displaying your disdain for their expertise and opinions." It said that she repeatedly gave evidence that fell outside her area of expertise and competence and deliberately and dishonestly misinterpreted, mis-stated, and misquoted research to support her opinions.

The tribunal accepted that Squier had not caused any direct harm to patients, and the findings of dishonesty have been made only in relation to her medicolegal work. However, it said that the evidence that she presented in court had the potential to subvert the course of justice.

Pathology of the developing brain

Squier worked as a consultant at the John Radcliffe Hospital in Oxford, specialising in the pathology of the developing brain in the fetus and neonate. She has given evidence as an expert witness in more than 50 cases worldwide.

In the first 10, for the prosecution, she supported the mainstream medical view that a "triad" of symptoms—widespread bilateral retinal haemorrhages, thin film subdural haemorrhage, and encephalopathy—is evidence of abusive injury. However, she changed her view after the clinical neuropathologist Jennian Geddes published a hypothesis that dural haemorrhage could occur without trauma. In a 2005 appeal Squier gave evidence for the defence against a conviction that she had originally

helped to secure. As a result Lorraine Harris's conviction was quashed.²

Since then Squier has travelled the world appearing as an expert witness for the defence and become a thorn in the side of the medical establishment, Crown Prosecution Service, and the police. In 2009 the High Court judge Justice Eleanor King accused Squier of developing a scientific prejudice, saying that her views went against the mass of mainstream medical opinion.³ In April 2010 the police referred Squier to the General Medical Council.

GMC charges

The GMC charges related to six family court or criminal cases between 2007 and 2010 concerning babies and a 19 month old child who died or sustained brain damage. In each case Squier gave evidence that the injury received was either not consistent with non-accidental injury or was more likely to have been caused by another means.

The tribunal said that Squier presented expert opinion evidence outside her area of expertise on biomechanics, ophthalmic pathology, paediatric medicine, and neuroradiology. For example, she gave evidence about the likelihood that a low level fall could have caused a brain injury and incorrectly used research papers to back up her claims. On another occasion she asserted that paediatric HIV encephalitis may have caused a baby's severe brain damage despite the evidence of a recognised expert pathologist in paediatric HIV encephalitis, who concluded that there was no evidence of HIV related disease.

Non-accidental head injury, now the preferred term for shaken baby syndrome, lacks consensus. In 2009, the Royal College of Pathologists agreed that, when the triad of features are all present at paediatric postmortem examination, and in the absence of other evidence, there should be prima facie suspicion that such injuries are due to mechanical trauma, potentially including vigorous shaking.⁴ However, it agreed that with the current state of knowledge the presence of the triad should not be regarded

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as absolute proof of traumatic head injury in the absence of any other corroborative evidence.

Accepted majority view

Geoff Debelle, a consultant paediatrician at Birmingham Children's Hospital and the child protection officer at the Royal College of Paediatrics and Child Health, said that the accepted majority view is that if the triad of symptoms is present doctors would look for other evidence of trauma such as bruising or rib fractures.

"If these are present than you can be 85-90% confident that trauma was due to inflicted injury. The difficulty is when there is no other evidence." But he added that doctors would always be careful to exclude other explanations—for example, using magnetic resonance imaging of the brain to look for congenital aneurysm or checking for haemophilia to explain bruising.

Debelle told *The BMJ* that Squier's views are very much in the minority, particularly that low level falls could produce the triad of symptoms.

Very little science

Squier, however, has publicly defended her position. She told the BBC's *Panorama* programme: "There is very little science in shaken baby syndrome. It's become a label. We're not there at the time of collapse. We don't know if these babies have been shaken."

The tribunal said, "During eleven days of giving evidence to this tribunal you seemed unable to accept that any of the criticisms directed towards you might have had a scintilla of justification."

Michael Mansfield, QC, the lawyer Clive Stafford Smith, and 22 others wrote in a letter to the *Guardian* newspaper: "It is a sad day for science when a 21st century inquisition denies one doctor the freedom to question 'mainstream' beliefs. It is a particularly sad day for the parent or carer who ends up on the wrong end of another doctor's 'diagnosis' that an infant was shaken, when the child may have died from entirely different, natural causes."⁵

The tribunal said, "It has always been recognised that as an expert neuropathologist you are entitled to hold and express your views, provided they are based upon matters within your expertise. This case simply concerns your work as an expert witness in cases involving allegations of non-accidental injury."

Science in court

Nevertheless many people question whether the courts or the GMC are the proper place to consider such debates. Speaking on the BBC's *Panorama* programme, Niall Dickson, chief

executive of the GMC acknowledged this: "The GMC or the courts are not the way to resolve such scientific disputes . . . Ultimately they should be resolved by scientific experts coming together for more of a shared view."

Debelle said the Royal College of Paediatrics and Child Health would consider setting up a working group to examine the evidence on non-accidental head injury cases, as it had done for sudden unexpected death in infancy in 2004.⁶

Squier, speaking about the judgment on BBC's *Newsnight* said: "This is going to inhibit, even further, anybody who has a valid opinion and understands the science from stepping forward for fear of also facing this sort of hearing."

What does this mean for expert witnesses?

Debelle said that he has seen no evidence that the publicity surrounding Squier has put doctors off appearing as expert witnesses, but others disagree.

Robin Ferner, honorary professor of clinical pharmacology at City Hospital, Birmingham, told *The BMJ*: "It is increasingly worrying for experts who give evidence in good faith, whether their views are conventional or not, because of the fear that they will be reported to the GMC at a later date."

Tony Daniels, a retired psychiatrist who wrote in defence of the expert witness Roy Meadows, whose testimony caused controversy in sudden infant death cases, said: "It's not a question of whether Squier is right or wrong. It's the desire that everyone should sing from the same song sheet." He added: "As long as we have an adversarial system it's up to the courts to sift whether an expert's evidence is credible or not."

Competing interests: I have read and understood BMJ policy on declaration of interests and have no relevant interests to declare.

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