In Session
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August 22

Watch this thread for live updates from the Drew Peterson murder trial!

The parties appear to be going back into the courtroom. The trial will be resuming shortly.

In Session Judge Burmila is back on the bench.

The jurors return to the courtroom.

August 22 at 3:44pm · Like · 5

08/22/2012: Prosecutor John Conner on direct examination

In Session

The State calls its next witness: Dr. Vinod Motiani questioned by prosecutor Connor.

“I’m a general internist.”

He goes over his educational and professional background.

“Did you have an occasion to treat Kathleen Savio or Kathleen Peterson?”

“Yes.”

“Did you begin treating her in 1992?”

“If I can look at my records . . . my first visit with her was on May 8, 1992.”

“And your last contact with her was on Oct. 21, 2003?”
“That was my last telephone contact with her.”

“Did you conduct physicals of Kathleen Savio?”

“Yes.”

“Did you conduct a physical on June 3, 2003?”

“Yes, I did.”

In Session

“When she came in, she complained about night sweats, constipation, and (?).”

“Those were her only complaints?”

“Yes…somewhere down in the history, she told me she had a heart murmur. The best way to confirm the significance of that is to do an echocardiogram…this is an ultrasound of the heart…it will tell you if there’s something wrong in the walls of the heart, the valves of the heart. I did review my records, and it was recorded as normal…the chambers of the heart were pumping naturally.”

“Did you ever have occasion to diagnose Kathleen Savio with M.S.?”

“No.”

“Based on your interactions and your treatment of Kathleen Savio through 1992 through 2003, did you encounter any condition that would cause her to be more likely to have a slip and fall fatal accident in the tub?” Objection/Sustained.

“She was at normal risk as any other person.”

“Did she ever complain about any inability to balance?”

“She didn’t complain out of the usual…no more than usual.”

“During your June 3, 2003 physical of her, did she have occasion to complain of dizziness or fatigue?”

“As the form shows, one of the questions asked was, ‘Is there any incident of dizziness or fainting?’ and she did not answer positively. So it was not recorded as such.”
In Session

The sidebar ends.

“She did not indicate anything about heart palpitations or heart murmur?”

“The only thing I have circled on my report was ‘constipation’... she said her menstrual flow was normal, and her last period was a few days prior to the office visit. That’s all she checked off.”

This ends the direct examination of this witness.

August 22 at 3:55pm · Like · 5

08/22/2012: Defense Attorney Darryl Goldberg on cross examination

In Session

Darryl Goldberg begins his cross-examination.

“Do you have a vivid recollection as you sit here of June 3, 2003, when you did this physical?”

“Just what’s written on the chart.”

“You’re really just relying on a habit?”

“I’m going purely by what’s written over here.”

“Fair to say when your patients come to see you, their medical condition or symptoms can change rather quickly?”

“It’s possible.”

“People’s weight can fluctuate?”

“Yes.”

“Her cholesterol would go up and down?”

“Correct.”

“She had a history of high cholesterol?”

“Correct.”

“The cholesterol medication caused some aches and pains, and at one point she stopped that?”
“There’s no way to prove or disprove it…so she stopped it, to see if that went away…we always will consider it.”

“There was a time when her cholesterol level rose, and you made a note to make sure she was actually taking the medication?”

“It was borderline high.”

“You first saw her on May 8, 1992?”

“Yes.”

“You understand she weighed 124 pounds on that date?”

“Correct.”

“And the last time you saw her she weighed 136 pounds?”

“Yes.”

“You just had this one phone call in Oct., when she asked you for a prescription for Zoloft, because she couldn’t get a hold of Dr. Neri?’

“Yes.”

August 22 at 4:01pm · Like · 2

In Session

“When Ms. Savio passed, she weighed 154 pounds . . . that would be a significant weight gain that you would be concerned about?”

“If she stated she did nothing out of the usual, then it would be significant. But people do change their habits.”

August 22 at 4:01pm · Like · 3

In Session

“She never came to you when she fell down the stairs in October of 1999?”

“Based on my records, no.”

“So you have no recollection of that?”
“No.”

“You do know of her complaints to Dr. Neri, her neurologist?”

“After reading the records, yes.”

“Dr. Neri said Ms. Savio came to see him because in April, 1999 she developed numbness in her left arm?”

“That’s what the records reveal.”

“And the blood tests revealed that she had some kind of arthritic condition?”

“That’s right.”

August 22 at 4:04pm · Like · 4

In Session

The witness is shown a medical record that was previously shown to earlier witness Dr. Gene Neri. “

“You recognize this as a letter from Dr. Neri, dated April 3, 1999?”

“Yes.”

“‘She feel very unsteady in her gait’...that’s the symptom in this letter?”

“That’s what she’s reporting to him.”

“‘Very irritable and slightly depressed’? “Yes.”

“She made the same complaints to you, about being fatigued?”

“If I go by the records, it’s possible...yes, she has on a couple of occasions ticked off the symptom ‘fatigued.’”

“Your impression was that she suffered from fatigue on more than one occasion?”

“I’ll have to look at the records; please bear with me...”

“Let’s just finish up with Dr. Neri’s letter...if you flip back to it in your file...she also had some pain in her feet, particularly in the mornings?”

“Correct.”

“And there’s a strong family history of diabetes and high cholesterol?”
“Yes.”

“And her sleep is described as ‘horrible’?”

“Yes.”

“The reason you discuss family history is that it signifies that some people are more likely than others to suffer from a specific disease?”

“That’s correct.”

August 22 at 4:09pm · Like · 3

In Session

“She talked about the pain on the left side of her chest that she was having?”

“According to the record, she complained of chest pain often.”

“In 1993, she had left side chest pain?”

“Yes.”

“And that’s when a murmur was detected?”

“September 2, 1993…I found the murmur.”

“Now let’s go to Jan. 30, 1995…there’s again left chest soreness that was her complaint to you?”

“Yes.”

“There came a time when you were asked about the murmur, when you sent her out for an echocardiogram?”

“That’s correct.”

“Because she had some sort of chest abnormality, it wasn’t a perfect test?”

“Yes, it does say that.”

August 22 at 4:12pm · Like · 3
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“Yes, it does say that.’

August 22 at 4:14pm · Like · 3

In Session


“Yes, of wheezing and some numbness in the left chest.”

“And she told you about heart palpitations on that day?”

“Correct . . . those are the symptoms given to me.”

“Over the next year or so, she kept complaining of lower back pain?”

“Correct.”

“On Jan. 6, 1997, she had numerous complaints for you?”

“Yes.”

“You followed up with a physical?”
“On Jan. 6, I did part one of the physical . . . I split it into two days.”

“You noted she was fatigued, and she’s been tired for a few years?”

“Yes.”

“She wasn’t sleeping well, and considered herself as having two jobs, one at work and one at home?”

“Yes.”

“She had numbness and tingling in her hands, and she felt blah?”

“Yes . . . I document what they tell me.”

“And there was peptic ulcer disease?”

“Correct.”

“She also told you she often felt like something was stuck in her throat?”

“That’s correct.” “On October 21 of 1997, you noted some fluid retention and joint stiffness?”

“That’s right . . . basically, when you have fluid retention purely by gravity, you have fluid that goes does to the lower extremities.”

Dr. Motiani lists several of the most common causes for fluid retention.

“She told you she wanted to dry medications, and she was prescribed a water pill?”

“That’s right.”

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In Session

“In May of 2000, she was bloated again at that particular time?”

“She said bloating off and on.”

“And her habitual constipation was after that Jenny Craig diet, for three months?”

“Yes.”

At one point, the doctor thought Savio might have fibromyalgia.
“It’s a lot of muscle aches and pains. There’s no test; it’s a clinical diagnosis . . . if multiple muscle groups are aching, we may diagnose it as fibromyalgia . . . it’s a diagnosis of exclusion, but that was my assumption.”

The witness is then asked about Savio’s medical form filled out on May of 2000, she was bloated again at that particular time.

“This is after she’s already seen Dr. Neri for her cervical vertigo?”

“That’s right.”

“She reported ‘feeling dizzy at times’?”

“That’s true.”

“She lists Zoloft and lorazepam as drugs she’s taking, and a fat blaster pill?”

“That’s true.”

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In Session

“You also had a chance to see her on August 20th of that same year?”

“That’s right.”

“On that day, she continued to have lower back pain and neck pain?”

“That’s right ... she was frustrated about pain.”

“And it was recommended she have a breast reduction?”

“Yes.”

“But as far as you know from the last time you saw her, that didn’t happen?”

“That’s true.”

“In March, 2002, she was sent out to have a routine mammogram?”

“Yes, you’re right.”

“At that time, you discussed that she had an abnormal mammogram, but she didn’t want to have any addition testing?”

“Yes.”
In Session

“In May of 2002, she came in because her tongue was inflamed, and you thought she may have bitten her tongue?”

“That’s correct.”

“If someone were to bite their tongue, that could be an indication of a seizure?”

“It’s possible, yes.”

In Session

“On March 4, 2003, you wanted her to take a blood test, because she still complained of being dizzy?”

“Apparently Dr. (?) wanted her to have some tests. And she requested a test for diabetes…to justify for the insurance companies to pay, we have to put a diagnosis. And that was dizziness.”

“She had gestational diabetes, and her weight would fluctuate like a diabetic’s would?”

“Yes.”

“If someone was diabetic and they didn’t eat for a long amount of time, they could have an event of hypoglycemia?”

“No, that’s not correct. The human body will never let the sugar level go too low…but when they’re taking medications, that’s when the sugar goes down if they don’t eat.”

“She told you she was continually constipated on April 11, 2003?”

“I don’t have anything in April…there is a phone message, that’s right”.

In Session

“Recall testifying in 2010?”
“If it’s in the transcript, yes.”

“And you said you had some communication from Dr. Neri about giving her adovane?”

“If it’s in the record.”

“Perfectly healthy people can fall?”

“Yes.”

“And that’s what you called clumsy?”

“If it’s there, it’s there.”

“You wouldn’t expect every patient of yours to come and see you every time they fall?”

“No.”

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In Session

Dr. Motiani is now asked about the possible side effects of some of the drugs Savio was taking.

“You know that almost every prescription drug may interact with another prescription drug?”

“That’s true.”

“And it can cause some problems?”

“That’s true.”

“Do you know that if someone were to take Lipitor with niacin…niacin is found in vitamins?”

“Yes.”

“One of the interactions between Lipitor and niacin is right upper muscle discomfort?”

“Right.”

“This was in March of 2003?”

“That’s right.”

“And nausea and vomiting?”
“Yes.”

“And she was taking Celebrex?”

“Is that something that I prescribed?”

“Well, you do know that Ms. Savio was taking Xanax?”

“Yes.”

“If someone was taking Xanax and stopped taking it, that could cause side effects?”

“Yes.”

“And Zoloft…people are sensitive to it?”

“They’re no more sensitive that with other medications…every side effect is listed for most medicines.”

“One of the side effects of Xanax is convulsions or seizures?”

“If it’s listed.”

“There’s increased side effects of those kind of drugs of increased bleeding?”

“Not that I’m aware of.”

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In Session

The witness is shown a document, which he reads from.

“It says that Zoloft can cause increased bruising and bleeding?”

“That’s right.”

“She told you she had night sweats?”

“That’s correct.”

“One of the side effects of Zoloft, of stopping it too quickly, is headaches, night sweats, sweating, irritability, changing sleep habits…and also dizziness?”

“That’s true.”

“Changes in appetite or weight is also a side effect?”
“That’s true.”

“That’s true.”

When she was found in March of 2004 at 154 pounds, that was obviously a gain in weight?”

“That’s correct.”

That concludes the cross-examination of Dr. Motiani.

August 22 at 4:44pm · Like · 2

08/22/2012: Prosecutor John Conner on redirect examination

In Session

“During the course of your treatment of Kathleen Savio, did you see any of these things that would have risen to a clinical level of significance?” Objection/Sustained.

“Did Kathleen Savio complain to you about falling down?”

“No.”

“Did she ever complain to you that she was falling down at the home, based on a clinical condition?”

“Based on the records, no.”

The witness says that he did not diagnose Savio with diabetes. Although it’s possible she had fibromyalgia, “it’s a diagnosis just thrown out many times by doctors.”

“Was she complaining of those same symptoms after 1992?”

“It’s an ongoing complaint.”

“Did Kathleen Savio ever indicate that she had ever had a seizure?”

“No.”

“Did she have any symptoms of epilepsy, or anything that would have caused a seizure?”

“She never gave any indication.”

August 22 at 4:48pm · Like · 4

In Session

“The last two times you saw Kathleen Savio, her main complaint was constipation?”
“It was a leading question that I asked her, and she replied in the affirmative of constipation.”

August 22 at 4:49pm · Like · 4

In Session
That concludes the redirect or this witness.
There is no recross, and so Dr. Motiani is excused.

August 22 at 4:50pm · Like · 4

In Session
The judge decides to take a recess at this time, to allow the jurors “to stretch their legs.”
He leaves the bench, and the trial is in a brief recess.

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