EUROPEAN COURT OF HUMAN RIGHTS
COUR EUROPÉENNE DES DROITS DE L'HOMME

THIRD SECTION

DECISION

Application no. 1111/18
Irini NESIADI
against Greece

The European Court of Human Rights (Third Section), sitting on 30 June 2026 as a Committee composed of:

Peeter Roosma*, President*,
Ioannis Ktistakis,
Lətif Hüseynov*, judges*,
and Olga Chernishova, *Deputy Section Registrar,*

Having regard to:

the application (no. 1111/18) against the Hellenic Republic lodged with the Court under Article 34 of the Convention for the Protection of Human Rights and Fundamental Freedoms ("the Convention") on 29 December 2017 by a Greek national, Ms Irini Nesiadi ("the applicant"), who was born in 1951 and lives in Athens, and was represented by Mr V. Chirdaris, a lawyer practising in Athens;

the decision to give notice of the application to the Greek Government ("the Government"), represented by their Agents, Mrs S. Trekli, Senior Adviser, and Ms A. Zachilas, Legal Representative A, at the State Legal Council;

the parties' observations;

Having deliberated, decides as follows:

SUBJECT MATTER OF THE CASE

1. The case concerns the applicant's allegation that the domestic investigation into the circumstances of her husband's death, following his medical treatment in a public hospital, had been ineffective, in breach of Article 2 of the Convention.

2. The applicant is the wife of Ioannis Nesiadis, who died on 18 September 2013 at the age of 83.

A. Hospitalisation and death of the applicant's husband

3. On 2 September 2013 the applicant's husband suffered a stroke and was admitted to the Patras General University Hospital.

4. During the first days of his hospitalisation, his condition was reported to have stabilised and showed signs of improvement.

5. On 6 September 2013 he developed symptoms consistent with acute organic psychosyndrome/delirium accompanied by psychostimulant agitation. Sedative medication was administered.

6. The Government stated that, from 6 September 2013 onwards Mr Nesiadis had received feeding and medication *via* intravenous lines. The applicant disputed this, submitting that her husband had been fed orally.

7. From 12 September 2013 the patient's condition deteriorated, with respiratory complications and worsening renal function. Vancon was administered. The Government submitted that the dosage had been determined on the basis of laboratory findings and that the patient's vital functions had been regularly monitored. The applicant disputed this, arguing that the monitoring had been inadequate and that the continued administration of Vancon had contributed to her husband's deterioration.

8. The Government submitted that the physicians had sought to locate an available Intensive Care Unit (ICU) bed on 15 September 2013 and had made further efforts on 16 September 2013, without success. The applicant submitted that the request for admission to an ICU had been made only on 17 September 2013. She had subsequently located an available bed in a private hospital in Athens.

9. On 17 September 2013 Mr Nesiadis was transferred to the ICU of the Evgenideio Hospital in Athens.

10. On 18 September 2013 Mr Nesiadis died.

B. Investigation into the circumstances of the applicant's husband's death

11. On 9 October 2013 the applicant lodged a criminal complaint with the prosecutor at the Patras Criminal Court of First Instance against six doctors, alleging manslaughter by negligence, and joined the proceedings as a civil party. She alleged that there had been three medical errors in respect of her husband: (a) failure to protect his airway; (b) incorrect dosage of antibiotics; and (c) his delayed transfer to an ICU. In the course of the proceedings and in accordance with Article 204 of the Code of Criminal Procedure, which allows parties to appoint a technical adviser in the context of an expert examination, the applicant appointed a technical adviser at her own expense. The adviser prepared and submitted a report dated 22 September 2014, indicating that shortcomings in the patient's medical management might have contributed to the fatal outcome, and the report formed part of the case file.

12. During the preliminary inquiry, the Patras magistrate ordered an expert report by a court-appointed medical expert, who was to determine, under oath, whether the actions of the doctors had caused the death of Mr Nesiadis or had contributed to the deterioration of his health.

13. By an order of 9 November 2015, Dr E.L. was appointed as expert. The order was also notified to the applicant.

14. On 20 November 2015 the expert submitted his report, concluding that the patient's deterioration was attributable to aspiration pneumonia and that the physicians had acted in accordance with accepted medical practice, referring to the relevant scientific literature. The applicant did not submit observations or request clarification in accordance with domestic law.

15. On 10 January 2017 the prosecutor partly discontinued the proceedings against three of the doctors and referred three others, namely Dr S.A., Dr M.M. and Dr C.G., for trial before the Patras three-member Court for misdemeanours by direct summons (*κλητήριο θέσπισμα*) no. 113/2017.

16. The three accused doctors lodged a recourse (*προσφυγή*), arguing that their treatment of Mr Nesiadis had been consistent with accepted medical practice, referring to relevant international guidelines and scientific literature.

17. By orders nos. 10/2017 of 9 May 2017 and 11/2017 of 30 May 2017, the prosecutor at the Patras Criminal Court of Appeal upheld the recourse and referred the case to the indictments division of the Patras Criminal Court of First Instance, proposing that no criminal proceedings be instituted.

18. On 16 October 2017 that court issued decision (*βούλευμα*) no. 456/2017, endorsing the prosecutor's proposal. The court examined the written statements of the accused doctors, the court-appointed expert's report and the scientific literature cited therein, together with the medical report submitted by the applicant's technical adviser. It found that Dr C.G. had not been part of the medical team responsible for the patient's treatment and that Dr S.A. had acted as the patient's attending physician for one day only. As regards Dr M.M., it considered that the medical decisions taken had been based on international medical literature and appropriate clinical assessments. It also noted that efforts to secure an ICU bed had been made as early as 15 September 2013. Lastly, as to the alleged risks associated with the patient's transfer, it relied on the submitted documents indicating that the transfer could not have worsened the patient's condition.

C. The applicant's appeal

19. On 6 November 2017 the applicant applied to the prosecutor at the Patras Criminal Court of Appeal, asking him to appeal against that decision. She submitted two additional medical opinions of 24 October 2016 and 22 November 2016, which had been commissioned by her, attributing the patient's death to shortcomings in his hospital treatment.

20. On 8 November 2017 the prosecutor at the Patras Criminal Court of Appeal rejected the request, noting that decision no. 456/2017 had examined the case in a fully reasoned manner.

D. Further developments

21. On 13 April 2017 the applicant brought an action against the Patras General University Hospital before the Patras Administrative Court of First Instance under Article 105 of the Introductory Law of the Civil Code, seeking compensation in respect of non-pecuniary damage. By preliminary decision no. 1112/2022, the court of first instance ordered the preparation of an additional medical expert report. The report, dated 19 February 2024, concluded that the patient's deterioration had not been considered when the administered medication had been adjusted. By a further report of 5 August 2024, the opposite conclusion was reached and no medical negligence was found. The administrative proceedings remain pending.

THE COURT'S ASSESSMENT

22. Relying on Article 2 of the Convention, the applicant complained that the investigation into her husband's death had been ineffective and that the evidence had been incorrectly assessed, in particular as the authorities had disregarded three private medical opinions indicating negligence and had dismissed her appeal without sufficient reasoning.

23. The Government raised an objection of non-exhaustion of domestic remedies. The Court considers it unnecessary to examine it, since, in its view, the application is in any event inadmissible for the reasons set out below.

24. The general principles regarding the States' procedural obligations under Article 2 of the Convention in the context of healthcare have been summarised in *Lopes de Sousa Fernandes v. Portugal* ([GC], no. 56080/13, §§ 214-21, 19 December 2017) and, more recently, in *Harutyun Karapetyan v. Armenia* (no. 53081/14, §§ 67-75, 29 October 2024). Expert evidence is often of crucial importance, and the conclusions of experts must therefore be properly scrutinised by the authorities (see *Eugenia Lazăr v. Romania*, no. 32146/05, §§ 76-80, 16 February 2010; *Jurica v. Croatia*, no. 30376/13, § 86, 2 May 2017; and *Jaklová and Others v. the Czech Republic*, no. 38342/23, § 50, 4 December 2025).

25. In the present case, the Court notes at the outset that the applicant did not contest the independence or impartiality of the court-appointed expert, nor did she complain of excessive length of the investigation. Accordingly, the scope of her complaint is limited to the adequacy and thoroughness of the criminal investigation into the circumstances surrounding her husband's death.

26. The Court observes that the domestic authorities reacted to the applicant's allegations by opening a preliminary criminal investigation. During the investigation, they gathered documentary evidence and obtained witness statements and the explanations of the accused doctors (see paragraph 18 above). They also ordered an expert examination, entrusted to an independent specialist, who gave his findings under oath. The expert based his findings on a review of the complete medical file and addressed the central questions concerning the adequacy of the medical treatment and the possible causal link with the patient's death. The report referred to relevant scientific literature and concluded that the physicians had acted in accordance with accepted medical practice (see paragraphs 12 and 14 above).

27. The applicant complained that the medical reports pointing to possible negligence had been disregarded by the authorities. The Court notes in this regard that, prior to the appointment of the expert, she had submitted a medical opinion prepared by her technical adviser, which was included in the case file (see paragraph 11 above). There are no grounds to presume that that medical opinion was not made available to the court-appointed expert or was ignored by him (see *E.M. v. Romania* (dec.), no. 20192/07, § 51, 3 June 2014). The Court further notes that under domestic law the applicant enjoyed specific procedural rights enabling her to participate in the expert process and comment on or contest its findings. There is no indication that she sought to avail herself of those possibilities (compare *Brun and Lledo v. France*, no. 53686/21, § 54, 16 October 2025) or that her rights in this regard were in any way restricted (see *Harutyun Karapetyan*, cited above, § 98). It was only at the appeal stage when she submitted two additional medical opinions (see paragraph 19 above).

28. As regards the applicant's criticism of the weight given to the court-appointed expert's report, the Court notes that that report was not treated as automatically decisive. The prosecutorial authorities provided a reasoned assessment of the evidence, including the doctors' written statements and the court-appointed expert's report, which referred to relevant international scientific literature and guidelines. They addressed the applicant's allegations in detail and concluded that there were no sufficient indications of the doctors' criminal liability (see *Altuğ and Others v. Turkey*, no. 32086/07, §§ 78-82, 30 June 2015; *Jurica*, cited above, § 86; and *Eugenia Lazăr*, cited above, §§ 76-80; compare *Mehmood v. Greece*, no. 77238/16, § 71, 25 March 2021). The Court reiterates that it is not its role to substitute its own assessment for that of health professionals or to speculate whether different medical decisions should have been taken (see *Harutyun Karapetyan*, cited above, § 99).

29. Lastly, the applicant complained of the succinct manner in which the prosecutor at the Court of Appeal rejected her request to appeal against the discontinuation decision (see paragraph 20 above). In this regard, the Court reiterates that, under Greek law, the public prosecutor is entitled to reject such

a request in a summary manner and that no specific obligation to give detailed reasons arises in this context, since the prosecutor's response to the request of the party to the proceedings is not formulated as an "order" within the meaning of Articles 138 and 139 of the Code of Criminal Procedure (see *Leotsakos v. Greece*, no. 30958/13, § 27, 4 October 2018, and *Gorou v. Greece (no. 2)* [GC], no. 12686/03, § 40, 20 March 2009).

30. Accordingly, the Court concludes that the criminal proceedings in the present case complied with the procedural obligations arising out of Article 2 in respect of the applicant's husband's death.

31. Finally, the Court notes that the applicant initiated administrative proceedings concerning the potential liability of the hospital at an institutional level (see paragraph 21 above). These administrative proceedings remain pending, the applicant has not complained about any aspect of those proceedings and their outcome has no direct bearing on the Court's examination of the present case (compare *Mehmood*, § 73, and contrast *Lopes de Sousa Fernandes*, § 234, both cited above).

32. In the light of the foregoing, the Court concludes that the respondent State complied with its procedural obligations under Article 2 of the Convention. Accordingly, the present application must be rejected in accordance with Article 35 §§ 3 (a) and 4 of the Convention as manifestly ill-founded.

For these reasons, the Court, unanimously,

Declares the application inadmissible.

Done in English and notified in writing on 27 August 2026.

Olga Chernishova Deputy Registrar	Peeter Roosma President