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18 March 2022

Andrew Cox H.M. Coroner's Office The New Lodge Newquay Rd Penmount Truro Cornwall TR4 9AA

Sent via email: cornwallcoroner@cornwall.gov.uk

Dear Mr Cox,

I write in response to your regulation 28 report of 18 January 2022 regarding the very sad death of Coco Bradford. I would like to offer my sincere condolences to Coco's family.

Your report, which has been reviewed by our internal patient safety team and chief medical officer, states that the NICE guideline on the diagnosis and management of diarrhoea and vomiting caused by gastroenteritis in under 5s [CG84] is not in line with the UK Resuscitation Council's 2021 guideline on paediatric advanced life support. Having reviewed the guidance, we agree that the volume of fluid bolus does not align and as a result of this being highlighted, we have also looked at our other guidance of relevance.

It is important to note that CG84 covers diagnosing, managing and referring infants and young children younger than 5 years who present with acute diarrhoea with or without vomiting. We have not published guidance on this topic for people aged 5 years and older. However, we do have separate guidance that does cover children over 5 years of age on the recognition, diagnosis and early management of sepsis [NG51 from 2017] and guidance [NG29 from 2020] covering intravenous fluid replacement for children in hospital. All of this guidance has been reviewed considering your report, for their alignment to the 2021 UK Resuscitation council guidance.

In light of our initial review, your report has now been forwarded to our guideline surveillance team who will review the UK Resuscitation Council's 2021 guideline and consider if CG84 and other related NICE guidance need to be updated.

Finally, you also note the difficulty of treating a child with bacterial gastroenteritis who is suspected to have concomitant sepsis and ask if guidance on 'how to weigh the balance of risk and who to involve in the decision-making process' would be useful. Reflecting on the specific issue raised in your report, that 'the administration of antibiotics may precipitate or worsen [haemolytic uraemic syndrome] and, if the child is subsequently found not to have sepsis, may inadvertently cause harm', we consider this to be a matter of clinical judgement and not something that could be addressed by a guideline. Haemolytic uraemic syndrome is

however considered in the NICE Clinical Knowledge summary on gastroenteritis last revised in August 2020.

Please do let me know if you require any further information and again, I offer my sincerest condolences to Coco's family.

Yours sincerely,



Dr Chief executive