**Decision in the case of G.B. and R.B. v. the Republic of Moldova**

On 4 May 2000 the first applicant was giving birth to a child. The head of the obstetrics and gynaecology department of the Ştefan-Vodă regional hospital, Mr B., performed a Caesarean section on her. During the procedure he removed her ovaries and Fallopian tubes, without obtaining her permission. As a result of the operation, the first applicant, who was thirty-two at the time, suffered an early menopause.

Since 2001 the first applicant has been having medical treatment designed to counteract the effects of the early menopause, including hormone replacement therapy. According to her doctors, she has to continue such treatment until she is between fifty-two and fifty-five years old, after which further treatment will be required.

According to a neurology report dated 5 November 2001, the first applicant was suffering from astheno-depressive syndrome and osteoporosis. On 18 February 2002 the doctors found that the first applicant experienced hot flushes, neurosis and frequent heart palpitations. On 8 May 2002 she was diagnosed with asthenic neurosis.

According to the results of an examination carried out by a medical panel on 18 March 2003, the removal of the first applicant’s ovaries and Fallopian tubes had been unnecessary and the surgery had resulted in her being sterilised.

On 26 July 2006 a psychiatrist and a psychologist established that the first applicant was suffering from long-term psychological problems and that she continued to show signs of post-traumatic stress disorder.

 On 15 March 2005 the Căuşeni District Court convicted B. of medical negligence which had caused severe damage to the health and bodily integrity of the victim. He was sentenced to six months’ imprisonment, suspended for one year. The court referred to medical reports and found, *inter alia*, thatB. had failed to inform the applicants of the sterilisation until ten days after the event. The first applicant’s ovaries could have been preserved, but B. had failed to do so.

**The Court’s assessment**

Moreover, while citing the general criteria listed in the relevant legal provisions, the domestic courts did not specify how these criteria applied to the first applicant’s case or give any particular reason for making the award in the amount of EUR 607. The only exception was the first-instance court’s judgment, according to which a higher award would have undermined the hospital’s ability to continue to operate as a public health institution. **In the Court’s view, the latter argument is unacceptable, given that the State owned that hospital and was liable to cover whatever expenses it generated.**

It should be noted that the last decision is of great importance. Usually when we sue in the court any health care facility either of state or communal property, national courts take the side of the respondent and substantially decrease the amount of moral and material damages on the reasons that the health care facility is owned by the state or belongs to the communal property and if to adjudicate that such facility is to pay a big sum of money for damages such hospital can even stop working, because as a rule the budgets are rather poor and they have money only to pay out salaries to their employee, that’s why the amount of compensation is rather low. But on the other we have a person (human being), whose life and health is declared to be the highest social value in the society and each person has the right to have his rights respected and observed. Hence the above mentioned ECtHR decision will be a great argument in our future cases against the health care facilities, which are not private. In the light of the foregoing, the Court considers that the first applicant has not lost her victim status and that there has been a violation of Article 8 of the Convention.