

The Lucia de Berk Miscarriage of Justice in The Netherlands

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There is a connection between the Lucia de Berk case and ["The Nurses are Innocent - The Digoxin Poisoning Fallacy"](#), Dundurn Press, Toronto, November 2011, the true story of an innocent nurse, the daughter of a pediatrician, who was charged with the murder of patients with the heart drug [digoxin](#) at the Toronto Hospital for Sick Children, 1980-81. The poisoning theory was based on high digoxin levels on autopsy specimens. She had a good lawyer, so she spent only one week in jail.

The case resulted in a 1½ year Royal Commission of Inquiry (Justice Grange) that was covered almost daily by Canadian national news media (even The New York Times covered the story on at least two occasions). The evidence was circumstantial, so she was not committed for trial. Many in Canada (including Grange) still believe she was guilty, but the facts presented in the book should convince everyone that she is innocent. The Foreword was written by one of Canada's foremost medical scientists, Dr. Peter Macklem, the professor of medicine at McGill University at the time when he was called to testify as an expert witness at the Grange Inquiry.

The de Berk similarity was uncovered while the book was in press. A nurse from the Netherlands, Lucia de Berk, was tried and convicted of murdering patients by digoxin poisoning (based on high digoxin readings on autopsy specimens). Her conviction relied on statistical analysis of her presence near the patients at the time of death.

The New York Times, The Guardian and the journal Nature denounced the flawed mathematics of the statistical analysis that convicted her. Editorials as these helped to force a retrial in which she was proclaimed innocent (although many in the Netherlands believed she was guilty).

The scientific arguments presented in "The Nurses are Innocent", proving that high levels in autopsy samples do not indicate digoxin poisoning in a living patient, would be equally valid in the De Berk case.

If there was no digoxin poisoning, how could there have been murders?

High serum digoxin levels in autopsy blood in a paediatric patient in the Netherlands led to murder charges, conviction and sentencing to a life term in prison for attending nurse, Lucia de Berk in 2004. The test method used was the RIA test. The HPLC digoxin test, considered to be much more specific in digoxin analysis also uses the RIA method for its final test result.

In 1983, Reepmeyer and Juhl (US National Centre for Drug Analysis)¹ showed that digoxin assays using RIA test methods gave significantly falsely high readings because of contamination of syringe contents by MBT, a toxic and allergenic chemical leached from the natural rubber seals of disposable unit-dose syringes. Meek and Pettit (1985) found 91 babies with “potentially toxic levels of MBT that leached from natural rubber parts of disposable syringes, ampoule seal

and three places in IV injection sets. If these babies had serum digoxin tests done, the readings would suggest very high digoxin levels.

The prosecutors used distorted statistical methods to “prove” circumstantially that de Berk was responsible for 7 baby deaths in patients that she had contact with.

In the immediate aftermath of her false conviction, Lucia de Berk suffered a paralyzing stroke, an affliction that no amount of monetary settlement could compensate for. In the Netherlands, one cannot sue the judiciary for miscarriage of justice

An added problem associated with the continuing unacceptable use of natural rubber (made with MBT) that comes in contact with injections is best summarized by an April 2013 statement from the WHO's Uppsala Drug Monitoring Centre in Sweden: “...*the systemic failure of government health protection agencies to protect citizens from a known allergenic and toxic chemical, MBT, a worldwide contaminant of injections for 30 years, with medical journals aiding and abetting the process by refusing to publish informative articles on public health issues related to MBT contamination of injections.*” Whenever drug companies talk of latex contact with injections, there has been, always, MBT leaching. MBT combines with plasma proteins, creating a potential foreign protein allergic response. Vaccination vaccines are only one example of the continuing unacceptable exposure of patients to this hazard (Google: “Latex in vaccine packaging”).

¹ Reepmeyer JJ, & Juhl . 1983 *Contamination of injectable solutions with 2-mercaptobenzothiazole leached from rubber closures.* J. Pharm. Sc. **72**,1302-1305