



16 March, 2016

Holman Webb Lawyers
123 Angel Place
SYDNEY, NSW, 2000

Attention: Ms Zara Officer

Dear Ms Officer

ALEX BAILIFF

Mr Bailiff has been a patient under my care intermittently at the psychiatric clinic of Matthew Talbot Hostel. He came to Sydney from the ACT, where he had been treated with antipsychotic medication given by long acting injection. However, he maintained that he did not have a mental illness, and that his presentation was entirely due to the effects of a serious head injury sustained at the age of fifteen.

He did have features of frontal lobe injury. However, his neurological and cognitive function was surprisingly intact. Over time, Mr Bailiff became increasingly manic, and it became clear that he did in fact have a relapsing mental illness. He was finally admitted to the psychiatric ward of Concord Hospital under the Mental Health Act at the initiative of the police, and was detained in hospital for a month, and discharged on a combination of antipsychotic medication (paliperidone, 150 mg every four weeks) and the mood stabiliser valproate in tablet form.

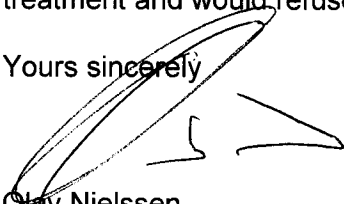
Mr Bailiff was markedly improved after resuming treatment, as he was less grandiose and more realistic in his conversation. However, he became preoccupied with his treatment and all consultations revolved around his requests to reduce and stop the medication. He did eventually stop the treatment once he had established that there was no legal requirement for him to take it (customarily, residents at this hostel are required to adhere to prescribed treatment, but clearly that is not enforceable).

After he stopped medication, there was a progressive deterioration in his mental state, with increased grandiosity, irritability and intrusiveness, which culminated in a further admission to hospital under the Mental Health Act.

When unwell, Mr Bailiff's ability to maintain housing and care for himself in other ways is quite impaired. Moreover, he is far more likely to come in conflict with others and become involved in vexatious litigation.

I believe he requires treatment as a condition of a CTO, as he does not recognise the need for treatment and would refuse treatment and become unwell otherwise.

Yours sincerely


Olav Nielssen
Visiting Psychiatrist
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