



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

FIRST SECTION

CASE OF FEDERICO AND RADDI v. ITALY

(Application no. 5053/24)

JUDGMENT

STRASBOURG

9 July 2026

This judgment is final but it may be subject to editorial revision.

In the case of Federico and Raddi v. Italy,

The European Court of Human Rights (First Section), sitting as a Committee composed of:

Frédéric Krenc, *President*,

Raffaele Sabato,

Alain Chablais, *judges*,

and Liv Tigerstedt, *Deputy Section Registrar*,

Having regard to:

the application (no. 5053/24) against the Italian Republic lodged with the Court under Article 34 of the Convention for the Protection of Human Rights and Fundamental Freedoms (“the Convention”) on 6 February 2024 by two Italian nationals, Ms Rosalia Federico and Mr Mario Raddi (“the applicants”), who were born in 1968 and 1967 respectively, live in Turin and were represented by Mr G. Vitale and Mr F. Milano, lawyers practising in Turin;

the decision to give notice of the complaints under Articles 2 and 3 of the Convention concerning lack of adequate medical treatment in prison to the Italian Government (“the Government”), represented by their Agent, Mr L. D’Ascia, *Avvocato dello Stato*, and to declare the remainder of the application inadmissible;

the parties’ observations;

Having deliberated in private on 18 June 2026,

Delivers the following judgment, which was adopted on that date:

SUBJECT MATTER OF THE CASE

1. The application concerns the alleged failure of prison authorities to provide the applicants’ son, A.R., with adequate medical care in response to significant and progressive weight loss that he experienced during his detention.

2. On 28 April 2019 A.R. entered Turin Prison. At the time, he was aged 28 and weighed 76 kg. He suffered from drug addiction, anxiety and depression. Following an initial psychiatric assessment carried out the day after his arrest, he was prescribed a treatment to address drug-withdrawal symptoms. Weekly psychological sessions began from 28 May 2019, although they took place with less frequency during the summer.

3. According to A.R.’s prison medical record, on 1 July 2019, during a psychiatric consultation, he first reported having a reduced appetite. Shortly thereafter, on 8 July 2019, during a neurological assessment, he reported having lost approximately 4 kg since his arrest. He also reported similar concerns to the psychologist.

4. On 6 August 2019 it was noted in A.R.’s prison medical record that his weight had fallen to 68.5 kg. On 7 August 2019, following a consultation with a physiatrist (specialist in physical medicine and rehabilitation), it was

recorded that A.R. was suffering from a general state of fatigue, which was described as a consequence of his “condition of anorexia”. The same day, the National Guarantor of the Rights of People Detained or Deprived of their Liberty (*Garante nazionale dei detenuti e delle persone private della libertà personale* – “the National Guarantor”) alerted the prison administration about A.R.’s weight loss. The authorities replied on 20 August 2019, excluding the possibility that the weight loss was due to any serious health concerns and declining the National Guarantor’s request for additional external psychological support, citing the risk of such support overlapping with the existing services.

5. On 6 September 2019 it was recorded following a further psychiatric evaluation that A.R. weighed 60 kg, reflecting an overall weight loss of 15 kg since his arrest and of roughly 50 kg since 2017 (when he had been overweight). The specialist ruled out anorexia nervosa but ordered weekly weight monitoring.

6. On 5 October 2019 it was noted that medication should be administered under supervision because of the prisoner’s limited compliance. During a period of disciplinary isolation between 18 and 23 October 2019, A.R. expressed further concerns about his increasing weight loss and difficulties in feeding himself. On 21 October he refused an antidepressant medication and on 24 October a psychiatric consultation.

7. On 16 November 2019 A.R. experienced a fainting episode. He refused antiemetic medication immediately afterwards. He fainted again the day after, and on that occasion accepted rehydration therapy.

8. On 19 November 2019, in response to a new request from the National Guarantor, the prison authorities stated that A.R.’s weight loss was to be viewed as “a manipulative strategy aimed at obtaining secondary benefits”.

9. On 20 November 2019 the prison’s medical administration requested that the applicant be admitted to Turin Hospital’s prison ward. However, hospitalisation was scheduled for 10 December 2019, on account of the need to wait for an available bed.

10. In the meantime, from 30 November 2019 the applicant had been authorised to use a wheelchair owing to the deterioration of his physical condition.

11. By 4 December 2019 A.R.’s weight had fallen to 51.55 kg. From that moment, daily monitoring was carried out.

12. On 5 December 2019 A.R. was taken to the prison infirmary owing to asthenia and began hydration therapy. However, after about one hour A.R. requested to use the toilet but refused to use the infirmary toilet under escort by prison officers, and then also refused to continue the infusion and returned to his cell. The following day, after losing consciousness once again, he was taken to the emergency room of Turin Hospital. After a general medical assessment, he was discharged and returned to the prison.

13. On 10 December 2019 A.R. was taken to the hospital as planned but refused to be hospitalised, against the medical advice.

14. On 13 December 2019 he was urgently hospitalised and diagnosed with a pulmonary infection. The following day he went into a coma. On 30 December 2019 he died in hospital from septic shock.

15. On 7 January 2020 the National Guarantor lodged a criminal complaint, asking for an investigation into the circumstances of A.R.'s death.

16. During the ensuing investigations, the public prosecutor appointed three different medical experts in order to clarify both the cause of death and the appropriateness of the medical care received in prison.

17. While the first expert's report excluded the possibility that the prison authorities and health professionals bore any responsibility, both the second and third reports concluded that A.R.'s weight loss had played a causal role in his death and that there had been undue delays in the acknowledgement of the seriousness of his situation, the establishment of a diagnosis and the provision of medical treatment regarding his weight loss. The third expert opinion further highlighted the lack of coordination among the healthcare professionals involved. However, both reports considered it relevant that A.R. had refused to be hospitalised on 10 December 2019 (see paragraph 13 above) as, in their opinion, hospitalisation at that point could probably have prevented his death.

18. On the basis of the considerations regarding A.R.'s refusal to be hospitalised, the public prosecutor asked that the proceedings be discontinued, which the applicants objected to. On 9 October 2023 the Turin preliminary investigation judge ordered the discontinuation of the proceedings.

19. Before the Court, the applicants complained, under Articles 2 and 3 of the Convention, that their son had not received adequate medical care while in prison and that this had contributed to his death.

THE COURT'S ASSESSMENT

ALLEGED VIOLATION OF ARTICLES 2 AND 3 OF THE CONVENTION

A. Admissibility

20. The Government submitted that the applicants had failed to exhaust domestic remedies, noting that they could have had recourse to a compensatory remedy before the civil courts after the criminal proceedings had been discontinued. The Court has clarified in *Nicolae Virgiliu Tănase v. Romania* ([GC], no. 41720/13, §§ 176-77, 25 June 2019) that where one of the available remedies has been pursued, the use of another remedy which has essentially the same objective is not required. In the present case, the

Court notes that criminal investigations were opened at the request of an independent public authority, the National Guarantor, in line with the State's positive obligations under Articles 2 and 3 of the Convention (see *Fabbri and Others v. San Marino* [GC], nos. 6319/21 and 2 others, § 151, 24 September 2024), and that the applicants pursued the avenues which were open to them at the investigation stage (see paragraph 18 above). By contrast, the Government neither challenged the adequacy of the remedy, nor provided any reasons why the civil proceedings could have been more effective (see *Volintiru v. Italy* (dec.), no. 8530/08, § 21, 12 December 2023). In the light of the above, the Government's preliminary objection must be dismissed.

21. The Court further notes that the complaints are not manifestly ill-founded within the meaning of Article 35 § 3 (a) of the Convention or inadmissible on any other grounds. They must therefore be declared admissible.

B. Merits

22. The general principles concerning the State's obligation under Article 3 of the Convention to preserve the health and well-being of prisoners, in particular by providing the required medical care, have been summarised in *Roman v. Belgium* ([GC], no. 18052/11, §§ 144-48, 31 January 2019) and *Blokhin v. Russia* ([GC], no. 47152/06, §§ 135-40, 23 March 2016). With regard to the positive obligations under Article 2 of the Convention in respect of persons deprived of their liberty, the relevant principles were set out in *Centre for Legal Resources on behalf of Valentin Câmpeanu v. Romania* ([GC], no. 47848/08, §§ 130-31, ECHR 2014), *Karpylenko v. Ukraine* (no. 15509/12, §§ 79-81, 11 February 2016) and *Karsakova v. Russia* (no. 1157/10, §§ 46-49, 27 November 2014).

23. The Court notes that in the present case it is undisputed that the applicants' son suffered from several medical conditions – including drug addiction, anxiety, and depression – for which he received medical assistance while in detention (see paragraph 2 above).

24. It is also undisputed that he experienced a significant and progressive weight loss during his imprisonment (see paragraphs 3-11 above) and that two of the experts found that this deterioration ultimately had a causal role in the fatal outcome (see paragraph 17 above).

25. In respect of the quality of the medical care provided, the Court notes that two of the experts appointed by the public prosecutor (see paragraph 17 above) identified several delays and shortcomings in the applicant's treatment while in prison, concluding that the medical response to the rapid, progressive weight loss was neither adequate nor timely. One of these two experts also observed that the weight loss had already been alarming at the time of the applicant's incarceration owing to the fact that he had previously been overweight. In this regard, the expert clarified that good clinical practice

would have required specialist consultations and laboratory investigations to identify possible organic causes. By contrast, the material in the Court's possession indicates that despite several requests – from both A.R. (see paragraphs 3 and 6 above) and the National Guarantor (see paragraphs 4 and 8 above) – the weight loss did not prompt any specific diagnosis or targeted therapeutic intervention. No effective action was taken until A.R.'s condition had already become serious. Weekly weight checks began only in September (see paragraph 5 above), and daily monitoring only in December (see paragraph 11 above), when his condition had already severely deteriorated and become critical. Moreover, no comprehensive assessment was carried out to investigate the underlying causes of the weight loss.

26. As to the Government's argument that the weight loss had initially appeared voluntary, the Court notes that – even assuming this to be the case – the authorities failed to ascertain the true intention of, and real reasons for, the detainee's alleged refusal to eat, as well as to ensure proper monitoring of his condition (see *Yakovlyev v. Ukraine*, no. 42010/18, § 43, 8 December 2022).

27. As to the relevance of the lack of cooperation by A.R., the Court has already clarified that cooperation is only one factor in assessing the effectiveness of medical care (see, under Article 3, *Rooman*, cited above, §§ 164-66; *Epure v. Romania*, no. 73731/17, § 85, 11 May 2021; and *Yizhachenko v. Ukraine* (dec.), no. 65567, §§ 37-38, 18 October 2016; and, under Article 2, *Makharadze and Sikharulidze v. Georgia*, no. 35254/07, §§ 82-84, 22 November 2011, and *Karakhanyan v. Russia*, no. 24421/11, §§ 46-48, 14 February 2017). In this regard, the Court observes that – notwithstanding the note regarding the need to administer medication under supervision owing to A.R.'s limited compliance (see paragraph 6 above) – A.R.'s refusals to accept treatment were occasional and occurred while he was in isolation (see paragraph 6 above) or during the final stage of detention (see paragraphs 7 and 12 above). It further observes that there is no evidence in the prison records that the applicant refused to take nutritional supplements, as alleged by the Government.

28. The Court also takes into account the applicant's refusal to be hospitalised as scheduled on 10 December. This hospitalisation was specifically intended to assess the causes of the weight loss and potentially prevent further deterioration. However, the Court notes that the need for hospitalisation had been acknowledged on 20 November, at a point when the applicants' condition – described by one of the experts as already alarming at the time of his incarceration and serious from September onwards (see paragraph 25 above) – had further deteriorated and reached a critical stage. Notwithstanding the above, the domestic authorities did not insist on the immediate hospitalisation of A.R. but accepted to schedule it for three weeks later due to a lack of capacity within the hospital.

29. In the light of the above and given the protracted delays in addressing A.R.'s condition and the lack of earlier efforts to secure appropriate treatment, it cannot be said that the medical care available to the applicant while he was in custody was adequate and sufficient and that the relevant domestic authorities did everything reasonably possible, in good faith and in a timely manner, to try to avert the fatal outcome. Whether or not their efforts could in principle have prevented it is not decisive for assessing their compliance with their positive obligations under Article 2 of the Convention (see *Karpynenko*, cited above, § 81, and *Salakhov and Islyamova v. Ukraine*, no. 28005/08, § 181, 14 March 2013).

30. There has accordingly been a violation of Articles 2 and 3 of the Convention.

APPLICATION OF ARTICLE 41 OF THE CONVENTION

31. The applicants claimed 6,790 euros (EUR) in respect of pecuniary damage (funeral costs) and approximately EUR 475,000 in respect of non-pecuniary damage. They further claimed EUR 3,000 in respect of the costs and expenses incurred before the domestic courts and requested the Court to order the payment of those incurred before it without specifying the amount.

32. The Government contested the claim as excessive.

33. The Court awards the applicants jointly EUR 6,790 in respect of pecuniary damage and EUR 20,000 in respect of non-pecuniary damage, plus any tax that may be chargeable.

34. Having regard to the documents in its possession, the Court considers it reasonable to award EUR 1,000 for costs and expenses in the domestic proceedings, plus any tax that may be chargeable to the applicants. As the remainder of the claim is not supported by evidence, it cannot be granted.

FOR THESE REASONS, THE COURT, UNANIMOUSLY,

1. *Declares* the application admissible;
2. *Holds* that there has been a violation of Article 2 of the Convention;
3. *Holds* that there has been a violation of Article 3 of the Convention;
4. *Holds*
 - (a) that the respondent State is to pay the applicants jointly, within three months, the following amounts:
 - (i) EUR 6,790 (six thousand seven hundred and ninety euros), plus any tax that may be chargeable, in respect of pecuniary damage;

- (ii) EUR 20,000 (twenty thousand euros), plus any tax that may be chargeable, in respect of non-pecuniary damage;
- (iii) EUR 1,000 (one thousand euros), plus any tax that may be chargeable to the applicants, in respect of costs and expenses;
- (b) that from the expiry of the above-mentioned three months until settlement simple interest shall be payable on the above amounts at a rate equal to the marginal lending rate of the European Central Bank during the default period plus three percentage points;

5. *Dismisses* the remainder of the applicants' claim for just satisfaction.

Done in English, and notified in writing on 9 July 2026, pursuant to Rule 77 §§ 2 and 3 of the Rules of Court.

Liv Tigerstedt
Deputy Registrar

Frédéric Krenc
President