

CURRICULUM VITAE

AHMOS FARID FAHMY GHALY
MBChB, FRCOG, FFSRH, Dip P.S., MBA, LLB(hons), MFFLM
Consultant Genito Urinary Medicine, HIV and Sexual Health
Forensic Physician Medical Examiner
Sexual Offences Examiner
Expert Witness

September 2025

PERSONAL DETAILS:

NAME: Ahmos Farid Fahmy Ghaly

ADDRESS: Wychwood House,
11 Fairway,
Guildford
GU1 2XQ

MOBILE: 07766 084393

EMAIL: affg0412@aol.com affghaly@proton.me

POST GRADUATE ACADEMIC QUALIFICATIONS:

March/May 1991 Part II - MRCOG (UK) (Membership of The Royal College of Obstetricians & Gynaecologists)

November 1991 Completed training and Certificate of Expertise in Pelvic and Obstetric Ultrasonography, Royal College of Radiologists with Royal College of Radiologists with Royal College of Obstetricians and Gynaecologists

April 1995 M.F.F.P. (Membership of Faculty of Family Planning and Reproductive Health)

June 1996 Manchester Diploma in Psychosexual therapy, University of Manchester

May 1997 Diploma of Management of Health Services (OU)

May 2000	M.B.A. (Master of Business Administration) (OU)
July 2003	Certificate in Forensic Medical Sciences, University of Glasgow
Sept 2003	FRCOG (Fellowship of the Royal College of Obstetricians & Gynaecologists) (UK)
Dec 2004	LLB (hons) Open University
June 2007	FFSRH (Fellowship of the Faculty of Sexual and Reproductive Health)
July 2007	Post Graduate Diploma in Legal Practice
May 2008	MFFLM (Membership of the Faculty of Forensic and Legal Medicine)
July 2011	S12 approved Mental Health Examiner (MHA 1983), renewed every 5 years, last renewal was 2020

Discretionary points/Excellency awards 4 points

CURRENT POSITIONS:-

Consultant Genito Urinary Medicine and Sexual Health/HIV

Forensic Physician Medical Examiner

Sexual Offences Examiner

Expert Witness

Summary of fields of expertise

I have been working as a **Forensic physician (FME) and sexual offences examiner (SOE)** since 2002 as well as expert witness for the last 10 years. I have submitted various medico legal reports and giving evidence in court in many cases in particular cases of rape, sexual assault and child abuse. My skills and expertise in gynaecology and Genito urinary medicine have given me an extra dimension to examine the genital findings carefully both from the clinical and forensic point of view and give an opinion regarding causation and likely pathogenesis. I have extensive experience in a wide range of conditions including, inter alia, Mental health conditions and assessments in particular with relevance to fitness to interview/charge/plead, sexual assault, including cases of sexual abuse and rape including children and injuries causation and infection analysis.

In addition, I have been working as a **Consultant in Genito-Urinary Medicine and Sexual Health** since January 1995. I have wide and comprehensive expertise in the diagnosis, transmission and management of genital infections and conditions (discharge, ulcers, lumps, pain, abnormal bleeding...etc.) including, inter alia, all aspects of sexually transmitted diseases and cases of sexual and child abuse.

Brief summary of Clinical expertise

Further the following are further details regarding clinical expertise in particular related to SARC and cases of sexual abuse/rape.

Forensic Physician and Sexual offences Examiner SARC

Since 2002, I have worked for many police forces Tayside police, Surrey police, Northumberland...etc. and over the last 5 years to date I have been covering South Wales Police through Mitie Forensic Health Care. My clinical duties cover both SARC and police custodies.

I am currently undertaking SARC examinations and done so for many years, the last being 3 weeks previously, with a monthly average of 7 to 10 cases mainly female complainants. The latter involves, inter alia, examination of the Genital Tract, documentation of injuries and undertaking colposcopies and proctoscopies as required.

Consultant Genito Urinary Medicine and Sexual Health (dealing with genital infections/ conditions)

I was appointed as a consultant at Tayside University Hospitals NHS trust following extensive clinical training between 1995 and 2006. Thereafter at St Peter's Hospital, Surrey until 2008. Subsequently I worked part time in private hospital (Mount Alvernia) until 2021.

Gynaecology and Obstetrics

Since 1987 I have worked in Princess Margret and Royal Victoria hospitals Wiltshire and Lothian Teaching Hospitals until 1992 during which I obtained the Membership of the Royal College of Obstetricians and Gynaecologists (MRCOG). Thereafter was awarded the Fellowship of the same college.

The above posts are clinical posts and not academic. In order to hold a post of a consultant for instance one requires extensive hands-on clinical training and expertise. Indeed, to qualify to

sit the MRCOG examination, one has to hold clinical posts and compile logbook of many clinical cases who have undergone surgical procedure by myself.

I may add that my diverse expertise in the above fields and qualifications stated above gives me an immense competitive advantage and added dimension in, inter alia, the analysis and causation of genital findings in those cases of sexual assault. For example, as a Genito Urinary consultant, I examined thousands of women with vaginal discharge. From the clinical point of view the characteristics of vaginal discharge of each infection vary. A vaginal discharge for instance related to candida infection (thrush) gives rise to 'cottage cheese' like appearance. On the other hand, a discharge related to bacterial vaginosis and or Trichomonas vaginalis infection, gives rise to frothy smelly discharge. The one related to N gonorrhea infection tends to be yellow/greenish purulent discharge...etc. The ultimate confirmation is the microbiological results. Such findings and expertise can prove invaluable in forensic examination of cases of alleged sexual assault, rape and child sexual abuse.

I have provided many medical reports and given court evidence as an expert in, inter alia, many cases of alleged sexual assault, rape and child sexual abuse some of which had infection and vaginal discharge.

In summary the following are the areas of expertise for instruction: -

Rape/Sexual Abuse (Gynaecological Aspects),

Rape/Sexual Abuse (Andrological),

Pattern of sexual injuries and analysis/causations,

Child sexual abuse in particular those with sexually transmitted infections

Bruising and pattern of non-sexual injuries/analysis and causation

Clinical Negligence related to all aspects of Genito urinary/ sexual health cases

Police/Custody/Detention Issues,

Mental Health Assessment S12

Deaths in Custody Investigation,

Road Traffic Accidents and impairment tests/ Drink/drugs Driving,

Therapeutic Misadventure,

Venereology/Sexually Transmitted Diseases,

Conception/Contraception (Family Planning),

HIV/AIDS cases

Gynaecological Infections/ pelvic pain,

Psycho-sexual Problems

MANAGERIAL POSTS HELD: -

Head of Department Genito Urinary Medicine and Sexual Health

Clinical Director Forensic and Sexual Health Services Harmoni for Health.

- **Expert witness, court attendance and Medico-Legal Reports**

As a consultant in Genito urinary Medicine and sexual health, Senior sexual offences examiner, Forensic physician, a fellow of the Royal college of Obstetrician and Gynaecologists, a fellow of the Faculty of Sexual and Reproductive Health and a holder of LLB(Hons), I have acted as an expert witness for many years both in criminal and civil cases, including victims and suspects of sexual assault/ rape including children, and Genito Urinary medicine/ sexually transmitted diseases including HIV. In addition I have acted, submitted many reports regarding genital infections including STIs, symptoms e.g. vaginal discharge, pelvic pain, abnormal vaginal bleeding, sexual dysfunction...etc. and injuries causation.

Further, I have acted in cases revolving around the scope of forensic medicine, adverse outcome and mismanagement in Police custody healthcare, I have given expert evidence in court whenever required in many cases. My medical, legal qualifications and skills have enabled me to compile the necessary reports when required and give professional and expert evidence in relevant fields of expertise to the court whenever required.

- **DUTIES AND EXPERIENCE IN FORENSIC MEDICINE**

Over 20 years, I have been working as a Forensic Physician/FME and senior sexual offences examiner, during which I have gained the necessary skills and experience in the assessment, accurate documentation and management of wide range of conditions including cases of rape, sexual assault, injuries and their causation, Murder , GBH, mental health assessment as S12 approved, traffic offences cases, as well as the various acute and chronic medical conditions in custody healthcare. My previous gynaecological, medical and surgical experience coupled with my legal qualifications have been invaluable in developing and delivering the necessary high-quality service within Police custodies and SARC, in addition to compiling medico-legal reports and giving evidence in court when required. I have completed the recognized academic course (1 year) in Forensic Medicine in Glasgow University. I have also submitted the research assignment in DNA and data base in forensic science and was awarded the membership of the Faculty of Forensic and Legal Medicine.

- **Custody Healthcare**

I have managed a wide range of acute and chronic medical conditions in various custodies. The wide range of conditions include cases such as body mapping and injuries analysis and causation, excited delirium, epilepsy, diabetes, heart and lung disease, head injuries,

documentation of injuries in serious crime, as well as alcohol and drug dependence. In addition, I have managed various cases of Road Traffic incidents S4 & S5 (RTA) both in hospital and custodies and examining cases of suspicious death. I have developed the necessary skills to obtain intimate and non-intimate forensic samples whenever required.

- **DUTIES AND EXPERIENCE IN SARC (Sexual Assault Rape Centre)**

As a Senior Sexual Offences Examiner, I have developed and gained the necessary skills to manage those victims not only carrying out forensic examinations and obtaining necessary samples but also managing their genitourinary and contraceptive needs including emergency contraception. I have examined and managed wide range of victims of rape and sexual abuse/ assault, including children as well as suspects and complied the relevant medical reports. My expertise is not only to accurately document the examination findings but to ensure a reasonable and well-balanced analysis of causation and opinion.

DUTIES AND EXPERIENCE IN GENITO URINARY MEDICINE AND SEXUAL HEALTH

I have worked in the field of Genito Urinary Medicine, HIV and Sexual Health for many years and became specialist in the field. I gained all the necessary skills in the management of all aspects of sexually transmitted infections (STIs) including HIV disease, genital conditions (Symptoms e.g. genital discharge, pain, lumps...etc.) and sexual health issues/ abuse including children. The latter include not only screening and management of STIs but also contraception and psychosexual dysfunction. These STIs include bacterial, viral, protozoal and fungal infections. The link between HP virus and premalignant genital conditions was recognised; I

therefore established in house colposcopic facilities within the sexual health clinic. The latter had enabled me to make an earlier diagnosis of VIN, VAIN, CIN, AIN and PIN.

I recognized that sexually active patients have GU medical needs, sexual health requirements as well as contraceptive needs. Hence, I developed the integrated GU Medical/Sexual Health Services which were developed considerably and significantly to establish and maintain patient focus, quality, accessibility and acceptability to the population served in line with the Health Strategy. I have endeavored to deliver a holistic service driven by all patient sexual health needs.

As a fellow of the Royal College of Sexual and Reproductive Health I have developing and updated the family planning skills mix and services (including inter alia inserting coils and Implanon) in particular obtaining LoC IUT to ensure integrated services are delivered in One Stop Clinic as close to the point of need as possible. I.E patient would receive both STIs screen and contraception at the same clinic.

I have supported and developed the service in line with the proposed network integrated model, in particular devising: -

- Protocols, audit and clinical governance policies designed not only to extend the role of nurses but also to deliver an integrated holistic health service which revolve around client's needs as close to the point of need as possible.
- Establishing one stop sexual health clinic within hospital and community setting with in-house ultrasound scan and satellite clinic revolve around population needs.

- Daily open access clinics to meet the 48hour target and ensure patient accessibility and acceptability of integrated service provided. The most recent figure showed the percentage of patients offered appointment within 48hours v's those seen within 48 hours were 100% to 97.5%.
- Training all staff the microscopy skills and the necessary skill mix to reflect the requirements that match patient characteristics/needs and to ensure instant accurate diagnosis.

HIV Experience

I have gained the necessary skills to manage HIV patients (inpatient and outpatient) through my training as a registrar and senior registrar in Manchester and Glasgow and links with the infectious diseases unit. I have maintained and developed such a skill further by continuing to manage the cohort of HIV patients attending the clinic, since I was appointed as a Consultant. Whenever patients require in patient admission, they are generally admitted under the infectious diseases unit and/or the on call chest physicians, whereby management is delivered through a multi disciplinary team, depending on the reason for admission. I have contributed to the development of the multi disciplinary approach to management of these patients including the extended role of HIV clinical nurse specialist, through devising the necessary protocol.

- **Mental Health Assessment**

As S12 approved Mental Health Assessor, I have been involved in variety of assessments of mental health cases; these include the wide spectrum of acute and chronic mental health disorders. Majority of offenders who are arrested by the police seem to suffer from mental

disorders. Many require mental health assessments to determine their fitness to plead or for being interviewed/charged. Significant numbers are arrested under S136 but due to their violence they are detained in police custody. As an FME, I have been involved in many formal mental health act assessments with the AMPH and other S12 doctors.

DUTIES AND EXPERIENCE IN OBSTETRICS, GYNAECOLOGY, FAMILY PLANNING AND SEXUAL HEALTH

I have worked in the above field for many years since 1987, during which time I have gained the necessary training and expertise in all aspects of Gynaecology, maternity and Family Planning and sexual health. I have obtained the membership of the RCOG (Royal College of Obstetricians & Gynaecologists) (UK) in 1991 and gained the Fellowship of the RCOG in 2003. The following are some areas of my expertise in various fields, which are not exhaustive:-

Family Planning and contraception

Family planning and contraceptive services has been an integral part of gynaecological services and part of the overall training and requirements to qualify for the membership of the RCOG. I have gained all the necessary skills of counseling, assessment and providing the wide range of contraception including insertion of long-acting reversible contraception (LARC) which include IUD (intra uterine device) and sub dermal implants (Implanon) having received the necessary training following its launch.

In Mid 1990s the Faculty of Family Planning was branched off the RCOG but remained a Faculty of the Royal College of Obstetricians and Gynaecologists. I became a member of the said Faculty and in June 2007 I was awarded the Fellowship of the said Faculty.

Pelvic Pain

Chronic pelvic pain is rather difficult to manage as patients are often referred to various specialties such as Gynaecology, Psychology/Psychiatry, Urology and GU Medicine. I have established such a clinic with ultrasound scan, in the best interests of patient care further combining my skills in both ultrasound, Gynaecology, Surgery and GU Medicine. This clinic has proven to be successful, especially for the young patients who are seeking confidential, client-friendly care.

Psychosexual Clinic

Patients present in sexual health clinic are diverse and not uncommonly with sexual dysfunction. Having obtained the diploma in Psychosexual Medicine in conjunction of my skills in gynaecology, and surgery, I have been able to establish a clinic to manage these patients with variety of conditions of sexual dysfunction nature.

MANAGEMENT AND ADMINISTRATIVE EXPERIENCE

M.B.A (Master of Business Administration)

I have been working as a Clinical Lead within the NHS in the past as well as secretary of regional medical society.

Faced with the various managerial challenges, I have studied MBA over a 5-year period with the Open University; modules included Management of Health Services, Strategic

Management, Managing Change and Innovative Management. I have undertaken the task of studying the MBA over and above my full-time Clinical Consultantship. I have used and applied the various management skills learnt to manage the GU Medicine Services and adapted strategic and innovative thinking.

Other Relevant Topics were:-

Human resources and management of stakeholders

Structure and Organisation of the NHS

Management of Change

Role Clarification and Time Management

Managing People and Discipline

Health Economics

Negotiating skills

Clinical and Activity Information – Its role and Application and Team Building

LEGAL EXPERIENCE

LLB

Law and medicine are inter-linked. This has been inter alia of great value for my duty as a forensic physician and expert witness, in particular in writing reports, giving evidence and understanding the judicial system. I have embarked to enrich my legal skills by studying various law modules with Open University in particular areas of negligence and the supremacy of EC law over domestic law in areas such as Human Rights, working hours, patient rights, consent etc. I have obtained the LLB in order to gain more appreciation of the medico-legal matters within the NHS. It has been of great benefit in recognising interaction between medicine and law within the NHS structure.

Professional Leadership

- I have been a lead clinician/ Head of Department with sole responsibility for professional and strategic leadership.
- As a clinical director for Harmoni, I have monitored and audit the management of cases presenting with sexual assault from the forensic, genito urinary and contraception aspects.
- As a secretary of the medical society, I have organized annual educational meeting with relevant CPD.
- I have been involved in devising evidence based operational and clinical protocols and clinical governance policies on behalf of the medical director.
 - I. Health Promotion and Primary Prevention.
 - II. Establishing community based clinic drop off service addressing health needs in patient friendly environment.
- Led clinical services through a time of increased demand in face of severely constrained resources by modernizing GUM/ sexual health service and the way it is delivered.
- Contributed to the improvements in Public Health in terms of disease control and monitoring the epidemiological trends of diseases especially among young people and the vulnerable socially deprived patients.
- Ensured effective partner notification (contact tracing) of 72%. This is a key performance indicator in infection control. National Standard 70%.
- Much of the problems of some diseases are hidden as many remain asymptomatic e.g. Chlamydia. I have therefore encouraged the attendance and the simplified cross referral as I felt that better control of infections by effective screening, treatment and contact tracing should decrease serious complications such as infertility, ectopic pregnancy and chronic pelvic pain.

- Developed a simplified referral letter with instructions/tear off slip/telephone numbers for GPs to use when a disease/infection is diagnosed in the community. This reduces the secretarial work of formal referral decreasing unnecessary patient delay for an appointment.
- Established active Hepatitis B immunisation policy for high-risk GUM attendees. (gay men, sex workers, drug users).
- Developed effective preventative measures by devising public educational leaflets.
- Devised a patient prescriber section for General Practitioners for the management of sexually transmitted Infections in Primary Care.

RESEARCH, INNOVATION AND IMPROVEMENT IN THE SERVICE

PUBLICATIONS

- *“Is urethrolithiasis a simple cure for stress incontinence”*
Journal of Obstetrics and Gynaecology, July 1993, Vol 24, pages 21-56.
- *“The role of ultrasonography in Genito Urinary Medicine (present and future)”*
A Ghaly. BJ of Sexual Medicine Sept/Oct., 1993, Vol. 21 pages 22-27
- *“Transrectal ultrasonography in male urethritis”* Ghaly, Taylor, Goorney
Genito-Urinary Medicine, 1994, Vol. 70, pages 399-401.
- *‘Should woman with genital warts undergo colposcopy examinations?’* A Ghaly, I Duncan
Journal of Obstetrics and Gynaecology, 1999, Vol 19, pages 500-502
- *“Chronic Pelvic Pain Clinical dilemma and Clinicians Nightmare”* Sextrans Inf 2000 Dec, 76. 0-6.
- *Pilot STI Clinic in a Community Young People Centre* A Ghaly, G Orange, P Sturrock,
Sexual Health Matters, Vol 4; No 1, 2003

- *The Role of Ultrasound Scanning in GU Medicine ‘Review Article’* A Ghaly, Sexual Health Matters, July – September 2004, Vol5, No 3

Case Report

- *“Facio-oral condyomata acuminata due to HPV genotype 30 contracted via heterosexual oro-genital contact”*, Ghaly A, Goorney B. British Journal of Sexual Medicine July/Aug. 1993, Vol 20 No 4, page 10
- *“Foreign Body in Male Urethra”* Ghaly A, Munishankar K., Sultana S., Nimmo M. Genito-Urinary Medicine. 1996; 72: 67-68.

Letter

- *Extensive condylomata acuminata of male urethra: management by ventral urethrotomy.* K.M. Kenser, British Journal of Urology (1993) 71, 204-207. (Higgins S., Ghaly A.).

PROFESSIONAL BODIES AND LEARNED SOCIETIES

1. Royal College of Obstetricians and Gynaecologists (RCOG)
2. Medical Protection Society (MPS)
3. Faculty of Sexual and Reproductive Health (FRSH)
4. British Medical Association (BMA)
5. Faculty of Forensic and Legal Medicine (FFLM)

Testimonials

To whom it may concern

Dear Sir/Madam

Testimonial for Dr Ahmos Ghaly.

Consultant Physician Genito Urinary Medicine and Forensic Physician Expert Witness.

I engaged Dr Ghaly's expert services in a recent criminal case in which I was instructed. My client was charged with two counts of rape (one vaginal and one anal) with his case listed before the Crown Court in Craigavon, Co Armagh. Dr Ghaly was asked to provide reports based on whether alleged injuries sustained by the complainant to her anus could be consistent with an allegation of forceable penetration without consent.

My client gave a version of events that the vaginal rape was consensual and, during the course of same, he had accidentally penetrated her anus. The complainant's version being that the intercourse was initially consensual but that she had subsequently changed her mind and that the anal penetration was never consented to at any time. The alleged injuries to her injuries were documented within a prosecution medical report.

Throughout the course of the case Dr Ghaly was tasked to provide a number of reports. He always did so in a timely fashion and his reports were of the highest standard expected from an expert witness. He was extremely thorough in his approach and his findings were those of an individual clearly well-versed in his chosen field.

He suggested and undertook to participate in a joint consultation with the prosecution medical expert in order to try to resolve some areas of contention between them both. He further took part in a lengthy zoom consultation with myself, as instructing solicitor, and with both junior and senior counsel, in order to take the time to fully explain any medically complicated portions of his reports that could have proved difficult for the lay person to understand. This was immeasurably helpful to us a legal team in preparing a defence for our client and it was very much appreciated that Dr Ghaly took the time out of his busy schedule to assist in such a way.

Dr Ghaly's reports themselves were of the highest quality and set out in such a way that they were easy to approach and understand. He was also prepared to accommodate the court by agreeing to attend for trial in person, rather than appearing remotely. The importance of having an expert witness such as Dr Ghaly attend trial in person can not be understated. Not only would it have made it much easier for us, as legal team, to consult with him throughout the trial but for examination purposes it would be essential that he would be in attendance in person. This underlines the absolute professionalism with which Dr Ghaly clearly approaches his work.

The case itself rumbled on for a considerable period of time, largely in order to accommodate to provision of certain medical notes and records etc to Dr Ghaly, and to allow time for the obtaining and provision of the number of reports required in order for us to mount a proper defence. Ultimately, shortly before the commencement of the actual trial itself, the complainant instructed the prosecution not to proceed and the defendant was found not guilty by direction. I have no doubt that Dr Ghaly's reports were instrumental in avoiding a miscarriage of justice occurring in this instance.

I would certainly instruct Dr Ghaly in the future and would have no hesitation in recommending his expert services to others.

I trust this is of assistance.

Kind regards

Philip Reid LLB

Gerard Maguire Solicitors Ltd

Forensic Medical Advice Team Expert Feedback Form

Your Rank/Name [REDACTED]
Force [REDACTED]
Victim Name / Operation Name [REDACTED]
FMAT Reference Number OP
Expert's Name(s) DR Ghaly
Specialism Child medical

The Forensic Medical Advice Team team would be grateful if you would take the time to complete this questionnaire to ensure that the independent experts provided meet the required professionalism and competency.

Please complete the relevant sections.

Section 1: Expert

Was the expert easy to contact? Yes ☒ No ☐ N/A ☐
Were you satisfied with the quality of any verbal and/or written information given? Yes ☒ No ☐ N/A ☐
Would you use the expert again? Yes ☒ No ☐ N/A ☐

Please use the space below to provide any evidence and additional comments (positive or negative):

For example,

1. Professionalism
2. Very detailed and comprehensive answers to the questions asked by myself

Section 2: Report

Were you satisfied with the quality of the expert report provided? Yes ☒ No ☐ N/A ☐

Please use the space below to provide any evidence and additional comments (positive or negative):

For example,

3. Excellent

Section 3: Court Presentation

Were you satisfied with the quality of the expert evidence provided at court? Yes ☐ No ☐ N/A ☒

Please use the space below to provide any evidence and additional comments:

For example,

4. Not at court yet

Thank you for taking the time to complete this feedback form. Please submit to FMAT@nca.gov.uk

Forensic Medical Advice Team Expert Feedback Form

Your Rank/Name	
Force	
Victim Name / Operation Name	
FMAT Reference Number	
Expert's Name(s)	Dr Ghaly
Specialism	Genitourinary medicine and sexual health

The Forensic Medical Advice Team team would be grateful if you would take the time to complete this questionnaire to ensure that the independent experts provided meet the required professionalism and competency.

Please complete the relevant sections.

Section 1: Expert

Was the expert easy to contact?	Yes ☒	No ☐	N/A ☐
Were you satisfied with the quality of any verbal and/or written information given?	Yes ☒	No ☐	N/A ☐
Would you use the expert again?	Yes ☒	No ☐	N/A ☐
Please use the space below to provide any evidence and additional comments (positive or negative):			
<i>Very easy to make contact with via the secretary.</i>			

Section 2: Report

Were you satisfied with the quality of the expert report provided?	Yes ☒	No ☐	N/A ☐
Please use the space below to provide any evidence and additional comments (positive or negative):			
<i>Received very quickly and meets all requirements.</i>			

Section 3: Court Presentation

Were you satisfied with the quality of the expert evidence provided at court?	Yes ☐	No ☐	N/A ☒
Please use the space below to provide any evidence and additional comments:			
<i>This matter has not yet gone to court.</i>			

Thank you for taking the time to complete this feedback form. Please submit to

FMAT@nca.gov.uk

Dear Sir/Madam

Testimonial for Dr Ahmos Ghaly.

Consultant Physician Genito Urinary Medicine and Forensic Physician Expert Witness.

I provide this testimonial in relation to Dr Ahmos Ghaly's work in recent case where my client was charged with assault by penetration s2 Sexual Offences Act 2003. This was an extremely serious, sustained and egregious assault inflicted by way of punishment on the defendant's former girlfriend for her perceived infidelity. It was allegedly committed in the presence of their infant son. It was complicated by the following factors:

1. It was agreed that the defendant had assaulted the complainant to numerous other parts of her body and he had pleaded guilty to assault ABH for those other injuries,
2. It was agreed that the complaint had been broadly accurate and truthful about this assault ABH, but the defendant contended that the assault by penetration was a ,
3. It was agreed these were no internal genital injuries but certain external genital injuries that might be consistent with an assault in that region,
4. The defendant was under the influence of alcohol and possibly Class A drugs at the time,
5. The complainant had confided in a nurse that she had had sexual intercourse with another man shortly *after* the alleged assault by penetration (although she later denied saying this), and
6. The defendant, aged 20, had answered 'no comment' in police interview.

My client pleaded guilty to the assault ABH early on in proceedings. The more serious assault by penetration charge proceeded to trial.

This was arguably the most serious sexual allegation I have worked on in 17 years as a solicitor. Typically the defence case is either 'consent' or 'did not happen'. Here, there was clearly a sustained assault which had caused numerous minor injuries to other parts of the body. There were no questions of consent and there were also external genital injuries. The issue was penetration and gravity of harm.

My decision to instruct Dr Ghaly proved to be pivotal to the outcome of this case. The issue was whether the lack of internal vaginal injury was consistent with the allegations. Throughout, Dr Ghaly's advice was timely, with opinions relevant to the issue but always happy to articulate and expand further his explanation if required.

To our surprise, the Crown Court judge excluded any mention of the complainant's subsequent sexual intercourse with another man. This hugely reduced the points we could raise in rebuttal, including injury severity and causation. Dr Ghaly therefore gave evidence in limited but still very

helpful form - in the face of a judge who was openly hostile to the defence case. There was a huge risk of conviction if the jury accepted the complainant's account. The trial ended in a hung jury. Had the defendant been convicted, the sentence would probably have been close of 10 years imprisonment. In my view it would have been a very serious miscarriage of justice and the main factor which prevented this was Dr Ghaly's testimony, limited though it was by the Judge's ruling.

Prior to retrial, the Prosecution then instructed their own expert witness. That expert reviewed all of the medical evidence, Dr Ghaly's report, and then drew his own conclusions. He spoke highly of Dr Ghaly's conclusions and both experts then liaised on a joint report. This report was not only consistent with the defendant's account, but also re-opened the admissibility question about subsequent sexual contact. The whole shape of the case had changed.

Shortly before retrial, the Prosecution 'offered no evidence' on the more serious charge of assault by penetration. This was a hugely fortunate outcome for a young defendant, in the face of a very hostile courtroom environment and what initially seemed like strong evidence against him. It would not have been possible without Dr Ghaly's work, turning around reports, updates and liaison with his opposite number very efficiently. I also understand Dr Ghaly also stood up well in court despite quite a hostile judge.

I have no hesitation in recommending Dr Ghaly for similar work and as an expert witness in this field. He literally averted a miscarriage of justice.

Yours sincerely

Alistair Parker, Solicitor
BRETT WILSON LLP