Informed Consent for Release of Medical Information

Records to be released/Dates: Describe information to be disclosed and dates of service for records released in a manner that specifically identifies the relevant information:
Medico-legal Report
Research/Teaching: I consent to have the medical records listed above made available for teaching and research in the healthcare context. I understand that the image may be seen by members of the public, in addition to scientists and medical practitioners in their professional education. All identifying information will be removed and every attempt will be made to ensure my anonymity. I understand, however, that complete anonymity cannot be guaranteed.
YES NO
Publication: I consent to have the medical records listed above made available for use in medical and scientific journals, textbooks, and publications. The material will be published without any identifying information such as my name and every attempt will be made to ensure my anonymity. I understand, however, that complete anonymity cannot be guaranteed.
YES NO
Other Releases: I consent to have the medical records listed above made available to the following person(s) or category of persons and for the following purposes (describe who will receive information and purpose for disclosure) YES NO
TES V NO
The risks and benefits of releasing my medical information to the above third parties have been explained to me in terms I understand.
I understand that my authorization is voluntary. I may refuse to sign this consent without negatively effecting future treatment or relationship with the person(s) or organization(s) requesting authorization to release my information.
I understand that I may revoke this consent at any time by contacting the person or organization requesting this authorization.
By signing this form or placing my mark in the signature section, I confirm that I have read this consent form or it has been read or translated to me in language I understand. All of my questions related to this release have been answered to my satisfaction.
Name of Client Burgarie 14. MAKIN Signature Almaning Date 28/06/2022.
CENTRE FOR TO

Informed Consent to Medical Examination

Indicate which examination(s) will be performed (If additional explanation is needed, please include below)

Medical / Psychological / Psychiatric Other (Please Specify)

Prior to an examination, it is necessary that you give your informed consent. By signing this statement, you are confirming that you have been informed of the nature of this examination or evaluation and you freely consent to the examination(s) indicated above. Please review the following points before signing:

The purpose and objectives of this examination have been fully explained to me and I understand that one of the objectives of this examination is to facilitate the investigation and documentation of torture cases for legal purposes.

The process of the examination has been explained to me in clear terms which I understand.

I understand the benefits and the potential risks or discomforts associated with this examination.

I understand that this examination may include related diagnostic tests, sample collections, or interviews. I may decline to participate in any of these related procedures without negative consequences.

I understand that my participation in this examination is completely voluntary. I may withdraw consent or discontinue participation at any point throughout this procedure.

I understand that all information supplied and produced during this examination will form part of my confidential medical record. My confidential data will be stored in a secure location and I will need to give further consent before any confidential images, recordings, or medical records are shared with third parties for legal proceedings or any other use beyond what is necessary for an effective examination and what is required by law.

I have had the opportunity to ask questions about the examination and any questions that I have asked have been answered to my satisfaction.

I understand that I have the right to review and inspect my medical records at any time prior to or after consent and I have the right to receive a copy of my medical records upon request.

Forensic Photography:

I consent to have p	hotographs take	n of me for exami	nation and evaluation p	ourposes	·
YES NO Name of Client Name of Examiner	BUREGIETA MI	Signatur	Amartinis P	_ Date _ Date	3/05/2022



Dafiki



Report for AFRICAN CENTRE FOR TREATMENT AND REHABILITATION OF TORTURE VICTIMS (ACTV)

MEDICAL REPORT FOR MR.BUREGYEYA MARTIN

(According to the Istanbul Protocol)

I. Case information

Date of exam: 3rd May, 2022

Exam requested by; Request by Salam for Democracy and Human Rights

Case or report No: ACTV/K/3779/2022

National ID No: CM861011OA79LA

Subject's given name: Martin Subject's surname: Buregyeya

Birth date: 27th October, 1986 Gender: Male

Reason for exam: To evaluate client's allegations of torture and ill-treatment

Clinician's name: Dr. Rafiki Robert, MD, MBChB (2017) in my capacity as the Medical Doctor

at African Centre for Treatment and Rehabilitation of Torture Victims (ACTV).

Interpreter: No Informed consent: Yes

Subject accompanied by (Name/Position): None

Place of examination; African Centre for Treatment and Rehabilitation of Torture Victims Medical Clinic - Kanyanya, Kampala, Uganda

Persons present during exam (name/position): Nantume Annet (ACTV Nurse)

Medical report transferred to: Salam for Democracy and Human Rights (SALAM DHR)







Block No. 207, Plot No. 2756 Kanyanya Gayaza Rd, just after Gaz Petrol Station as you head to Greenfield Gardens





actv@actvuganda.org

1

II. CLINICIAN'S QUALIFICATION

Robert Rafiki, MD graduated with a Bachelor of Medicine and Bachelor of Surgery from Gulu University, Uganda in January 2018. Since 2019, he has been employed by the African Centre for Treatment and Rehabilitation of Torture Victims (ACTV) of which ACTV is a member of the International Rehabilitation Council for Torture Victims (IRCT).

He is a member of the Uganda Medical and Dental Practitioners' Council (UMDPC), the licensing body for Ugandan Medical Doctors and Dental Surgeons. He is actively licensed by the same body.

He has a strong professional interest in human rights and fundamental freedoms, in addition to promoting the role of forensic medicine in investigations of Torture and other cruel inhumane Degrading treatment. He was trained in effective investigation and documentation of torture and other cruel inhumane degrading treatment in line with the Istanbul Protocol in 2019 and a refresher on the same in 2020.

He has 3 years' experience in medico-legal documentation of survivors of torture and other cruel inhumane degrading treatment.

III. STATEMENT REGARDING VERACITY OF TESTIMONY

I, Dr. Rafiki Robert, have personally examined Mr. Buregyeya Martin and reviewed the facts recited in this written report. I believe all statements to be true. I would be prepared to testify to these statements based on my qualification, personal knowledge, experience, and belief.

IV. BACKGROUND INFORMATION / GENERAL INFORMATION

Martin is a 35 year old Male, Ugandan, Munyankole by tribe, Anglican by religion. He is single with no child. He was born and raised in Rwakiziba, Sheema district in Uganda, and he is a son of Late Muhumuza William and Miss Barigyirwe Jadress. Martin is the 8th born in a family of 12 children (8 boys, 4girls). He attended Ryakasinga Model Primary school, Sheema district for his primary education (1997-2003) from where he joined Shuuku Vocational Secondary, Sheema district for his ordinary level (2004-2008). He later joined Crested Crane Hotel and Tourism institute Jinja in 2009 where he attained a Certificate in Hotel Management in 2010. He then joined Multi-tech Business School, Kampala in 2011 where he attained a Diploma in Business Administration and Management at Multi-tech Business School, Kampala in July 2014. He reports that he got a job with Serena Hotel, Kampala in 2010 where he worked as a Waiter, and during the same time he was also studying for his Diploma and Bachelor degree. He resigned in 2016 and left for Bahrain. He is currently unemployed with no source of income. Currently resides in Nansana, Wakiso district in Uganda at his sister's home.



Past Medical History.

Client reports no history of chronic illnesses such as Diabetes, Hypertension, epilepsy or sickle cell. No history of medical admissions. No known drug or food allergies. No history of surgical operations or blood transfusion. His current Human Immune Virus (HIV) serostatus is not known, however he reports to have been tested in in January 2022 and the results were negative (Test results not seen). He is currently on treatment for Spinal Tuberculosis.

Review of prior medical evaluations of torture and ill-treatment

- 1. Prescription form dated 29th April 2021 from Nakasero Hospital pointed out the continued Musculo-skeletal pains and nightmares as a result of physical and psychological torture in 2018. This was a request for Review by one Dr. Mwesiga E.
- 2. Prescription form dated on 31st March 2021 from Nakasero Hospital pointed out the Chronic Right sided back pain that makes movement difficult with symptoms of Post-Traumatic Stress Disorder (PTSD), Depression and Anxiety. This was signed by Dr. Alinaitwe.
- 3. Prescription form from Uganda Martyr's Hospital Lubaga showed that he received Tramadol/Paracetamol 50/325 mg for 7 days. This suggests he probably had pain as the above is a pain killer.
- 4. HMIS TB 008 TB Client held card in the names of Buregyeya Martin with different review dates starting from 30th/June/2021 to 3/February/2022 points to Martin having been treated for Tuberculosis.
- 5. Medical form from Mbarara Doctor's Plaza Medical Centre dated 28th/June/2021 points out tests done and medications prescribed. Among the laboratory tests done include ESR (Erythrocyte Sedimentation Rate) of 76mm in an hour and a positive Urine LAM (Lipoarabinomannan). There was also a radiological investigation request for Lumbosacral Xray and Chest Xray. He was managed for Pott's disease with RHEZ (Rifampicin, Isoniazid, Ethambutol and Pyrazinamide) plus Pyridoxine for 2 months and Soral for 10 days. This was signed by Dr. Atukunda Nodad.
- 6. CT Scan report of the Thoracic spine dated 28th/June/2021 showed features of Inflammatory process pointing to Pott's disease however neoplastic disease was a differential
- 7. Medical form dated 27/July/2021 from Mbarara Doctor's Plaza Medical Centre shows that Martin was managed for Pott's disease (based on CT scan findings) and pointed out that he had completed the initiation phase of Anti-Tbs.



Blafiki

V. Allegations of torture and ill-treatment

Client reports that on 6thAugust, 2016 he left Uganda for Bahrain in search for better working conditions. When he reached Bahrain he started working as a receptionist at 100 Residence in Juffair, Bahrain where he worked for about 02 years. In December, 2017 while working, he met a one Egyptian man, Muhammad Ahmed Al Kaabi (a tenant at 100 Residence) with whom he occasionally had conversations about a number of things. In one of their conversations, Martin expressed his desire for a better paying job.

In July 2018, Muhammad helped him leave 100 residence. He helped him retrieve his passport that had been withheld by his employers when he arrived in Bahrain (Martin pointed out that it was a practice for the company to withhold the foreign employee passports until the end of their contracts). When he left the company he joined Muhammad (who at the time dealt in Car business). He started working as a marketing manager for Muhammad which he did for about 01 and a half months. Martin reported that on the 7th September, 2018, he, Martin Muhammad and 02 others (Senfuka Israel Baker; a Ugandan National and Ihab) were arrested from Reef Island, Al-Khud Building Flat 79 by the Bahrain Criminal Investigation Department (CID) Officers. The Officers forcefully barged into the room in which he, Muhammad, Ihab and Ssenfuka Baker were. They were immediately handcuffed with their hands put behind, and then taken to a police station (he does not know the name of the police station) where they spent about 1 hour in police custody. The room in which he and the three others were detained, was of the size of a typical Ugandan single room (10sqft) with adequate light and ventilation. They were then picked and taken to another room and photos of each of them were taken (full body with no shirt, no trousers, but only underpants while holding a placard with certain written numbers on it). This process lasted about one hour. They were then blindfolded and taken into a car which drove off until they reached Jau Maximum Prison. Within Jau maximum prison they were taken to the CID building (which he points out that it is known as the torture chamber for the CID).

While at Jau Prison he was put in a detention room alone; the room was extremely dirty, very cold, full of rats and cockroaches, it had three decker beds, had bright lights that were never switched off. It had a dirty toilet that could not be flushed and the room had a ventilator high above the toilet. The next day he was taken to another room for interrogation. He was told that he will be asked questions and will be expected to answer according to what they wanted to hear not what he knows. This made him worried and so scared about what their expectations were. One man slapped him on both cheeks at the same time from the front, another one punched him on the head. He started bleeding through the nostrils, got a sharp tooth ache (pain of the tooth) in his right lateral side of his upper jaw, and bleeding from the mouth. This left him with a shaky tooth which he says he lost 9 days later.



*Jafiki

He was then blind folded, cuffed on both his fore arms and legs, made to sit in an electric chair and was electrocuted with chest and back rods. During this electrocution he would lose consciousness, and on gaining it, he found that he had urinated and defecated on himself. He was then taken back to his room, cuffs were removed and told to remove the blind fold after them closing the door of the detention room. He realized that there was food in the room which was very cold and he had no choice other than to eat it because he felt hungry and exhausted.

He says that due to the very bright lights in the room that were never switched off he could not tell time (could not tell it was day or night). He was then left to rest for some time (which he could not estimate and could not tell whether it was day or night) and then picked up again, blind folded and taken to another room, he was undressed and made to squat on the top of a bottle (with the mouth of the bottle entering/ penetrating through his anal orifice) and when this would happen he would be told to stand, and whenever the bottle fell off he would be told to sit on it again; this was repeatedly done for almost an entire day. He notes that this was painful, humiliating and embarrassing. He narrates that after this whole incident they kept asking him for passports, money, stamps and cars but he had no idea about what they were asking.

Later they suspended weights (he could not tell exactly what the weights were) onto his scrotum and this made him experience excruciating pain and later started urinating blood. In response to this, he reports to have been given a daily pill to swallow and was told that it was for what he was going through and needed the pill (he thinks the pill was to stop him from passing bloody urine).

He said that for the period he spent at this detention facility, several torture and cruel acts were done to him almost each day; He was forced to eat slippers (he would be told to bite the slipper, keep it in his mouth until they tell him to stop). At one point he was forced to climb a wall without a ladder which he tried, but was unsuccessful.

He was stripped naked and told to dance; while dancing his hands would be cuffed in front of his body, blind folded and the men around him would play with his genitals. After the dancing he was taken to a very cold and dark room. He was left there for some time from where he was picked and taken to his room. He was forced to drink water while he is in an inverted position (suspended with his legs up and head down).

He was made to lie down with his face facing up, a towel put on his face and water was poured into the towel. This made him fail to breathe and he was then subjected to a series of closed questions which he answered "yes" since he felt tired and had given up on his life. This incident lasted about 15 minutes.

He was forced to make a confession about his boss (Muhammad Ahmed Al Kaabi) through a translator who advised him that if he did not make the confession he would be subjected to more series of Torture.



He reports to have spent 40 days at this facility and was later transferred to Asri Detention Centre, Al Hidd (Dry dock) where he spent 1 year (going in and out of court during this time to attend court sessions on his case). He reports to have gone to court 5 times. This court was around Diplomatic area, Manama and that it was a high criminal court (He cannot tell the exact name of the court). Court sentenced him to 5 years and 3 months for money laundering and he was taken to Jau Maximum prison, building 9 (for expatriates). This made him depressed. He was put in a room that had 159 people in it (he points out that this was too crowded), with 3 people sharing a bed. He noticed that many people were coughing excessively and others had other illnesses. While here, he developed the habit of cigarette smoking since he noticed smokers would be given some time out of their prison cells to go and smoke (about 1 hour daily). He also reports that at one time, they were all taken for a test that involved introduction of "something" under the skin of the fore arm then a ruler used to measure where the piercing was made and some people would be picked out and taken away and isolated. The conditions in the prison were so terrible and unbearable for him. He complained to the prison authorities and was later transferred to another building which he notes had better facilities and improved conditions.

During the COVID19 pandemic in 2020 there was a call to decongest prisons and on the 14th/March/2020, 1415 prisoners were released but unfortunately he was not among this group. After 02 days another group was released, and he was one of them. They were taken to another building within Jau Maximum Prison and tested for COVID 19. The next day, they were all taken to Ariba Deportation Centre where he spent 6 months because there were no flights to Uganda due to the COVID 19 pandemic restrictions. While at Ariba Deportation centre he developed severe back pain and was taken to a certain hospital (he does not know the name but all he recalls is that it was for prisoners and security forces); medical check-ups were done on him which included Xray of the back but did not get results. He was then given medication although he did not get to know what he was being treated for.

He was able to fly back to Uganda in October 2020 but with different medical concerns. He visited some hospitals in Uganda where he was diagnosed with Potts Disease (Tuberculosis of the spine) and Post Traumatic Stress Disorder (PTSD). He reports to still be under medication but still experiences body weakness, flashbacks and is unable to think straight. He still smokes and has been unable to fight off this habit.



Blafiki

VI. REVIEW OF ILL-TREATMENT METHODS

Physical Methods

- Forceful arrest
- Smothering
- Slapping
- Suspension of weights on genitals
- Cuffing of both fore arms and legs
- Electrocution
- Exposure to extreme temperature (extreme coldness)
- Solitary confinement
- Poor detention conditions (congestion)
- Sexual abuse through introduction of inanimate object into his anus
- Touching and playing with genitals as a form of sexual harassment
- Forced nakedness
- Body Suspension ·
- Forced to chew slippers
- Exposure to bright light for a long period of time
- Denial to appear in court on time
- ' Feeding on cold food
- Deprivation of light
- Denial of sleep

Psychological Methods

- · Humiliation
- Intimidation
- Exposure to ambiguous situations
- Accentuating feelings of helplessness
- Performance of humiliating acts
- Death threats



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VII. PHYSICAL SYMPTOMS AND DISABILITIES

a) Acute symptoms and disabilities

Martin described his acute symptoms following the alleged ill-treatment above. According to his statement they include:

- Bleeding from nose and mouth and later loss of a tooth
- Urinated bloody urine
- Painful genitals
- Loss of hope
- Suicidal ideation
- Severe back pain
- Muscle aches
- Head ache
- General body weakness

b) . Chronic symptoms and disabilities:

At the time of this interview Martin stated that he had;

- Back pain
- On and off chest pains
- General body weakness
- Flash backs
- On and off numbness in lower limb
- Failure to fight off the behavior of smoking
- . on and off urinary incontinence



Blafiki

VIII. PHYSICAL EXAMINATION

1. General Examination:

Well kempt youth, in fair general condition (no signs of sickness). Has a smell of cigarette smoke on him. Fully conscious and alert. Oriented in time, place and person. Afebrile to touch (not feverish). No pallor of the conjunctiva and mucous membranes (has no anemia) No jaundice (yellowing of sclera or mucous membranes). No edema. No dehydration.

Vital signs

Blood Pressure= 122/80 mm Hg

Weight = 64 kg

Pulse Rate=67 bpm

Respiratory Rate= 15 bpm

Temperature=36.5 C

2. Oral

Brownish stains on some teeth especially at the back surface of the teeth in the upper jaw. Noted a missing 1st molar tooth in the right side of upper jaw. Tonsils normal (Pink and not swollen).

3. Chest

Chest is symmetrically moving with respiration. Noted a protruding joint between costal cartilage and body of the 7th rib on the anterior chest wall, left side. Non tender, hard and immobile. Normal overlying skin. Breath sounds normal.

4. Back

Appears normal externally with no noted deformities. Mild tenderness (sensation of pain) elicited on the entire spine.

5. Abdominal Examination

Abdomen is of normal fullness, moving with respiration. No visible surgical or therapeutic scars. No organomegalies (no swelling of organs in the abdomen such as liver, spleen etc). Bowel sounds heard and Normal.

- 6. Genitals; Appear normal externally. Non-tender (on palpation there is no pain felt by him)
- 7. Rectal Exam; externally no bruises or tears noted on rectal mucosa. Normal anal sphincter tone. Rectum empty.
- 8. Other systems were Normal



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IX. PSYCHOLOGICAL ASSESSMENT

Introduction

The Psychological assessment for Buregyeya Martin was done using a standardized instrument known as the Hopkins Symptom Checklist (HSCL-55 items) of the Harvard Program in Refúgee Trauma (2005). The instrument was developed to specifically assess and rate psychological consequences of exposure to traumatic events such as war, domestic violence, traffic accidents, earthquakes, torture, landslides, and floods. The checklist was developed using the diagnostic criteria for anxiety, depression, and Post-Traumatic Stress Disorder (PTSD) of the Diagnostic and Statistical Manual for mental disorders edition four (DSM-IV, 1985), which were maintained in the DSM-V (2013) developed by the American Psychiatric Association (APA). The HSCL-55 has high reliability and cross-cultural sensitivity which has given it wide acceptability and usability in many parts of the world, e.g. the Democratic Republic of Congo, Cambodia, Uganda.

The HSCL-55 has more advantages over and above its diagnostic characteristics because it was validated on a bio psychosocial model of psychological assessment; to include the physical and behavioral functioning domains, and it rates the severity of the symptoms experienced during the 2-weeks period prior to assessment. The HSCL-55 has five sub-scales, each with a specific number of items: Physical symptoms (4-items), Anxiety symptoms (10-items), Depression symptoms (15-items), Post-traumatic stress symptoms (PTSD) symptoms – (16-items) and Behavioral Functioning (10-items).

Scaling

The items are questions with pre-determined answers rated on a scale of 1 to 4, whereby; Not at all= 1, rarely=2, Sometimes=3 and Often=4. Therefore, each sub-scale has a minimum and maximum possible score, thus a minimum score of 4 and maximum score of, 16 for Physical symptoms, minimum score of 10 and maximum of 40 for Anxiety symptoms, minimum score of 15 and maximum of 60 for Depression symptoms, minimum score of 16 and maximum score of 64 for Post-traumatic Stress symptoms, and minimum score of 10 and maximum score of 40 for Behavioral functioning.

In the physical symptoms' domain, a total score between 4 and 8 indicates a "significantly mild physiological suffering" while a total score between 9 and 16 indicates "significantly severe physiological suffering".

In the anxiety symptoms domain, a total score between 10 and 20 indicates a "significantly mild anxiety symptoms" while a total score between 21 and 40 indicates "significantly severe anxiety symptoms".



In the depression symptoms domain, a total score between 15 and 30 indicates a "significantly mild depressive symptoms" while a total score between 31 and 60 indicates "significantly severe depressive symptoms".

In the Post-Traumatic stress symptoms domain, a total score between 16 and 32 indicates a "significantly mild post-traumatic stress symptoms" while a total score between 33 and 64 indicates "significantly severe post-traumatic stress symptoms".

In the behavioral functioning symptoms domain, a total score between 10 and 20 indicates "significantly mild problems in behavioral functioning" while a total score between 21 and 40 indicates "significantly severe problems in behavioral functioning".

Psychological Assessment Results for Buregyeya Martin

The following were the results of the psychological assessment for Buregyeya Martin by sub-scale of the Hopkins Symptom Checklist:

- 1. Physical symptoms; a score of 7/16 was realized. This score indicates significantly mild physiological suffering which is consistent with general physiological consequences of traumatic exposure e.g. physical beatings, restraining, traffic accidents, and rape.
- 2. Anxiety symptoms; a score of 36/40 was realized. This score indicates a significantly severe anxiety symptoms which are generally consistent with exposure to traumatic events e.g. war, domestic violence, traffic accidents, earthquakes, torture, landslides, and floods.
- 3. Depression Symptoms; a score of 47/60 was realized. This score indicates a significantly severe depression symptoms which are generally consistent with exposure to traumatic events as well as losses e.g. war, domestic violence, traffic accidents, earthquakes, torture, landslides, floods, loss and grief, disability.
- 4. Post-traumatic Stress Symptoms; a score of 61/64 was realized. This score indicates a significantly severe Post traumatic Stress symptoms which are always the direct consequence of exposure to traumatic events e.g. war, domestic violence, traffic accidents, earthquakes, torture, landslides, floods, whereby one is either the victim or witness of another person being victim of the traumatic event(s).
- 5. Behavioral symptoms; a score of 25/40 was realized. This score indicates significantly severe problems in behavioral functioning which is generally consistent with exposure to traumatic events e.g. war, domestic violence, traffic accidents, earthquakes, torture, landslides, floods.



X. PHOTOGRAPHS



Figure 1; Photo of ACTV/K/3722/2022





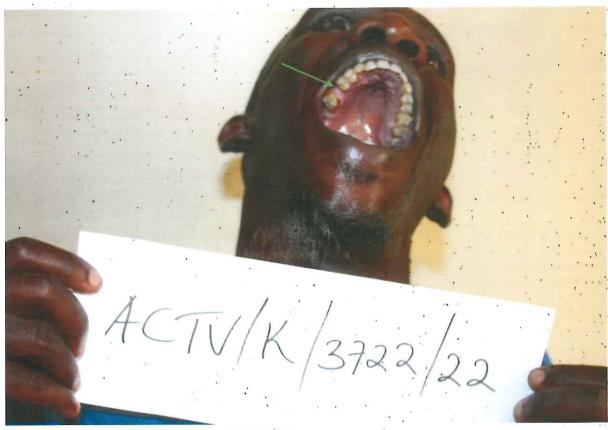


Figure 2; Photo of Oral cavity of ACTV/K/3722/2022





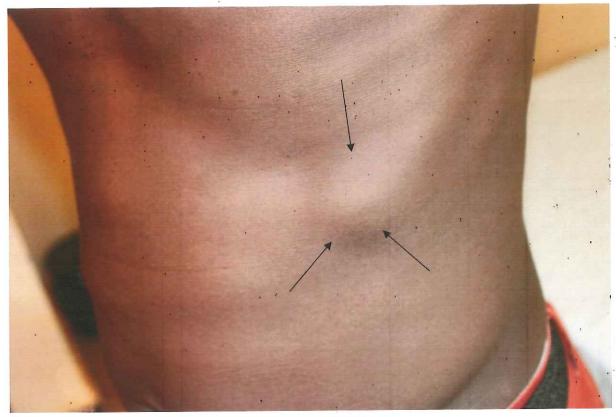


Figure 3; Protruding joint between the costal cartilages of 7th rib on left side of chest

XI. DIAGNOSTIC TEST RESULTS

- 1. Panoramic Dental Xray- In full permanent dentition Upper right 1st molar is missing, retained roots of upper right 3rd molar, no noted active caries in other teeth.
- 2. Chest Xray (2/6/2022) Normal findings
- 3. Lumbo-sacral spine Xray (2/6/2022) Lumbar Spine straightening due to paraspinal muscles, No features of Pott's disease



ERNEST COOK ULTRASOUND RESEARCH AND EDUCATION INSTITUTE (MENGO HOSPITAL)



Albert Cook building, Mengo Hospital P.O.Box "161 Kampala Uganda. Tel: 0414-2"3394 0414-2"0222. Email: ecurei @ecurei.com.

XRAY

KRAY NO: 4025/22	MH No:	OPD:	I	DATE: 02/	06/2022	 ·
NAME: BURYEGYĘYA MAF	RTIN S	EX: M	AGE: AD			
EXAMINATION: LUMBAR-S	SACRAL AN	D CHEST	X-RAY			
REFERRALDOCTOR/IIOSPI	ITAL:				<u> </u>	

INDICATION: H/o having contracted Pott's disease and on Rx. Do chest and lumbar-sacral x-ray.

FINDINGS:

Lumbar sacral xray

There is normal bone density of the vertebrae. The alignment of the spine is preserved.

The normal lumbar lordotic curvature is lost.

The intervertebral disc space and vertebral body heights are preserved.

The sacroiliac joints and paravertebral soft tissues are normal.

Radiological impression:

- Lumbar spine straightening due to paraspinal muscle spasms.
- No features of Pott's disease.

Chest xray

The lung fields appear normal.

The cardiac shadow is normal in size CTR; 0.44. The superior mediastinum and hilar shadows appear normal.

The hemidiaphragms appear normal. The cardiophrenic and costophrenic angles

The bony thoracic cage and surrounding soft tissues appear normal.

Radiological impression:

Normal chest radiograph.

Lukyamuzi Sam

Medical Imaging Technologist

Figure 4; Lumbo-sacral and Chest Xray findings





Figure 5; Panoramic Dental Xray of client





MENGO HOSPITAL

P.O.,Box. 7161, Kampala, Uganda Tel: +256-414-270222/3 Direct: +256-312-307106 Fax: 256-414-340,466 Email:medicaldirector@mengohospital.org Website: www.mengohospital.org

FOUNDED ON 22 FEBRUARY 1897

Our Ref: MH

Your Ref:

6th FEBRUARY 2022

TO WHOM IT MAY CONCERN

Dear Sir,

RE: MEDICAL REPORT FOR BUREGYEYA MARTIN IP NO. 22060342

Noted above is a post trauma patient referred to us for review, with a claim to have been tortured and assaulted about 4 years ago in a foreign country that among other injuries resulted into loss of consciousness and woke up with broken pieces teeth in his mouth with bleeding from the upper right.

Relevant dental history: had an extraction done on the upper right over 10 years ago, touches the gap at the upper right 1st molar

On examination,

- a) Extra orally, No visible facial asymmetry or any visible features of disease or
 - deformity.
- b) Intra orally,

one panoramic radiograph (OPG X-RAY) was taken and below are the findings;

- i. In full permanent dentition.
- ii. The upper right 1st molar is missing (was extracted).
- iii. Retained roots of the upper right 3rd molar.
- iv. No noted active caries in the other teeth.

NOTE: Find attached is the copy of the panoramic x-ray.

Yours

Dr. Tugume Ronald BDS



Figure 6; Dental Review report



XII. INTERPRETATION OF FINDINGS:

- Mr Buregyeya gave a credible description of the chronology of events that happened including
 the different forms of psychological and physical forms of ill treatment he encountered.
 Physical forms can result into wounds, abrasions and contusions which at times heal with no
 visible sequelae.
- 2. Mr Buregyeya at time of examination had a missing 1st molar tooth in his right side of upper jaw and reported an incident of having been hit in the face, bled from the mouth and 9 days later lost a tooth. (Figure 2). He also had a cigarette smoke smell which pointed out that he is still a smoker, a behavior that he allegedly learnt while in detention.
- 3. CT scan of the Thoracic spine showed features of Pott's disease (Spinal Tuberculosis). (Figure 12). Tuberculosis is a communicable disease that is spread from aerosol droplets when in close contact with infected individuals and can affect very many organs in the body. Mr Buregyeya noted that while in prison he was in close contact with many prisoners with whom their health status was not known and pointed out that some were subjected to Tuberculin Skin Test and those that turned positive would be isolated.
- 4. A Lumbo-sacral spine Xray done on 2nd June 2022 showed no features of Pott's disease however showed a straightening of the Lumbar spine due to paraspinal muscles. (Figure 4) This contradicts the earlier CT scan findings. This could be due to his response to Anti-TB medication that he has been on that the features of Pott's disease have resolved. Unfortunately we did not see the earlier Lumbo-sacral Xray results for the request made (Figure 19)
- 5. A panoramic Dental Xray done on 2nd June 2022 showed features of In full permanent dentition Upper right 1st molar is missing, retained roots of upper right 3rd molar, no noted active caries in other teeth (Figure 6). He reported to have been bleeding from the right side of mouth after a hit onto his face after which he lost a tooth from the right upper jaw. This is in line with his reported allegation.
- 6. Mr Buregyeya presented different medical forms that pointed out that he was managed for Pott's disease (Figures 14, 16) and Post-Traumatic Stress Disorder (PTSD) (Figure 9). This was diagnosed and managed by professionals. Post-traumatic stress disorder results from when one goes through a severely traumatic event and in the future starts experiencing symptoms (such as night mares; flash backs about what happened, forgetting details of what happened to him etc) in relation to that traumatic event.
- 7. From the results of the psychological assessment of Buregyeya Martin using the HSCL 55-item, it was concluded that Buregyeya Martin, at assessment time, presented with significantly severe symptoms that are consistent with psychological consequences of exposure to traumatic events such as torture, traffic accidents, floods, landslides, fire breakouts, earthquakes.



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XIII. CONCLUSION

Summarizing all above mentioned sources of evidence (physical, psychological and social findings, personal history of the victim, knowledge of regional practices of torture, etc.) we conclude that Mr. Buregyeya's findings have a high level of consistency with the history of his torture and ill-treatment.

XIV. RECOMMENDATIONS

- Mr. Buregyeya Martin needs to continue taking his Anti-TBs and continue attending reviews.
- Needs rehabilitation that includes intensive psychological counselling and social support
- He also needs justice for the torture and ill treatment he suffered.





Medical Legal Report for Mr. Buregyeya Martin

Report Written By

Cafiki

Dr. Rafiki Robert

Medical Officer

African Centre for Treatment and Rehabilitation of Torture Victims (ACTV)

Approved by

Miss Nabwire Esther

Head of Programs

African Centre for Treatment and Rehabilitation of Torture Victims (ACTV)



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XV. Relevant Annexes (Past medical assessments and management)



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Remember : TB is curable if you adhere and complete your freatment, TB can spread to other people if you do not take your medication

(Print Marsion Soptember 20

gure 7; TB Treatment chart for ACTV/K/3722/2022



Platiki

Plot 14A Aki-Bua Road Nakasero, P.O, BOX 16595, Kampala-Uga Tel: +256 312531400 Email: info@nhl.co.ug, www.nakaserohospital.com	n nda,
PRESCRIPTION FORM	
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Figure 8; Prescription Form 1



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Figure 9; Prescription form 2



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Email: info@nhl.co.ug, www.nakaserohospital.com
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Name: of the Doctor:
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Figure 10; Prescription form 3



Rotiki



Plot 14A Aki-Bua Road Nakasero, P.O. BOX 16595, Kampala-Uganda, Tel: +256 312531400 Email: info@nhl.co.ug, www.nakaserohospital.com

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Figure 11; Prescription form 4



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NAKASERO HOSPITAL

Plot 14A Aki-Bua Road Nakasero, P.O. BOX 16595, Kampala-Uganda, Tel: +256 312531400 Email: info@nhl.co.ug, www.nakaserohospital.com

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Figure 12; Prescription form 5



Rlatiki

MAYANJA MEMORIAL HOSPITAL LTD

P.O Box 929

Plot 175 Masaka Rd Hyamityoho, a mayur amemorial@gmail.com

Mberara dgunda

Radiology Report Creates 6/28/2021 4:15:59 PM

Patient ID: 21 16.28 18.52.54 DST-

13 12 2 1107 5 4 3 1760

Ref Physician

Ace Number

CT, T-Spine w/o Contrast

Clinical Summary: severe back pain (thoracic)

Technique .

Date of Birth: 6/28/1987 12:00:00 AM

Date of Study 6/28/2021 3:17:40 PM

Patient Location: Out Patient

Axial and MPR images of the entire thoracic spine were acquired for better anatomical orientation.

Findings

There is destruction process involving T5, T6, T7 and T8 vertebral bodies and there appendages and the adjacent disc spaces. There is encroachment on the spinal canal at this level. There is a paravertebral soft tissue shadows in the same region.

The rest of the vertebral bodies and their appendages are normal.

The rest of the disc spaces are normal.

CONCLUSION

These are features suggesting an inflammatory process that is probably pott's disease. However a neoplastic process is a differential. Biopsy for histopathological analysis recommended

Electronically Signed by: Dr. Alfred Bulamu

CONSULTANT RADIOLOGIST

Figure 13; Thoracic CT Scan findings





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MF5

Dr. Abesiga K. Lenard MBChB MMed Obs &GYN (MUST) Tel: +256 701 601234

Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel; +256 772 887026

Date: 27	7 21 Patient No Tel 077807882
Name: Bu	regiega Martin Age 34 Sex male
Next of kin	R/ship brother Tel 0782847 428
Village / Di	strict Steemen Temp 36 Fe BP 22 PR 87 Wt 56 56
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Figure 14, Medical form of client





Plot No. 2/4 Adit Mall, High Street Mbarara, Opp. Bank of Uganda Tel: +256 (0) 703 206832 / +256(0) 772-336110

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Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel: +256 772 887026

LAB REQUEST FORM

Patient No:	_ Date: 29 1/2021
Patient No: Name: Martin Burepyeya	
Village / Cell: Show	
Age 34yn Sex Male Weight	57.7Kg
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RBS S. mm IL	
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BAT- Non Reachin	21
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Doctor's Signature	Date 28 Charles

Figure 15; Laboratory Request Form





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MF5

Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel: +256 772 887026

Patient No: Tel:	Date: 28 04 3 0 21
Name: Buregyey9	Martin
Village / Cell:	Temp-366 2 PR 126 km
Sex Mali Age 3445 BP	108 Mully Weight 57.7kg
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Figure 16; Prescription Form 7



Rlafiki



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Dr. Abesiga K. Lenard MBChB MMed Obs &GYN (MUST) Tel: +256 701 601234

Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel: +256 772 887026

LAB REQUEST FORM

Patient No:	Date: 28 6 121.
Patient No: Name: Martin Bure Syley	
Village / Cell:	
Age 34 yo Sex Male Weight	57.7 Kg.
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Doctor's Signature	Date 28/6/201

Figure 17; Laboratory request form





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Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel: +256 772 887026

LAB REQUEST FORM

Patient No:	Date: 2862021
Patient No: Name: Markin Bure syr	1
Village / Cell	
Age 34 yo Sex Male	Weight
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Doctor's Signature	Date 27 6)21

Figure 18; Chest Xray request form





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Dr. Abesiga K. Lenard MBChB MMed Obs &GYN (MUST) Tel: +256 701 601234

Dr. Kangwagye Peter MBChB MMed Internal Medicine Tel: +256 772 887026

LAB REQUEST FORM

Patient No:	e	_ Date: 28 6 21
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Figure 19; Lumbo-sacral Xray request form



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