

04 SEP 2017

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Dear Ms Duff

**Official Information Act 1982 request**

Thank you for your email of 27 July 2017 requesting, under the Official Information Act 1982 (OIA), the following information:

- “Please consider this an Official Information Act request for any deaths involving synthetic cannabis or psychoactive substances referred to the coroner in the past four years (2012-2016) and so far this year (2017).”
- “Please include reports into any deaths since 2016, if available, and as much information as possible into the deaths including region, age of victim, date and cause of death.”

I must first advise that we are refusing the part of your request relating to psychoactive substances in accordance with s 18(f) of the OIA as the information cannot be made available without substantial collation or research.

However, in response to that part of your request relating to synthetic cannabis, I can advise that there has been one confirmed case in the period 2012 to 2017 (inclusive) where the Coroner found that synthetic cannabis was the primary cause of the person’s death. This death occurred in 2016. A copy of the Coroner’s findings for this death is released to you under the Coroners Act 2006 and is attached to this response. The findings set out the region, age of deceased, date and cause of death.

In order to provide you with further context in terms of the information you have requested, please note that a number of potentially synthetic cannabis-related deaths have been referred to the Coroner since 2012. These cases are active as the final cause of death is yet to be determined. Due to the complexity of identifying and confirming synthetic cannabis as being related to the cause of death, at this time I am unable to provide you with a number of the current active cases with the Coroner. With any death involving drugs, the Coroner has to weight up all the evidence and decide, on the balance of probabilities, the extent to which the substance contributed to the person’s death.

Please note that the information in this response is released with the approval of the Acting Chief Coroner.

If you are not satisfied with our response to your request, you have the right to make a complaint to the Ombudsman under section 28(3) of the OIA. The Ombudsman may be contacted by writing to the Office of Ombudsman at PO Box 10152, Wellington 6143, by email to [info@ombudsman.parliament.nz](mailto:info@ombudsman.parliament.nz) or by phone to 0800 802 602.

I trust you find this information helpful.

Yours sincerely



Jacquelyn Shannon

**Group Manager, Courts and Tribunals, Regional Service Delivery**

Ref: 63749

Encl: Coroner's finding for Toa Rangatira Joseph Tuau (CSU-2016-HAM-000314)

## CERTIFICATE OF FINDINGS

## Section 94, Coroners Act 2006

IN THE MATTER of Toa Rangatira Joseph TUAU

The Secretary, Ministry of Justice, Wellington

As the Coroner conducting the inquiry into the death of the deceased, after considering all the evidence admitted to date for its purposes, and in the light of the purposes stated in section 57 of the Coroners Act 2006, I make the following findings:

Full Name of deceased: Toa Rangatira Joseph TUAU  
Late of: [REDACTED]  
Fairfield  
Hamilton  
Occupation: Unemployed  
Sex: Male  
Date of Birth: 30 July 1980  
Place of Death: [REDACTED]  
Fairfield  
Hamilton  
New Zealand  
Date of Death: 20 July 2016  
Cause(s) of Death  
(a). Direct cause: Unascertained causes in a background of  
(b). Antecedent cause (if known): Consumption of synthetic cannabis  
(c). Underlying condition (if known):  
(d). Other significant conditions contributing to death, but not related to disease or condition causing it (if known):

## Circumstances of death:

I find that Toa Rangatira Tuau died at [REDACTED] Fairfield, Hamilton, on 20 July 2016 from unascertained causes in a background of consumption of synthetic cannabis.

Pursuant to section 74 of the Coroners Act 2006, I prohibit the making public of any photographs taken of the person who is the subject of this finding following their death, on the grounds that it is in the interests of decency to do so.

Those findings, and my reasons for making them, are also set out in my written findings dated:  
22 June 2017

Signed at Hamilton on 22nd day of June 2017.



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**Coroner Michael Robb**

IN THE CORONERS COURT  
AT HAMILTON  
(In Chambers)

CSU-2016-HAM-000314

UNDER THE CORONERS ACT 2006

AND

IN THE MATTER of an Inquiry into the death of  
TOA RANGATIRA TUAU

Date of Findings: 22 June 2017

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**FINDINGS OF CORONER ROBB**

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[1] Pursuant to section 77 of the Coroners Act 2006 (“the Act”), I have decided to conclude this inquiry by holding a hearing on the papers. This is because there are no circumstances relating to this death which make an inquest necessary or desirable, and I have sufficient evidence before me in documentary form to fulfil the purposes of opening and conducting an inquiry as set out in section 57 of the Act.

## **INTRODUCTION**

[2] Toa Rangatira Tuau was visiting with friends on the morning of 20 July 2016, there he consumed synthetic cannabis and a short time later suddenly collapsed and died.

## **ISSUES**

[3] The issues for this inquiry are: what was the cause of Toa Rangatira Tuau’s death, what were the circumstances that led to his death, and are there any comments or recommendations concerning his death that may, if drawn to public attention, reduce the chances of death in similar circumstances.

## **MATERIAL FACTS**

[4] I have received and reviewed the full post-mortem report, the ESR toxicology results, a report from Mr Tuau’s personal doctor, a report from Emerge Aotearoa and a consultant psychiatrist, a statement from Paula Gardner, Jordan Roberts, Joans Ward, Police notebook entries, and photographic evidence. Based on that evidence I have reached the conclusions set out below.

[5] Toa was born on 30 July 1980, he was of Maori ethnicity, and was 35 years of age when he died on 20 July 2016. When he was about 18 years of age Toa was diagnosed with chronic schizophrenia. From that time he was admitted to a psychiatric facility on some seven occasions. He had been involved in physical altercations leading to head injuries when he was 22 and 24 years of age. Toa had two instances of attempted drug overdose and had a long history of polysubstance abuse, including cannabis, alcohol and synthetic cannabis. He was the subject of adult mental health care and was living at the Emerge Aotearoa residential facility, in Hamilton,

at the time of his death. Toa was prescribed medications to address his schizophrenia which was taken morning and night together with intravenous medication (IMI) of 150 mg of Paliperidone.

[6] Emerge Aotearoa provides supported residential accommodation to individuals diagnosed with a mental health and/or addiction issue. Toa had entered the residential supported accommodation service on 5 October 2012 and had remained there as a residential client until 18 November 2015, when he was transitioned out into a flatting situation in the community. From that time Toa was supported within the community. On 23 May 2016 Toa was referred back to residential supported accommodation, where he continued to reside through to his death. The supported accommodation service is staffed on-site between the hours of 7 a.m. and 11 p.m. seven days a week. The support provided involves encouragement to enrol and attend courses/programs, find paid or voluntary work and oversee oral medication administration under direction of clinical teams. The ultimate aim is to stabilise clients and provide them with the tools and skills to transition successfully back into their community and independent living. As a recipient of residential supported accommodation Toa was free to come and go from the residence without restriction.

[7] Over the weeks leading up to Toa's death, staff at Emerge Aotearoa had become concerned that Toa was consuming synthetic cannabis. On 23 June 2016 Toa had been found consuming synthetic cannabis with another individual, in a bedroom at the residence. On 4 June 2016 Toa had presented at the Waikato Hospital Emergency Department following an incident where he had become dizzy and collapsed hitting his nose on a bench top. He was briefly unconscious on that occasion and reported having used synthetic cannabis.

[8] On the morning of 20 July 2016 Toa attended the office at Emerge Aotearoa where he was administered his morning medication. He appeared to be well at that time, and was asked about his plans for the day before heading back to his room at about 8:30 a.m. At about 10:30 a.m. that same morning he visited acquaintances he knew at [REDACTED] Fairfield, Hamilton. That address was near to the Emerge Aotearoa residence. While at that address he produced a bag of synthetic cannabis and he, together with two others, consumed two to three "cones" each of the synthetic cannabis. The consumption of that synthetic cannabis led one individual to feel dizzy and to go and lie down in his room leaving Toa sitting on a chair in the kitchen. Toa was then heard making unusual noises and sounding as if he was having a seizure, and he was then found on the floor in the kitchen unconscious. CPR was undertaken and emergency services called but he was unable to be revived.

[9] Toa's death was reported to the Duty Coroner who directed a post-mortem. The post-mortem revealed that Toa had some health issues but none that would have explained his death. The pathologist was unable to ascertain a direct cause of death but noted the witness accounts of Toa consuming synthetic cannabis. ESR toxicology analysis of Toa's blood revealed consumption of his prescribed medication, consistent with normal use, but analysis was unable to detect the synthetic cannabis. ESR explained that analysis of synthetic cannabinoids will only lead to detection for a limited range of synthetic cannabinoids, with dozens of different synthetic cannabinoids as yet being unable to be detected through their analysis processes.

## **DISCUSSION OF THE FACTS AS THEY RELATE TO THE ISSUES**

### **WHAT WAS THE CAUSE AND CIRCUMSTANCES OF TOA'S DEATH?**

[10] Following Toa's treatment at the emergency department for his dizzy spell fall on 4 June 2016 he was assessed by his personal doctor with no clear medical cause being identified. There was evidence that Toa had been consuming synthetic cannabis some time prior to that fall, but no evidence of consumption of synthetic cannabis immediately before the fall. The evidence is that Toa was regularly consuming synthetic cannabis by the time of his death. The autopsy was unable to determine an exact cause of death and the ESR analysis of Toa's blood was unable to identify the particular synthetic cannabinoid that Toa had consumed, nor as a result the level of that synthetic drug in his body.

[11] Toa's death followed shortly after his consumption of synthetic cannabis. One of the other individuals with Toa, who had also consumed that same synthetic drug, felt dizzy to the point where he went to rest in his bedroom. It appears likely that in the overall circumstances of Toa's death, and the absence of any pathological finding for the cause of his death, that his consumption of the synthetic cannabis in some way impacted on his death. How or to what extent is unable to be established on the evidence that I have for me.

### **ARE THERE ANY COMMENTS OR RECOMMENDATIONS CONCERNING TOA'S DEATH THAT MAY, IF DRAWN TO PUBLIC ATTENTION, REDUCE THE CHANCES OF DEATH IN SIMILAR CIRCUMSTANCES?**

[12] With there being uncertainty as to the cause of Toa's death, and the impact of his consumption of synthetic cannabis, I am not in a position to make any recommendations or comments pursuant to section 57A of the Coroners Act 2006.



## FINDINGS

[13] I find that Toa Rangatira Tuau died at [REDACTED] Fairfield, Hamilton, on 20 July 2016 from unascertained causes in a background of consumption of synthetic cannabis.

### **Restriction on Publication**

[14] Pursuant to section 74 of the Coroners Act 2006, I prohibit the making public of any photographs taken of the person who is the subject of this finding following their death, on the grounds that it is in the interests of decency to do so.

[15] I take this opportunity to extend my condolences to Toa's family and friends for their loss.



**Coroner Michael Robb**