consultation primarily seemed required; psychological and neurological consultations plus whatever special examinations the specialist thought indicated were also urgently indicated.

After I was consulted by the patient's daughter and had recommended--while not accepting an "expert" role in the situation--that these evaluations be made promptly, it was--and still is--a mysteryto me how it happened that people did not get the competency issue established definitely as it could have been within say several weeks of March 20.

There was an issue, it could have been clarified, it should have been clarified, it wasn't clarified, if indeed it was until months later. Pat Gallagher reports in his notes and an affidavit that opposition to obtaining a diagnostic mental status report extended to Mary Jane being threatened by Dennis Briquet with "reporting her to the I.R.S. if she did not desist, if she did not cease her efforts in this regard.

Opinions without facts are useless. Superficiality is unacceptable. It is only after the palpable cognitive and other gross disorders evident in the patient's recorded functioning on March 20, 1986 plus the history of the terminal psychiatric illness has been obtained, that a definite diagnosis of Dementia with gross impairment precluding responsible management of her affairs by Jasne Duchene on March 20, 1986 has clearly established. These conclusions rest on facts, not assertions.

The history contributed by the patient's minister is part of the sound fabric in which the history of Dementia overcoming Jane

Duchene is woven.

To return to the March 26th encounter of Roger Krause with Jane Duchene, picking up documents and meeting the Reverend Ruhnke supporting Mary Jane--the pastor thought Mr. Krause was surprised and discomforted to find him there. Roger avoided conversation with the pastor. Mr. Ruhnke observed what he stated as "Jane Duchene was definitely confused and bewildered." "She was not involved in much conversation," Mr. Ruhnke stated. "I distinctly felt Jane was confused as to why I might be there and that she did not know much about or understand what was going on, which I judged from the expression on her face..." He thought Jane's "house and car" remark previously noted was rather bizarre. He concluded from her appearance that she could neither drive nor live alone, she looked too ill. He was right. **The Krauses, now caring for Roger's sister, never contacted the minister again. Mary Jane, in Europe, called him hoping he would continue to visit her mother, in the Fall of 1986.**

The pastor had visited Jane in the Wedgewood Nursing Home in June 1986. Jane "did not appear to know who I was and seemed very confused altogether." He found her condition upsetting. On this occasion she asked him "why she was there and what her condition was."

He last saw her September and October 1986 twice and possibly more. She appeared "brighter and more content." She did not know who the people around her were or to have any awareness of a daughter, brother, sister-in-law. Awareness "seemed limited to

things in the present and she appeared to have a complete blank on recent past events." Talk was limited, he states to very new or very old subjects. Talk was very simple, limited to positive and negative replies and "matters such as the weather." Whe could talk about something current at the Nursing Home, or her old job with the West St. Paul olice. "Jane Duchene was confused mentally but pleased to see people." He thought her in a state of "spiritual harmony." He found when he inquired about specific friends, or Mary Jane, the Krauses, she "seemed not to know who I was talking about and changed the subject." when he asked her how she was feeling she did respond, "Oh, I'm feeling pretty well right now. I don't seem to have any pain."

Mr. Ruhnke reported that he had considerable experience in his ministry with people suffering Alzheimer's Disease and similar (organic) syndromes or disorders. He though Jane manifested similar phenomena, and he was right. He saw her as she was entering a serious stage of impairment from Dementia, progressively deteriorating until she died.

Two not uncommon aspects of advanced Dementia occur in these notes. One is the patient's retention of <u>immediate</u> memory, or recall, e.g. she could think of current happenings in the Nursing Home. But <u>remote memory</u> while retained better than recent memory is often hazy and patchy. Dr. Boller clarifies the memory difficulties lucidly in his report. She had lost the identities of her relatives and friends and intellectual capacity beyond simply yes or no sort of responses was absent.

The other characteristic feature was the relatively bland affective state or mood. We tend to expect people in a gravely dilapidated mental and physical condition to be terribly disturbed or anguished. Jane Duchene appeared to be bland, tranquil, content. She would sit by the hour doing nothing much other than breathing. She had a vegetative existence without apparent turmoil or distress.

To return to the January-February 1086 period, she was hospitalized by Dr. Corbett for diagnostic study after he detected a fluid accumulation in her right pleural cavity. There is a note attributed to Ms. Judy Melander stating that Mrs. Duchene was profoundly depressed at first on learning her diagnosis; if so, that did not last long. Her appetite was poor and loss of taste and smell seemed to make consuming food even more difficult. Anorexia to the point of refusal to eat allegedly prompted Mrs. Krause to urge Mary Jane to speed her return to St. Paul as they "couldn't do anything with her." This crisis was preceeded by a short period of what sounds like a delirium in the hospital when, over several phone calls from Europe, Mary Jane found her mother "barely able to speak and I could not obtain a clear response on anything from her." Mrs. Duchene had some sort of pulmonary infection as well as cancer, I believe at that time. She responded to antibiotic therapy shortly and rapidly improved after her daughter arrived. She left hospital to go home after recovering from what seemed to be a dying state a few days earlier. She thought she might die then. As she improved the basic

fact that she was dying less rapidly did not appear to weigh on her heavily. She wanted to go home and seemed relieved to leave hospital and to feel happy when she got home.

Perseveration persisted and depression about the loss of taste and smell, as much as her inoperable cancer, was present but not to a marked extent. There was a question of apathy and disinterest? or depression? Mary Jane noted the following manifestations early in March. Mrs. Duchene appeared (a) unable to drive a car; or (b) to walk very far without help; (c) unable to pay bills or keep accounts by herself. Her daughter did these things. (d) Her mother had trouble going through receipts for drugs, for I.R.S. purposes. Memory impairment handicapped her and she mislaid papers. (e) Unable to read papers, documents or books, or to watch T.V. for more than a few minutes. She seemed to have trouble concentrating, taking in and probably making sense of what was written or shown on the T.V. screen. She covered her problem by blaming the books. "I wish I could find a good book to read."

Mary Jane, in discussing practical business matters or similar problems, came to think her mother wasn't interested really in discussing these matters. She became dubious that Jane comprehended some or much of the topics. When reinvestment options were discussed Jane began saying "but I need money." This confused Mary Jane who did not at that point recognize that intellectual processes were being rapidly lost in her mother. It was as if Jane really hadn't an understanding of the fact she had

plenty of money, investment did not deplete her. Prior to inheriting money form Otto Krause, Jane did not have money and she may have regressed in her mind to those days her daughter thinks. Deterioration in language and thought developed while in the hospital, i.e. January-February, and continued. The talk was atypically simplistic for her "I can't taste, Mary Jane," "I can't think right," "Will I be taken care of?" "But can I live there?" These became perseverated phrases, repeated monotonously for long periods.

The coarsening and simplification of word usage was accompanied by a flattened depleted affect. This dull flat empty quality Mary Jane ascribed to depression but it was I think an emotional deterioration on a physical basis as is evident in the March 20 tape.

There was a depressive episode when seeing Dr. Lerner, the oncologist, but it centered around the loss of taste. It must have een intense then as Dr. Lerner who doubtless sees much distress said, "What a down lady! Is she always that down?"

By March Jane Duchene's affective condition showed definite changes due to her organic deterioration. She had become withdrawn, detached, indifferent, disinterested. The appearances could have been due to depression or dementia. The two conditions may be present simultaneously. While there were some brief episodes of depression, predominantly she appeared to become apathetic, dull, unresponsive, shallow, pasive and increasingly dependent.

There was sense of unfillable emptiness there. Mary Jane would broach subjects of potential interest and Jane would rapidly lose interest or cease concentrating. She could not enjoy reading or watching T.V., as stated. **On March 7 as Mary Jane specifically remembers, she told Mary Jane something of what was happening. She said she could not hold on to her experiences. For her, something would be happening and then almost immediately it would be gone. She was aware, her daughter thought, that Jane knew she spoke of her own mind changing. It seems at that moment she had insight as to her loss of recent memory.**

While there is doubt early on as to the primacy of depression or dementia, soon it was evident that loss and deterioration of emotional status, i.e., of appropriateness, range, sensitivity and depth, was the essential condition. Interest in real people and things rapidly decreased as cognitive loss progressed. She was capale of some affective expression. **Mrs. Judy Melander heard Jane literally scream with frustration when she could not get the microwave oven to work. She manifested fears.** The things she began to perseverate, e.g. "Will I be taken care of?" were fears. "But I need money." These fears had no realistic basis. She was being cared for and she had a lot of money. **No amount of reassurance or restating the realities altered these fears because her judgement was increasingly bad, memory failing more and more, capacity to understand real situations and to think logically was much reduced by March 1986.**

A small incident illustrates her reduced condition then. A

real estate agent came to see the house prior to it being put on the market. Jane Duchene asked this stranger to direct their potential reinvestments. This impulsive plea for help probably stemmed from the fears mentioned. Impaired judgement in asking this of a stranger is obvious. She couldn't think rationally about things like money. She could hardly make rational decisions. Rational decisions in general, (e.g. approaching the real estate agent). **She couldn't hold onto her world. Her world was fragmenting. People were losing their real identities in her world. She was sinking in a sea of helplessness, confusion, surrounded by monsters such as delusions of poverty, of homelessness, a real state of helplessness and always closing in on her, death.**

The real impoverishment of her emotional life is apparent in her own words and all that was involved in the 22 minute taped portion of March 20, 1986. I have considered some of the emotional elements of that ugly episode previously but wish to repeat myself to illustrate how deteriorated and relly helpless Jane Duchene was at that time.

Jane acquiesces--and that's what it sounded like--acquiescence--in the accusation of her daughter by others--in her daughter being depicted, absurdly, as some sort of insane criminal, stealing her own money from accounts here to hoard in England. Mrs. Duchene accepts this garbage with a flat unemotional response. That is emotional inappropriateness and impoverishment. Showing willingness to agree with or at least talk as Detective

Batzel wants her to, she acquiesces in most of what is said in a shallow, flat way. There is some eagerness and a note of entreaty, possibly, in having Roger Krause take charge of "working" for her, i.e. the Power of Attonrey. She wants this to happen. **Somehow she has come to believe Roger will benefit her. Past relations with him and his wife don't make benefit likely.**

The benefits began within began within 24 hours. The kind brother directed her to sign things replacing the daughter in joint accounts. Not content with that, Mrs. Krause has recently taken money out of Jane's accounts and transferred it into her late husband's own personal account or estate. That is a crime. Krause robbed his sister and niece without delay.

A week later on March 27 Roger announces his sister's intention of making a will, the only point of that being a part of the Krauses' efforts to get the rest of Jane's money. The rapacity is so floridly displayed that it should be ovbvious to a meager intelligence. Roger announced his disinterest in her money several times during that meeting.

Jane Duchene's failure to question these illegal depredations can only have originated in a mind devastated emotionally as well as intellectually. Only <u>grossly deficient judgement</u> would allow for acceptance of such obvious manipulation.

It is harshly put but the conclusion is unavoidable that Jane Duchene in March had become reduced to rather gross intellectual and emotional stupidity.

Such was the state of Jane Duchene's mind the evening of

March 20, 1986, the evening she ws directed, essentially, to make drastic changes in her affairs as if she were unquestionably in condition to make them. The changes were made in the presence of a small group of associates who sedulously avoided openly noting the gross and inescapable evidence of impaired mental capacity Jane displayed. If the brain-damaged patient was capable of recognizing impairment of memory and mental confusion, (she complained of her mind getting "muddled,") the others present could hardly avoid being aware of serious defects. She speaks of difficulty in reading. **She voices thoughts that are delusions and could not be construed as anything other than delusions. She is incoherent often. Some utterances are quite disjointed and make no sense at all. Others are irrelevant and show that Jane is not in contact with the current reality.**

That all this passes before four observers without any person present explicitly raising the obvious question--is she not incapacitated--leads to an inescapable conclusion: it was an issue to be avoided and denied. There was explicit or implicit agreement to avoid noting the gross emotional and intellectual deterioration. It could hardly be otherwise.

The woman was clearly, inescapably incompetent. She was clearly manipulated and directed by leading questions and thinly veiled orders as to what to say and do. Her fears and her delusions were clearly used and played upon by these people. Anyone listening intelligently to the taped excerpt of the events of Marcy 20 who declares Jane Duchene to be competent to make

sane decisions based on adequate understanding and knowledge of her true situation is in my judgement incompetent or dishonest. I realize that is perhaps an outrageous statement but it is one that needs to be made. Here we have an authentic glimpse of the patient's damaged mind in operation, carrying out legal business when delusional and demented. She makes or is led to make a terrible decision, giving her brother access to the substantial sums of money in the joint accounts held with her daughter. Roger's incredible conduct the following day makes clear her "decision" was terrible because he goes from bank to bank replacing the daughter in the accounts and intending to make this money become his own personal funds. He takes his sister's money and keeps it for himself.

The genesis of the accusations against the niece, Mary Jane, is clear now. We know that Roger Krause and his wife portrayed Mary Jane as a thief--stealing money from joint accounts with her mother and taking it away from her mother for her sole use. All we know that is certain is that the Krauses--and others--had these thoughts in their minds.

They attributed such motives and plans to Mary Jane and accused her. Mary Jane had no such thoughts. It would have been absurd for her to meddle crookedly with funds that were hers and would become solely hers in a short time. Further, Mary Jane is an honest person.

The crime had its conception in the minds of the accusers, not in Mary Jane's mind. Roger Krause cruelly, callously and