



Smith v. Carpenter

316 F.3d 178 (2003)

Country: United States

Region: Americas

Year: 2003

Court: 2nd Circuit Court of Appeal

Health Topics: Health care and health services, HIV/AIDS, Medicines, Prisons

Human Rights: Freedom from torture and cruel, inhuman or degrading treatment, Right to health

Facts

Plaintiff filed suit alleging that Defendants deprived him of HIV medication on two occasions during his incarceration at the Camp Pharsalia Correctional Facility. The first deprivation occurred in October 1998 and lasted seven days, resulting from a delay in refilling Plaintiff's prescriptions. The second occurred in January 1999, when Plaintiff's medication was confiscated during a random search and a replacement was not provided until five days later.

Plaintiff claimed this deprivation constituted a violation of the Eighth Amendment's prohibition on cruel and unusual punishment.

A jury trial was held in October 2001 on Plaintiff's denial of medical care claim. Plaintiff alleged temporary itching, stress, and severe headaches as a result of the missed medication, but failed to provide evidence that his infection or overall health suffered any adverse effects. Defendants' medical expert testified that the symptoms Plaintiff alleged were likely side effects of the medications themselves. Although missing HIV medication could result in drug resistance, after reviewing Plaintiff's medical records the expert concluded that Plaintiff had not developed drug resistance and had not suffered any adverse health effects due to missing his HIV medication. The jury found in favor of Defendants, citing Plaintiff's failure to prove he suffered from an objectively serious medical need—that is, "a condition of urgency, one that might produce extreme pain, degeneration or death"—by preponderance of the evidence.

Plaintiff moved for a new trial, but the District Court denied the motion. Plaintiff appealed on the grounds that the District Court erred when it held the jury was entitled to consider evidence relating to Plaintiff's not suffering any adverse medical injury from the missed medication.

Decision and Reasoning

The Court affirmed the District Court's decision denying Plaintiff's motion for a new trial.

The Court held that the District Court did not err when it focused on risks resulting from missed HIV medication in the course of evaluating the jury's finding. The Court first noted that, in order to establish a breach of the Eighth Amendment's prohibition on cruel and unusual punishment, a prisoner must prove that there had been "deliberate indifference to [his] serious medical needs"; unless the lapse encompasses failure to treat a prisoner's serious illness, "such lapse would not rise to the level of a constitutional violation. Plaintiff argued that the Court should focus on his HIV-positive status as the serious medical need. However, the Court noted that "the serious medical need inquiry must be tailored to the specific circumstances of each case" when faced with an Eighth Amendment claim. It was therefore the specific risk of harm resulting from deprivation of care that was relevant, not the underlying medical condition itself.

The Court held that the jury was therefore entitled to consider the absence of adverse medical effects when evaluating Plaintiff's claim, reasoning that both the medical need alleged and the severity of the denial of medical care alleged must be analyzed with regard to all relevant facts and circumstances. Adverse medical effects, or the absence thereof, constituted one factor informing the severity of the medical need in question.

Decision Excerpts

â€œâ€™In order to establish an Eighth Amendment claim arising out of inadequate medical care, a prisoner must prove â€˜deliberate indifference to [his] serious medical needs.â€™TM *Chance v. Armstrong*, 143 F.3d 698, 702 (2d Cir.1998) (quoting *Estelle v. Gamble*, 429 U.S. 97, 104, 97 S.Ct. 285, 50 L.Ed.2d 251 (1976)). This standard incorporates both objective and subjective elements. The objective â€˜medical needâ€™TM element measures the severity of the alleged deprivation, while the subjective â€˜deliberate indifferenceâ€™TM element ensures that the defendant prison official acted with a sufficiently culpable state of mind. See *id.*; *Hathaway v. Coughlin*, 99 F.3d 550, 553 (2d Cir.1996).â€• Page 183-184.

â€œBecause the Eighth Amendment is not a vehicle for bringing medical malpractice claims, nor a substitute for state tort law, not every lapse in prison medical care will rise to the level of a constitutional violation.â€• 184.

â€œWhen the basis for a prisoner's Eighth Amendment claim is a temporary delay or interruption in the provision of otherwise adequate medical treatment, it is appropriate to focus on the challenged delay or interruption in treatment rather than the prisoner's underlying medical condition alone in analyzing whether the alleged deprivation is, in "objective terms, sufficiently serious," to support an Eighth Amendment claim. *Chance*, 143 F.3d at 702.â€• Page 185.

â€œAs we noted in *Chance*, it's the particular risk of harm faced by a prisoner due to the challenged deprivation of care, rather than the severity of the prisoner's underlying medical condition, considered in the abstract, that is relevant for Eighth Amendment purposes. [â€¦] For example, the failure to provide treatment for an otherwise insignificant wound may violate the Eighth Amendment if the wound develops signs of infection, creating a substantial risk of injury in the absence of appropriate medical treatment. See *Chance*, 143 F.3d at 702. Such risks may be absent, however, although an inmate suffers from an admittedly serious medical condition such as HIV, where the alleged lapses in treatment are minor and inconsequential.â€• Page 186.

â€œ[A]lthough demonstrable adverse medical effects may not be required under the Eighth Amendment, the absence of present physical injury will often be probative in assessing the risk of future harm.â€• Page 188.

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