

**RESPONSE TO A REPORT TO PREVENT FUTURE DEATHS
REGULATION 29 OF THE CORONERS (INVESTIGATIONS) REGULATIONS
2013**

Please do not include any living persons' names in this document, in accordance with the Chief Coroner's [PFD Publication Policy \(2026\)](#).

THIS RESPONSE IS BEING SENT TO: **The Senior Coroner, Penelope Schofield, for the Coroner Area of West Sussex, Brighton and Hove**, in response to a '**REPORT TO PREVENT FUTURE DEATH REGULATION 28**' following an inquest into the death of **MR PETER GURNEY** that concluded on **06 MAY 2026**.

1.	<p>RESPONDENT</p> <p>In line with our duty under Regulation 29 of the Coroners (Investigations) Regulations 2013, [REDACTED], Minister of State at the Ministry of Defence, provides this response within 56 days (plus any extension granted) of the date of the Report to Prevent Future Deaths.</p>
2.	<p>DATE OF RESPONSE:</p>
3.	<p>CONFIRMATION OF CORONER'S MATTERS OF CONCERN</p> <p>The MATTERS OF CONCERN were identified in the report are as follows:</p> <p><i>The MOD is aware that there are current concerns around the possible link between exposure to Nitrobenzene and other explosives and bladder cancer. The MOD has been aware of this for some time. Evidence heard at the Inquest was that neither active nor past employees, who have been subject to this exposure through their work, have been warned to get tested. Unfortunately, by the time Mr Gurney realised he had bladder cancer the disease had taken hold and it had become inoperable.</i></p>
3.	<p>DETAILS OF ACTION TAKEN, how has the concern been addressed. [If no action is proposed please explain why here].</p> <p>The Ministry of Defence (MOD) takes the welfare of our veterans extremely seriously and closely monitors any emerging issues that may be of consequence to this community. Any actions taken by the MOD must be based on robust evidence.</p> <p>The MOD's current assessment, based on extensive discussions with our medical experts and in line with NHS/NICE guidelines, is that there remains insufficient evidence to establish a causal link between bladder cancer and occupational exposure to nitrobenzene in Explosive Ordnance Disposal (EOD) personnel, and further research is required.</p> <p>In line with established national screening guidance, the MOD does not consider it appropriate to indirectly or directly promote medical testing for bladder cancer in EOD personnel, in the absence of clear supporting evidence. Screening for cancer can carry risks including false positives leading to unnecessary interventions, or false negatives providing a false sense of</p>

	<p>reassurance. There are also risks of significant anxiety caused to recipients of any warning, irrespective of whether they decide to get tested. The MOD therefore should not encourage people to get tested for bladder cancer without strong evidence.</p> <p>Irrespective of whether individuals perceive they are at high risk or not, they are advised to seek medical advice through their primary care provider should they experience any symptoms associated with bladder cancer such as blood in the urine. Symptomatic patients presenting to Defence Primary Healthcare providers would be investigated in line with NHS and NICE guidance.</p> <p>I am assured that current EOD personnel are protected by established policies designed to mitigate against exposure to hazardous substances. This includes nitrobenzene, which is no longer widely used in this field. I have also been assured by EOD leaders that there is widespread awareness of this issue among the veteran community and that personnel have been warned of nitrobenzene's toxic nature since at least 1993. While the MOD does not confirm any risk of cancer, the 2025 study has raised the issue to over 2,000 EOD veterans. EOD seniors remain in close contact with the author of this study and are alert to any further developments in this field.</p> <p>The question of occupational causation has been referred to the Independent Medical Expert Group (IMEG) which is currently developing its expert medical advice. It is expected to identify areas where further research is required.</p> <p>The MOD will continue to monitor emerging evidence and will keep its position under review in light of any new findings.</p>
4.	<p>DETAILS OF FURTHER ACTION PROPOSED <i>Please note that any links to webpages included in the response will not be checked for sensitive information prior to publication, as the information is already online.</i></p> <p>As above, the MOD has referred the matter to IMEG for further consideration. Future action will be determined by IMEG's advice and any other evidence that emerges in the medical literature.</p>
	<p>SIGNATURE</p> 