

**IN THE HIGH COURT OF NEW ZEALAND
AUCKLAND REGISTRY**

**CRI-2011-044-6255
CRI-2011-044-7906
[2012] NZHC 2745**

QUEEN

v

AKSHAY ANAND CHAND

Hearing: 17 October 2012

Counsel: S Moore SC and B Smith for Crown
M K Lowe for Mr Chand

Judgment: 17 October 2012

JUDGMENT OF WINKELMANN J

- (1) Section 20 hearing Criminal Procedure (Mentally Impaired Persons) Act 2003 (the Act).
- (2) Disposition hearing for purposes of s 23 hearing of the Act.

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[1] In September 2011 Mr Akshay Chand kidnapped Ms Christie Marceau, keeping her captive for some 35 minutes. During her ordeal he threatened her with a knife, threatened to stab her and he did this with intent to sexually violate her. For that offending he was arrested and remanded in custody. In October Mr Chand was released on bail. Although subject to a 24 hour curfew, on 7 November 2011 at 7.00 am he went to Christie's home carrying a knife, he entered her home, chasing her as she attempted to escape him, and stabbed her to death.

[2] He was subsequently charged with the murder of Christie and was to stand trial this month. However, psychiatrists instructed both by the defence and the Crown have expressed the opinion that at the time Akshay Chand killed Christie Marceau, he had a disease of the mind which was so significant and pervasive that he did not know what he was doing was morally wrong. On that basis the Crown has agreed that the only reasonable verdict is not guilty on account of insanity.

[3] The agreement by the Crown has triggered the provisions of the Criminal Procedure (Mentally Impaired Persons) Act 2003. By virtue of the provisions of this Act I am required to conduct a hearing to determine, on the basis of expert evidence, whether Mr Chand was insane within the meaning of s 23 of the Crimes Act 1961 at the time that he killed Christie Marceau. If I am satisfied of that, I am then required by that Act to determine the most suitable method of dealing with him.

[4] Mr Chand having pleaded guilty to the September 2011 offending, must also later be sentenced in respect of that offending, but I will attend to that at a later point in time.

[5] Accordingly, the purpose of today's hearing is twofold. Firstly, to determine whether he was insane within the meaning of s 23 of the Crimes Act 1961 at the time he killed Christie, and secondly, if I am satisfied that he was, to make a decision as to how he is to be dealt with.

[6] The relevant factual background to the events the subject of this hearing are as follows. Mr Akshay Chand and Ms Christie Marceau knew each other at primary

school but lost contact after that. In September 2010 they encountered each other again when working at a supermarket local to their homes. They were friends, but not close friends. Their friendship was characterised by Christie providing emotional support to Mr Chand. Christie was a kind and generous teenager, and it seems it was her good nature which drew Mr Chand to her.

[7] On the morning of Tuesday 6 September 2011 Mr Chand telephoned Christie. He said he was home and that he was going to kill himself unless Christie came over to his house. Concerned about Mr Chand's wellbeing and fearing the worst, Christie drove to his house. In an interview Mr Chand gave to the Police after the incident, Mr Chand said that his intention was to rape Christie because she had abandoned him and did not care what happened to him. He was seeking "vengeance". Before Christie arrived, Mr Chand armed himself with a 20 centimetre long kitchen knife which he hid in the waistband of his tracksuit pants. A few minutes later Christie arrived. Mr Chand invited her in and locked the door behind her. Together they went to the sitting room and sat opposite each other in separate chairs. There was no one else home. Mr Chand began to discuss personal issues, became agitated, stood up and walked over to Christie. Standing in front of her he pulled the knife out of his waist band and demanded her cell phone, snatching it from her hand. He threatened that if she did not obey or made attempts to make a noise or escape that he would knife her. He told her to take her clothes off and throw them to him. Although she initially refused, following further threats of violence, she handed over her jacket, top and track pants. She was left wearing only her underwear.

[8] Mr Chand continued to tell Christie about his personal problems. Throughout she was terrified and tearful and believed that she was about to be sexually assaulted or stabbed. She was detained in this manner by Mr Chand for about 35 minutes before he changed his mind as to what he would do. He then told Christie that although it had initially been his intention to rape her, he had changed his mind and she could leave. Mr Chand gave her back her phone and her clothing and allowed her to get dressed.

[9] He then told her that he was going to kill himself by consuming some crushed pills (actually vitamin tablets he had crushed earlier). Given Mr Chand's

conduct toward her, it is quite remarkable and to her credit, that Christie again attempted to dissuade Mr Chand from this course. She then left and returned to her home where her mother and grandmother took her to the local police station. Mr Chand was arrested later that day by Police. He made a full statement admitting detaining Christie against her will, threatening her with a knife with the intention of raping her and threatening to stab her.

[10] Mr Chand was initially detained in custody, and his application for bail was declined. But then he wrote a letter to the court in support of his application for bail in which he expressed deep remorse and a desire to make amends. He said that he recognised he had been depressed and intended to get help.

[11] Mr Chand's second bail application took place at the North Shore District Court on 5 October 2011. It was opposed by the Police and Christie wrote a letter expressing her concern and opposition to the accused being granted bail. She said in her letter that she was worried that if he was released he would try to get revenge on her and that she feared for her safety. She said that Mr Chand lived close by, so that when she was catching the bus to university or work every day he would be able to follow her.

[12] Notwithstanding that opposition, Mr Chand was granted bail on strict terms which included a 24 hour curfew from leaving his mother's home

[13] Mr Chand's mother and sister who were living at the family home at the time were concerned about Mr Chand's mental wellbeing, and the possibility that he might harm someone. For that reason they hid the kitchen knives.

[14] On the day that Mr Chand killed Christie he found a large kitchen knife which he placed in a carry bag with a hammer. On the morning of 7 November he packed up his bag with the knife and hammer and headed off on foot to the Marceau's home. At that time Christie was at home with her mother and grandmother. Christie and Mrs Irving, Christie's grandmother, were downstairs in their bedrooms and Mrs Marceau was upstairs getting ready for work. Christie's father Brian was in Australia where he was working.

[15] The front door to the Marceau home is on the second storey and is accessible off the road. Christie's room was downstairs. Mr Chand rung the front doorbell. Mrs Marceau opened it because she thought it was a courier, as couriers often called at the house. On seeing Mr Chand with a knife she backed away and screamed, hoping thereby to warn Christie so that she would make her escape. Mr Chand walked in and asked who was home. Mrs Marceau attempted to block him by saying that her husband was at home.

[16] On hearing her mother's screams Christie came up the stairs and was confronted by Mr Chand. Mr Chand walked past Mrs Marceau and kicked Christie in the chest causing her to tumble down the stairs. He then chased her. At the bottom of the stairs Christie got up, ran out of the house and into the backyard. Mr Chand was close behind her and as Christie attempted to unlatch the back gate, he stabbed her in the left side of the face causing her to fall onto the deck. He continued to stab Christie, only stopping his attack when the knife became useless.

[17] He then backed away but remained in the immediate vicinity, standing on the lawn still holding the knife. He remained there until the Police and emergency services arrived.

[18] Christie's mother did not witness the attack because she was attempting to contact the Police, not thinking that events would occur as they did. She was however there in the immediate aftermath. She found her daughter lying on the deck still breathing. Moments later Christie died in her mother's arms. Within minutes the first Police Officers arrived. One of them approached Mr Chand and asked him why he was there. He replied "reprisal". When asked by another of the officers why his hands were shaking he said "it's not easy to kill someone is it". He was arrested and taken to the North Shore Police Station where he was later interviewed. He made a full confession.

Mental health issues for hearing

[19] The intentional killing of another is charged as murder. Mr Chand was charged with murder in respect of the killing of Christie. However, it is a defence to

the charge of murder that the person was legally insane, as defined in s 23 of the Crimes Act 1961, at the time that he or she committed the acts which constitute the offence. I comment that although this is called the defence of insanity, it is not a defence in the sense that it is some sort of legal construct that permits the guilty to go free. Rather, it is a recognition by the law that a person may, because of mental illness, be so disordered in their thinking that at the time they act, they lack the capacity to be held responsible for the crime they commit. On the law as it has developed, that is not a low threshold to meet.

[20] There is a procedure set out in the Criminal Procedure (Mentally Impaired Persons) Act 2003 which is to be followed in circumstances where a defendant has indicated that he intends to raise the defence of insanity and the prosecution agrees that the only reasonable verdict is not guilty on account of insanity. In those circumstances, which are the circumstances which apply here, a Judge must consider, on the basis of expert evidence, whether the defendant was insane within the meaning of s 23 of the Crimes Act 1961 at the time of the commission of the offence.

[21] Before I turn to consider whether the defence of insanity is made out however, I must firstly be satisfied that Akshay Chand was responsible for the killing of Christie Marceau. I have read the statements of evidence of Christie's mother and grandmother, and also the statement to Police made by Akshay Chand. On the basis of that evidence I am satisfied that the events occurred as set out in the earlier part of my judgment. I am satisfied that Akshay Chand killed Christie Marceau.

[22] I then turn to consider the s 23 issues. For present purposes, the relevant parts of s 23 of the Crimes Act provide as follows. First, there is a presumption that everyone is sane at the time of doing an act until the contrary is proved.¹ For this reason, in this case, it is for Mr Chand to establish on the balance of probabilities that he was, at the time that he killed Christie, labouring under a disease of the mind to such an extent as to render him incapable of knowing that the acts that he did in

¹ Crimes Act 1961, s 23(1).

killing Christie were morally wrong, and that is having regard to the commonly accepted standards of right and wrong.

[23] That sounds a complicated test but it can be broken down in this way. The first element of it is whether at the time of committing the offence Mr Chand had a disease of the mind. The second element is whether that disease of the mind was operating to such an extent as to render him incapable of knowing that his acts in killing Christie were morally wrong having regard to the commonly accepted standards of right and wrong.²

[24] I note in this regard that major mental disorders such as schizophrenia and other forms of psychoses are all regarded by the law as diseases of the mind for the purposes of s 23.

[25] As to what it means that the accused was incapable of knowing that the act or omission was morally wrong, the issue is whether the mental disorder that Mr Chand was suffering from prevented him from thinking rationally, with some moderate degree of sense and composure, about the moral quality of the act, to the extent that he did not know the act was wrong. What is meant by wrong is wrong having regard to the everyday standards of reasonable people.

[26] In considering these issues I have been much assisted by the evidence provided by two of New Zealand's leading forensic psychiatrists, Dr David Chaplow, called as the defence expert witness, and Professor Mellsop, called for the Crown. They have both reviewed Mr Chand's socio-academic history and his psychiatric history, including the previous assessments of Mr Chand undertaken following his kidnapping of Christie and then following his admission to the Mason Clinic. They have read the statements of Police who dealt with Mr Chand in November, and statements of his co-workers and his mother. They have considered the medical history of Mr Chand's family. They have read the summary of facts for both September and November. They have reviewed Mr Chand's various statements to the Police, and the interviews of Christie's mother and grandmother in relation to the

² Crimes Act 1961, s 23(2).

November offending and they have reviewed Christie's statement in relation to the September offending.

[27] Dr Chaplow identifies as significant that the accounts of friends and family are of an intelligent young man whose academic performance deteriorated significantly in his late teenage years, a deterioration which was accompanied by social withdrawal. Mr Chand also experienced sleeplessness and weight loss. Dr Chaplow notes that there is a strong family history of depression, suicide and schizophrenia and refers to Mr Chand's out of character behaviour, including ideas that he was expressing around the time of his kidnapping of Christie in relation to capitalism.

[28] Dr Chaplow says that a review of the Police interviews of Mr Chand provides evidence of paranoid ideation and delusions. Most telling of all for Dr Chaplow was Mr Chand's statement to the Police, on initial interview on 7 November, that he had an accomplice and that two more people would die. This at a time when he was denying to the Police that he was psychotic and asserting that he was not hearing voices.

[29] Dr Chaplow interviewed Mr Chand on two occasions, the first occasion for approximately three hours at the Mason Clinic, where he had been transferred from prison, (13 March 2012) and the second on 23 April 2012. In the first interview Dr Chaplow observed that Mr Chand had a flat affect, with no appropriate modulation of mood or facial expression. Mr Chand recounted to Dr Chaplow that the day he was bailed to his mother's address, he had wanted to apologise to Christie but did not know how. Dr Chaplow asked him why he therefore proceeded to visit Christie's house and kill her and Mr Chand said it was not him, but a voice in his head that wanted to mutilate her. He said that the voice had a strong control over him. He initially identified the voice as "Loralai" but at a later date recognised the voice belonged to a former class mate of his from Wales who was named "Pauline".

[30] He said that his apprehension grew the closer he came to his next Court appearance on 9 November and he tried to seek help. He felt that he would be safer in prison. The help did not arrive and he went Christie's house on 7 November.

[31] In respect of killing Christie, Mr Chand reported that at the time he killed her he knew that killing was wrong but he felt compelled to act on what the voice said. He stated that he struggled against the impulse he felt, but when the time came he could not resist it.

[32] Dr Chaplow's second interview of Mr Chand occurred after Mr Chand had received anti-psychotic medication. At the second interview on 23 April he agreed that Pauline was the name of the accomplice and that she had identified two further intended victims. Mr Chand confirmed that he did not hear the voices anymore.

[33] Dr Chaplow notes the evidence from various sources, that Mr Chand had unusual ideas about capitalism, and an idea that he had been taken over by the Devil.

[34] In Dr Chaplow's opinion Mr Chand had a schizophreniform or schizophrenic like illness. He says that this often strikes those with a family history, often has a prodrome, or lead up period, before the illness is fully manifested and is characterised by personality change, delusional ideation, perceptual distortions (hallucinations) and accompanied by a lack of insight. He says that very few people with such illness kill others. They are more likely to kill themselves. But some with an undeclared and untreated illness may follow command hallucinations insightlessly and injure others. Dr Chaplow observed that depression is a common accompaniment of schizophrenia. Often in such cases, when the depression is treated with medication, there is an "unmasking effect" so that the symptoms of schizophrenia are more easily diagnosed. He comments that that likely occurred here, observing that Mr Chand received medication for depression following the September offending.

[35] Dr Chaplow's opinion is that at the time he killed Christie, Mr Chand was psychotic and had no insight in to the fact that he was hallucinating, believing that a voice that he was hearing was some spiritual imperative that he must obey. Although Mr Chand knew the nature and quality of his act and that it was to stab Christie, he knew that he was wielding a knife to kill or harm her, he did not understand that what he was doing was morally wrong having regard to the accepted standards of right and wrong. This was because, while he knew right from wrong in the legal

sense prior to the killing and endeavoured to resist his command hallucinations to harm Christie by trying to get himself put in a place of safety, he was overwhelmed by his illness at the time of the killing and was insightful as to his moral culpability in the act.

[36] In relation to the offending in September, Dr Chaplow's opinion is that Mr Chand was either in the prodrome of the illness, or he had the psychotic form illness which was not manifest at the material time. Either way it was arguable that he had a disease of the mind at the time he kidnapped Christie. But Dr Chaplow was satisfied that Mr Chand knew the nature and quality of his actions and was able to describe what he did in detail and why. In considering whether Mr Chand understood the wrongfulness of his actions, Dr Chaplow attached significance to Mr Chand's account that he could not go through with the intended rape of Christie and so relented and let Christie go. In Dr Chaplow's opinion Mr Chand had a good comprehension at that point in time of what was morally wrong and therefore at the time of the September offending did not meet the threshold for insanity.

[37] In light of Dr Chaplow's opinion, the Crown instructed Professor Mellsop to assess whether or not Mr Chand was legally insane at the time of the killing of Christie on 7 November 2011. Professor Mellsop reviewed a similar range of material to Dr Chaplow. My impression of Professor Mellsop was that he took what could be described as quite a sceptical approach to the task, and I do not say that in any way judgmentally or critically. What I mean by that is he appreciated the seriousness of a task he is being asked to undertake by the Crown, and took great care to exclude the possibility that Mr Chand was presenting with a false set of symptoms. He therefore placed particular weight upon evidence which was contemporaneous to the events in relation to the September offending, and in relation to Mr Chand's killing of Christie. He said that was because there was little risk that this material will be contaminated by contact with psychiatrists and the acquisition by this means of knowledge about psychiatric disorders. So contemporaneous material is then a useful check against malingering – against the risk that Mr Chand was faking the symptoms of mental illness. When he looked through the material which he was provided Professor Mellsop drew out some particular matters that he attached significance to. He considered the transcript of Mr Chand's 6 September

interview by the Police. He noted that Mr Chand gave a clear account of his time with Christie earlier that day, and was able to give considerable detail. He gave a clear account of his intentions and indicated that “vengeance” had been part of his intent with rape being a component. Professor Mellsop considered that during this interview Mr Chand exhibited no apparent psychotic phenomena.

[38] Professor Mellsop referred to different statements by Police in relation to Mr Chand’s conduct on 7 November 2011, including his strange manner, and his frequent use of the word “reprisal”. This word Professor Mellsop observed, Mr Chand also used in other contexts.

[39] In relation to the events of 7 November, like Dr Chaplow Professor Mellsop attached significance to the statement to Detective Attwood made by Mr Chand in which he referred to an accomplice and a plan to kill others. That was a statement which was made by Mr Chand prior to formal interview.

[40] In Mr Chand’s formal Police interview, which was videotaped, Professor Mellsop described the detailed, dispassionate (or another way of describing it is as matter of fact) account given by Mr Chand. Professor Mellsop noted that he exhibited a degree of apparent indifference to Christie’s and her families’ suffering and still expressed great anger at Christie. He also appeared at pains to undermine any suggestion that he might be insane given interpretations which might be placed on his earlier opinions regarding the Devil.

[41] During the interview Mr Chand introduced the idea that he had discussed some relevant things with another person. He said that there was another person, a female, who was involved in this and would likely kill if Chand couldn’t. Professor Mellsop observed that the was statement was delivered with quite inappropriate affect and appeared to have no antecedent in the interview questions.

[42] Mr Chand also described himself as a “callous fiend”, which could be seen as being evidence of non-psychotic insight. Professor Mellsop did not observe during that interview any symptoms of classical depression. He also noted that Mr Chand

made no reference to the major diagnostic features of schizophrenia such as hallucinations, thought disorder or delusions.

[43] Professor Mellsop placed quite some significance on Mr Chand's abnormal social conduct over the time prior to his offending, which was recounted by a variety of people, including statements to others that he was suffering from the bizarre illness (for a man) of cervical cancer, to his conduct in making large gifts of money to others, and to the fact that his conversation was at times weird and out of place. The words "weird" and "creepy" seem to have been used a lot to describe Mr Chand.

[44] Professor Mellsop, like Dr Chaplow, also attached significance to an apparent deterioration in Mr Chand's intellectual and social performance during his teen years.

[45] He described his own interview of Mr Chand on 20 July and recounts how Mr Chand described receiving messages from the universe and that he became aware of the influence of Lucifer, the Devil or Satan. He thought that Lucifer had possessed his father and taken his form. He also thought that when he worked at the supermarket with Christie, Lucifer had done the same thing with Christie. Professor Mellsop noted a preoccupation that Mr Chand had with capitalism. Mr Chand said that capitalism had destroyed his family. He recounted to Professor Mellsop hearing the voice of Loralai and Pauline. He thought that Loralai's voice was Pauline's voice. He recounted that Pauline had told him that Christie was the Devil and told him to kill her and others. He said that at the Police interview in November he did not want the Police to know about Pauline as he believed they were out to get him, and it was because the Police were out to get him that whilst he was on bail he had slept with a knife under his pillow.

[46] Professor Mellsop assessed Mr Chand as being intelligent but noted that he used words in idiosyncratic ways which apparently had special meaning for him – for example, auspicious, choice, cauldron, confound, capitalism and the universe. He observed reasoning processes which were not consistent with Mr Chand's level of intelligence. Professor Mellsop said that idiosyncratic use of words, some of them neologisms, is a characteristic of schizophrenic thought disorder.

[47] Professor Mellsop points to the following as, in combination, supporting his diagnosis of the presence of a schizophrenic illness in Mr Chand for at least all of November 2011:

- (a) Deterioration in academic performance in the late teen years.
- (b) Indifference and self-satisfaction.
- (c) Little ability for emotional empathy, and an enormous commitment to himself as the centre of the universe.
- (d) Thought disorder demonstrated by his “weird” personality exhibited prior to November 2011, and by his idiosyncratic use of words, some of them made up.
- (e) Lastly, Mr Chand’s delusional beliefs, including that he had cervical cancer and that the Devil was inhabiting his father and Christie, and the voices that he heard.

[48] Professor Mellsop’s assessment is that the disorder is still present to a significant degree.

[49] Professor Mellsop squarely addressed the fact that in Mr Chand’s interviews he describes plans, which include apparent calculation and deception. As he put it, Mr Chand was a proven liar, so Professor Mellsop wished to ensure his diagnosis was correct. He therefore stepped outside the conventional diagnostic framework for schizophrenia, and referred himself to what he said were the classic A’s of schizophrenia identified by Bleuer. Professor Mellsop says that Mr Chand exhibits each of these four “A’s” - ambivalence (in his words and actions), affectivity (flat, indifferent affect), autism (his self centeredness and inability to empathise) and associativity in his thinking (his curious juxtaposing of incompatible thoughts).

[50] Professor Mellsop acknowledged that there is some evidence of moral thinking by Mr Chand in relation to the killing of Christie. This includes justifying his actions as a consequence of legitimate anger, indicating that it is much easier to

kill if you don't have feelings and referring to himself as "callous". But the evidence available satisfied Professor Mellsoop that Mr Chand's disorder was so significant and so pervasive and some of the psychotic phenomena so specific to Mr Chand's actions on 7 November that, when he took Christie's life, he did not know what he was doing was morally wrong. The professor therefore concluded that Chand was suffering from a disease of the mind and that because of the degree and severity of the disease of the mind he did not know that what he was doing was morally wrong when he stabbed and killed Christie. For these reasons he agrees with the opinion of Dr Chaplow that on 7 November 2011, on the balance of probabilities, Mr Chand met the criteria for legal insanity as specified in s 23 of the Crimes Act 1961.

[51] Professor Mellsoop also gave evidence that his opinion had been peer reviewed by Professor Brinded who supported Professor Mellsoop's conclusions, and indeed said that on the material provided the diagnosis was inevitable.

[52] On the basis of the evidence that has been provided to me I have reached the conclusion, on the balance of probabilities, that on 7 November 2011 Mr Chand was suffering from a disease of the mind, namely schizophrenia or a schizophrenic like disease, to such a degree and extent that he was incapable of knowing that the act of killing Christie was morally wrong having regard to commonly accepted standards of right and wrong. I have reached that view notwithstanding the apparent deliberateness of the actions that Mr Chand took on that day including the extent of the planning undertaken by him. Although this conduct might be thought to indicate organised thinking, on the basis of the expert opinions of Dr Chaplow and Professor Mellsoop, I have concluded that this careful planning, even to the extent of calculated deception, was all in pursuit of what was effectively a plan borne of Mr Chand's delusional thinking. His behaviour and thinking was in effect organised around delusional concepts, and his deceitfulness, facilitated by his intelligence, was deployed in the service of these delusional concepts.

[53] I therefore find Mr Chand not guilty of the murder of Christie Marceau on account of his insanity at the time that he took her life.

[54] Having reached this view, it is then necessary to move to the disposition phase in relation to Mr Chand. The disposition of people acquitted on account of insanity is governed by ss 23-28 of the Criminal Procedure (Mentally Impaired Persons) Act 2003.

[55] For the purposes of this case, s 24 of that Act requires me to consider all the circumstances of the case, including the evidence given by Dr Chaplow and Professor Mellsop in considering whether it is necessary in the interests of the public that Mr Chand be detained as a special patient under the Mental Health (Compulsory Assessment and Treatment) Act 1992.

[56] Special patients are detained indefinitely in a secure mental health facility until such time as the Minister of Health, following consideration of reports from medical professionals, is satisfied that continued detention is no longer necessary to ensure the safety of the public. In this case both the Crown and the defence submit that the appropriate order to make in respect of Mr Chand is that he be detained as a special patient.

[57] This submission is supported by medical opinion. Dr Chaplow said that in his view Mr Chand should be detained as a special patient, and referred to the Mason Clinic or similar secure facility to continue his treatment through rehabilitation. He emphasised the need for treatment was not just a matter of medication, but that Mr Chand needed to be assisted to recognise the terrible acts which he has committed in order for him to reconcile this with his place in the world, if indeed he can.

[58] Professor Mellsop's view is also that Mr Chand should be detained as a special patient. He said that in his opinion that is necessary for the safety of others because Mr Chand is a young man with a very serious psychiatric disorder, who he says has a poor prognosis. He also says that Mr Chand's treatment will be complicated by the fact that he is a very clever man who has shown skill in deceiving others in the past and with terrible consequences. Explaining his view as to Mr Chand's prognosis, Professor Mellsop said that there are several features of his presentation which suggest that it is poor. First, Mr Chand had the onset of the

symptoms at a very young age. Secondly, the episode of psychosis that led to the offending and to Mr Chand's taking of Christie's life was lengthy, possibly as long as 18 months.

[59] In light of the evidence and having heard counsel in relation to this issue I am satisfied, for the reasons identified by Dr Chaplow and Professor Mellsop, that a special patient order under s 24 of the Act should be made in respect of Mr Chand.

Winkelmann J