I, Stephen Raymond Carey, Coroner, having investigated the death of Kaylene Louise MUNDY

Find that:

(a) The identity of the deceased is Kaylene Louise Mundy;
(b) Ms Mundy died in the circumstances described in this finding;
(c) Ms Mundy died on 14 December 2013 at Gargana Court, West Moonah;
(d) Ms Mundy died as a result of acute right-sided congestive heart failure (cor-pulmonale);
(e) Ms Mundy was born in Reservoir, Victoria on 18 March 1973 and was aged 40 years at the time of her death;
(f) Ms Mundy never married, was the mother of three adult children and was unemployed.

Circumstances Surrounding the Death:

The investigation in relation to Ms Mundy’s death identified that she began abusing illicit drugs approximately 15 years prior to her death. This was during a period when she was in a relationship in Queensland with Scott Lego. At this time she was addicted to heroin. After 2 or 3 years she broke up this relationship and is described as having gone on a “drug bender” for approximately 6 months during which time she left her young children in the care of her father in Ipswich, Queensland. When she returned to Ipswich an intervention was initiated by her father who retained her in his home for approximately 2 weeks during which time she managed to break her heroin addiction but unfortunately replaced this with amphetamine and alcohol.

Between 2001 and 2002 she began a relationship with Charlie Harrison; they resided for a period of time in South Australia during which time she continued to use amphetamine and alcohol.

After this relationship she formed a number of other relationships all characterised by drug abuse and violence. From this time she continued living with her son, Russell John Mundy.
Ms Mundy moved to Victoria in 2011 with her son Russell, and she rekindled a relationship with Matthew Johnson, the father of Russell’s brother. During this period Ms Mundy’s drug abuse continued and escalated to a range of drugs including amphetamine, Oxycontin and heroin. The relationship with Mr Johnson was volatile with extreme violence towards Ms Mundy and the relationship ended in 2012 when Mr Johnson assaulted Russell. Ms Mundy and Russell then moved to Tasmania.

Ms Mundy was admitted to the Tasmanian Alcohol & Drug Service (ADS) Opioid Pharmacotherapy Program (TOPP) on 29 February 2012 after an initial clinical assessment on 20 February 2012. Ms Mundy is described as an unsanctioned transfer from Victoria where she had been receiving treatment for her opioid dependence in the form of Suboxone 8mg per day for the previous 3 months. When initially assessed at ADS she was noted to be in moderate opiate withdrawal and had injection sites on her forearm and wrist. Her history was reported to have included periods of treatment on the methadone program in Queensland and also the Victorian pharmacotherapy program before moving to Tasmania. Ms Mundy was assessed on a number of occasions with no evidence being found of a psychiatric disorder except for anxiety related to post-traumatic events and the suicides of partners and others, and there was no evidence of self-harm ideation.

Throughout her management at ADS there were numerous notations of intermittent intravenous opioid and amphetamine use. Upon entering the TOPP she was provided with a daily dose of Suboxone which she received upon attending on-site at the ADS Centre.

Ms Mundy befriended Christopher Welsh and his girlfriend Katrina Hay at some stage after her move to Tasmania; they were both drug users and clients of ADS. Following Ms Hay’s death caused as the end result of the injection of illicit drugs on 4 October 2013, Mr Welsh and Ms Mundy commenced a relationship. During this relationship she would stay with Mr Welsh between 3 to 5 days per week at his home at 2/6 Gargano Court, West Moonah, whilst her son Russell would remain at her residence, 16/3 Narida Place, West Moonah. It is established that Ms Mundy and Mr Welsh would abuse drugs together. It is also apparent that she would often request Mr Welsh to inject drugs intravenously into her neck as veins in other sites on her body had collapsed due to ongoing injection of drugs. Ms Mundy maintained her daily appointments with ADS receiving daily doses of Suboxone; her final treatment was at 10:32am on 14 December 2013.

After receiving her dose of Suboxone on 14 December 2013, Ms Mundy went to her residence and provided Russell with food and money. She then travelled to the Glenorchy Centro shopping centre and met Mr Welsh as planned earlier and they then travelled back to Garango Court, arriving there at approximately 12:00pm. Approximately 1 hour later Mr Welsh called emergency services requesting an ambulance reporting that Ms Mundy was struggling to breath. Tasmanian Ambulance Service attended and CPR was attempted for 24 minutes without success.

A post-mortem was conducted by Dr Donald Ritchey who found on external examination recent needle injuries of the neck and arm. His post-mortem findings were that Ms Mundy had died as a result of an acute right-sided congestive heart failure (cor pulmonale), which had resulted from intravenous injection of crushed tablets (alprazolam). The police investigation indicated that Ms Mundy had injected crushed Xanax (alprazolam)
intravenously after which she commenced having difficulty breathing and death followed thereafter.

**Comments and Recommendations:**

Dr Ritchey comments following his autopsy:

“Alprazolam (including the brand name Xanax) is manufactured for oral ingestion only. The practice of crushing tablets and injecting them intravenously is apparently done to produce a rapid increase of the drug in the blood (and therefore the brain) producing a pleasing high. Microcrystalline cellulose and other incipients are used in tablets as a binder that holds the ingredients together in a pill form. These materials are insoluble in water, alcohol and blood. These particulates are filtered from the blood by small capillaries in the lungs normally the first capillary bed encountered within the venous system after intravenous injection. The accumulation of this foreign debris within the lung capillaries causes inflammation (foreign body giant cell reaction seen microscopically). The combination of injected foreign material, in addition to the inflammatory response that process elicits, cause markedly increased blood pressure within the pulmonary vasculature (pulmonary hypertension). With repeated bouts of foreign body injection the increased pressures within the lungs eventually overwhelms the ability of the heart to pump causing acute (right sided) heart failure (sometimes referred to as cor pulmonale). This is characterised clinically as difficulty breathing followed by sudden death as was reported in this case. This contrasts a typical “overdose” of alprazolam that causes death by CNS and respiratory depression in which an individual falls asleep and, in the unconscious state, unable to protect their airway resulting in death.”

The very high risk of death due to complications resulting from the injection of tablet form medication is again highlighted by this tragic outcome. The contributory conduct of Mr Christopher Welsh is also highlighted. His actions endanger not only his own health but that of others and I recommend that particular attention be given to his drug taking activities by Tasmania Police and Alcohol and Drug Services.

I wish to convey my sincere condolences to Ms Mundy's family.

**Dated:** 8 October 2015 at Hobart in the state of Tasmania

**Stephen Raymond Carey**

**Coroner**