

Buy's not to testify

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at Timol

inquest

MAJOR GENERAL C. A. BUYS, head of the CID, was not well enough to give evidence at the inquest on Mr Ahmed Essop Timol, the dead detainee, a Johannesburg regional magistrate, Mr J. J. L. de Villiers, was told late yesterday by Mr S. A. Cilliers (for the South African Police).

At the end of proceedings yesterday the magistrate asked counsel how many more witnesses he expected to call and how long each of these would take.

The magistrate said that he was going on leave at the end of next week and expected to be away for four to five weeks.

Mr Cilliers said that the evidence of Dr J. Gluckman should be completed soon and he would be followed by three other witnesses.

The other witnesses still to be called were: Dr H. Koch, a Pretoria pathologist; Dr V. D. Kemp, a Johannesburg district surgeon, and a Rand Daily Mail reporter.

Mr Cilliers told the court that a specialist, Dr Marquard de Villiers, had told him that in his opinion it would be inadvisable for Major General Buys to give evidence.

The specialist would reconsider the position in two months. Mr I. A. Maiseis, QC, (for the Timol family), said he would like to have Major General Buys as a witness, but he

accepted the realities of the situation.

Mr Maiseis said he would not have counsel for the police making any submissions that Major General Buys had given evidence on anything to which the general had not testified.

Mr Cilliers said Mr Maiseis accepted that Major General Buys had stated that he was incorrectly reported by the newspaper Rapport.

Mr Maiseis replied that this was what he had been told by Mr Cilliers and he had accepted what counsel told him.

Mr Frederick Swart, a senior reporter on the Afrikaans Sunday newspaper Rapport said that he had a short interview with Major General Buys on October 29. He did not make notes of the conversation.

The words which appeared between quotes in the report were "not one hundred per cent exactly what the general said" but he was satisfied that the report gave the correct impression of what the general said.

Questioned by Mr Cilliers, Mr Swart said that he had not used the general's exact words and could have made a mis-

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were between nine to 12 days old, or more.

The professor said that one of the factors that assisted him in arriving at his conclusion was a certain skin feature — hyperplasia. This condition, the court heard, had not been detected in specimens taken from Mr Timol's body and examined by Dr Schepers and Dr Gluckman.

When the cross-examination of Professor Koch resumed today, Mr I. A. Maiseis, QC, (for the Timol family), said: "I think you will agree that the main difference in the periods given by you and the other two pathologists arise out of the question of hyperplasia."

Professor Koch: "This is not the only reason. There are other factors but hyperplasia is an important one."

He added that, if he was wrong on the question of hyperplasia, this would still not affect his conclusion.

Mr Maiseis then referred Professor Koch to the medical references he used to reach his conclusion. Mr Maiseis later submitted that none of these

passages lent support to what the professor had told the court regarding hyperplasia.

Mr Maiseis said that he, Dr Gluckman, and another pathologist, Dr H. Shapiro, who is also assisting counsel for the Timol family, had last night closely examined all Professor Koch's references about hyperplasia.

At one point Professor Koch, after being referred to a certain passage in one of the references, told the court that he wished to stress part of the passage already read out by Mr Maiseis.

Mr Maiseis: "Let us get your role straight. Are you here to justify a thesis or to give evidence as regards the facts in this case?"

Professor Koch said that he was there to give evidence.

At this point Professor I. W. Simson, professor of pathology at the University of Pretoria, who is assisting Mr J. J. L. de Villiers, took over further questioning of Professor Koch regarding hyperplasia.

Professor Simson said certain interpretations put by Professor Koch on a particular medical reference did not

square with the way in which he (Professor Simson) had read that paper.

Professor Koch — "I think that the learned assessor and I do not see with the same eyes."

Questioned further by Mr Maiseis, Professor Koch said it was difficult to give an opinion on the severity of bruises on Mr Timol's body without having seen the bruises.

Professor Koch was asked how, in his opinion, an abrasion on the left forearm was caused. The abrasion measured 2.5cm by 4.0mm, and was covered by a scab.

The professor replied that this was a linear abrasion caused by any type of blunt force. He could not say how the wound could have been caused.

PHOTOGRAPH

Professor Koch was then shown a photograph which showed multiple bruising on Mr Timol's left side. He said he could see discoloration spread over a wide area, and a number of small bruises.

Asked how he thought the bruises were caused, he said blunt force was used. "I would not like to hazard on the type of instrument used." He added that it was difficult to determine how the bruises were caused.

Mr Maiseis put it to him that 10 or 11 bruises could be seen on the left side of the chest. Professor Koch agreed.

Mr Maiseis submitted that this would indicate that several blows had been applied, or that a blunt instrument was used.

In reply to a question he said the wound could not have been caused by a flat wall surface, and it was unlikely that the injury was caused by the corner of a wall.

He said the wound could have been consistent with Mr Timol falling on rocky ground, or if he had sustained several blows with a small instrument. Questioned further, he said clothing would protect an abrasion to some extent in these circumstances.

Mr Maiseis put to Professor Koch the proposition that the injuries could be consistent with a man lying on the ground and being kicked. He also submitted that the injuries were likely to occur if the man had his left shirt sleeve rolled up. Professor Koch replied that one could visualise a possible connection between the injuries on the left arm and the left side of the chest.

(Proceedings)