

TEXT A <https://www.theguardian.com/us-news/2024/sep/26/alabama-nitrogen-gas-execution-alan-miller>

Alan Miller, 59, second person in US to be executed via controversial technique, shook and trembled on gurney.

Alabama has carried out the second execution in the US using the controversial method of nitrogen gas, an experimental technique for humans that veterinarians have deemed unacceptable in the US and Europe for the euthanasia of most animals. Alan Eugene Miller, 59, was pronounced dead at 6.38pm local time at a south Alabama prison.

Miller shook and trembled on the gurney for about two minutes with his body at times pulling against the restraints, followed by about six minutes of gasping breathing, according to the Associated Press. The lethal method involves being strapped down with a respirator mask applied to the face and pure nitrogen piped in. The resulting oxygen deprivation will cause death by asphyxia.

Miller's final words were "I didn't do anything to be in here" and "I didn't do anything to be on death row", according to reporters who witnessed his death. His voice was at times muffled by the mask that covered his face from forehead to chin. Miller's death is the latest in an extraordinary week in the US in which five condemned men in five states have been executed over six days. On Friday, South Carolina killed Khalil Divine Black Sun Allah, in its first execution in 13 years, and on Tuesday, Texas killed Travis Mullis and Missouri put to death Marcellus Williams. Also on Thursday, Oklahoma executed Emmanuel Littlejohn.

The execution of Williams in Missouri prompted widespread outrage across the US and beyond after local prosecutors, the victim's family and several trial jurors tried unsuccessfully to stop it going ahead. There was no forensic evidence to tie Williams to the crime, and the current prosecuting attorney for St Louis county concluded that the prisoner was actually innocent.

Alabama pressed ahead with Miller's execution on Thursday over the 1999 shootings that killed three of his co-workers – Lee Holdbrooks, Christopher Scott Yancy and Terry Jarvis – despite deep misgivings about the new nitrogen method.

"Tonight, justice was finally served for these three victims," said Alabama's governor, Kay Ivey, said in a statement. "His acts were not that of insanity, but pure evil. Three families were forever changed by his heinous crimes, and I pray that they can find comfort all these years later."

The first nitrogen execution was carried out, also by Alabama, in January. An eyewitness for Associated Press described the death then of Kenneth Smith, 58. "Smith began to shake and writhe violently, in thrashing spasms and seizure-like movements ... The force of his movements caused the gurney to visibly move at least once. Smith's arms pulled against the straps holding him to the gurney. He lifted his head off the gurney and then fell back."

Alabama described Smith's death as a "textbook" execution.

Smith and Miller share a distinction in addition to the experimental killing method applied to them. Both men had the exceptionally unusual experience of surviving an execution attempt by lethal injection.

In Smith's case, in November 2022 he was strapped to the gurney for four hours, suspended for some of that time upside down, and his body riddled with needle holes in a vain attempt to place an IV line through which the lethal drugs could be injected.

Miller went through a similarly traumatic failed execution two months before Smith. Like Smith, he was strapped to the gurney in Alabama's death chamber at Holman prison and put through a process his lawyers claimed was physical and mental torture.

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Future pandemic as big as Covid is inevitable, says Whitty

England's chief medical officer also tells inquiry that UK's low level of intensive care provision is a political decision.

Another pandemic as big as the Covid crisis that killed 7 million people worldwide is "a certainty", Prof Sir Chris Whitty has warned, as he said that the UK's lack of intensive care capacity for the sickest patients was a "political choice".

The NHS faced an "absolutely catastrophic situation" when the virus first hit in 2020 but it could have been "substantially worse" if the UK had not gone into lockdown, England's chief medical officer said.

"We have to assume a future pandemic on this scale will occur," he told the public inquiry into Covid-19 on Thursday. "That's a certainty."

It would also be "foolish" not to assume that asymptomatic transmission of a deadly virus would happen again, he added.

The warning from Whitty came after a doctor repeatedly broke down in tears at the inquiry while describing how the Covid crisis for NHS staff had been like having to respond to a "terrorist attack every day", with infected patients "raining from the sky".

Prof Kevin Fong – a former clinical adviser in emergency preparedness, resilience and response at NHS England who was on shift during the 7/7 London bombings – said the scale of deaths in hospitals at the height of the pandemic had been "truly astounding".

Some intensive care units in England had been so overwhelmed that staff had had to put dead bodies in clear plastic refuse sacks after running out of body bags, and then immediately put another Covid patient in that person's bed, Fong said.

Giving evidence after Fong, Whitty said expanding the capacity of the NHS could help it cope better with a surge in sick patients in future. "Taking ICU [intensive care units] in particular, the UK has a very low ICU capacity compared to most of our peer nations in high-income countries," he said. "Now, that's a choice, that's a political choice."

"It's a system configuration choice, but it is a choice. Therefore you have less reserve when a major emergency happens, even if it's short of something of the scale of Covid."

Whitty said resolving the NHS workforce crisis was also crucial. Healthcare systems could not be "scaled up" in a future pandemic without "trained people", he added.

"You can buy beds, you can buy space, you can even put in oxygen and things ... But fundamentally, the limit to that system, as to any system, is trained people, and there is no way you can train someone in six weeks to have the experience of an experienced ICU nurse or an experienced ICU doctor. It is simply not possible."

"So if you don't have it going into the emergency – if it's an emergency of this speed of onset – you should not have any illusions you're going to have it as you hit the peak."

Among his other recommendations, Whitty said being able to conduct lightning-fast scientific research and reducing health inequalities deserved the most focus. "If we're not serious about trying to tackle health inequalities between pandemics, there is no way you're going to be able to do it when the pandemics occur," he said.

"The biggest one that I think deserves slightly more emphasis is having the mechanism to be able to do research very, very fast."