



Catherine Wood
Assistant Coroner
Central and South East Kent

10 November 2023

Dear Ms Wood,

Re: Samantha Mulcahy– deceased
Re: Kimberley Sampson– deceased

Thank you for your Regulation 28 Report to Prevent Future deaths following the inquest into the deaths of Samantha Mulcahy and Kimberley Sampson dated 19th September 2023.

The loss of a young woman is a devastating tragedy for the wider family and healthcare professionals involved. We would like to begin by extending our deepest and heartfelt condolences to Samantha and Kimberley's family for their deep loss.

This response has been developed following input from members of the RCOG Patient Safety Committee and Senior Officers of the College.

We recognise and respect the narrative conclusion from the inquest that Samantha and Kimberley died as a result of

- 1a. Multi-organ failure
- 1b. Disseminated Herpes Simplex 1 Infection
- 1c. Herpes simplex virus acquired before or around the time of delivery
2. Third trimester pregnancy

We also recognise the matters of concern, in particular concern 2;

Evidence given at the inquest revealed that Herpes Simplex can be fatal if contracted in pregnancy and whilst deaths are rare there is no specific guidance in relation to treating women in the post-partum period with anti-viral therapy. It was accepted by all who gave evidence that antiviral medication would have been the recognised treatment for Herpes Simplex (specifically Acyclovir). The Trust has made some minor amendments to its protocols but there is no national guidance either in place back in 2018 or currently in 2023 on prescribing antiviral medication to women who present with signs of systemic infection. Had Acyclovir been prescribed at an earlier stage it is likely to have significantly reduced the risk of death from progression of the disease. Sepsis protocols cover antibiotic therapy but not antiviral therapy. What was abundantly clear from the evidence before the court was that this is a rare but often fatal disease if contracted in the peripartum



period and more needs to be done to raise awareness of it as a potential diagnosis to exclude in sepsis pathways and for early consideration of the use to Acyclovir.

The College is currently in the process of updating its Green-top Guidelines on ***Sepsis in pregnancy (No. 64a)*** and ***Bacterial sepsis following pregnancy (No. 64b)***. The new name of the combined guideline will be ***Identification and management of maternal sepsis during and following pregnancy (No. 64)***. We will ensure that this updated version will contain guidance on the timely identification and treatment of herpes simplex. This is currently scheduled for publication in March 2024.

The RCOG is committed to improving the standard of care provided for women by working collaboratively with all stakeholders, including Coroners.

Yours faithfully,

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CEO Royal College of Obstetricians and Gynaecologists