

B. State(s) against which the application is directed

17. Tick the name(s) of the State(s) against which the application is directed.

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|---|--|
| <input type="checkbox"/> ALB - Albania | <input type="checkbox"/> ITA - Italy |
| <input type="checkbox"/> AND - Andorra | <input type="checkbox"/> LIE - Liechtenstein |
| <input type="checkbox"/> ARM - Armenia | <input type="checkbox"/> LTU - Lithuania |
| <input type="checkbox"/> AUT - Austria | <input type="checkbox"/> LUX - Luxembourg |
| <input type="checkbox"/> AZE - Azerbaijan | <input type="checkbox"/> LVA - Latvia |
| <input type="checkbox"/> BEL - Belgium | <input type="checkbox"/> MCO - Monaco |
| <input type="checkbox"/> BGR - Bulgaria | <input type="checkbox"/> MDA - Republic of Moldova |
| <input type="checkbox"/> BIH - Bosnia and Herzegovina | <input type="checkbox"/> MKD - North Macedonia |
| <input type="checkbox"/> CHE - Switzerland | <input type="checkbox"/> MLT - Malta |
| <input type="checkbox"/> CYP - Cyprus | <input type="checkbox"/> MNE - Montenegro |
| <input type="checkbox"/> CZE - Czech Republic | <input type="checkbox"/> NLD - Netherlands |
| <input type="checkbox"/> DEU - Germany | <input type="checkbox"/> NOR - Norway |
| <input type="checkbox"/> DNK - Denmark | <input type="checkbox"/> POL - Poland |
| <input type="checkbox"/> ESP - Spain | <input type="checkbox"/> PRT - Portugal |
| <input type="checkbox"/> EST - Estonia | <input type="checkbox"/> ROU - Romania |
| <input type="checkbox"/> FIN - Finland | <input type="checkbox"/> RUS - Russian Federation |
| <input type="checkbox"/> FRA - France | <input type="checkbox"/> SMR - San Marino |
| <input type="checkbox"/> GBR - United Kingdom | <input type="checkbox"/> SRB - Serbia |
| <input type="checkbox"/> GEO - Georgia | <input type="checkbox"/> SVK - Slovak Republic |
| <input type="checkbox"/> GRC - Greece | <input type="checkbox"/> SVN - Slovenia |
| <input type="checkbox"/> HRV - Croatia | <input checked="" type="checkbox"/> SWE - Sweden |
| <input type="checkbox"/> HUN - Hungary | <input type="checkbox"/> TUR - Turkey |
| <input type="checkbox"/> IRL - Ireland | <input type="checkbox"/> UKR - Ukraine |
| <input type="checkbox"/> ISL - Iceland | |

Subject matter of the application

All the information concerning the facts, complaints and compliance with the requirements of exhaustion of domestic remedies and the six-month time-limit laid down in Article 35 § 1 of the Convention must be set out in this part of the application form (sections E, F and G). It is not acceptable to leave these sections blank or simply to refer to attached sheets. See Rule 47 § 2 and the Practice Direction on the Institution of proceedings as well as the "Notes for filling in the application form".

E. Statement of the facts

58.

I. THE APPLICANTS

1. The first applicant, Mr Karl-Henrik Grinnemo, is a professor and consultant in cardiothoracic surgery. The second applicant, Mr Oscar Simonson, is a researcher and cardiothoracic surgeon. They both work at Uppsala University and Uppsala University Hospital. The third applicant, Mr Matthias Corbascio, is a consultant in cardiothoracic surgery at Rigshospitalet in Copenhagen. The first three applicants are whistle-blowers who exposed the biggest medical scandal in Swedish history: the Macchiarini affair at the Karolinska Institute ("KI") in Stockholm, Sweden. The fourth applicant, Ms Katarina Le Blanc, is a professor in clinical stem cell research at KI who exposed another medical scandal at KI. For more details on the applicants' professional backgrounds, see their respective CV, bundle pp. 417–455).

II. THE MACCHIARINI AFFAIR

2. The Macchiarini affair has tarnished the reputation of Sweden's most prestigious medical research institute, KI – a public institution, governed by public law, which also grants the Nobel Prize in Physiology or Medicine. In an article in the Washington Post, it has been called the biggest medical scandal in Swedish history (see bundle p. 120).

3. Paolo Macchiarini had become world-renowned in 2008 when he performed the first ever transplant of a trachea from a deceased donor. In autumn 2010, Macchiarini was recruited to KI as guest professor and to Karolinska University Hospital as consultant. 2011–2013, Macchiarini performed trachea transplants on three patients in Sweden, using an experimental method: a damaged part of the trachea was replaced with a synthetic trachea that had been seeded with stem cells from the patient. Macchiarini's theory was that the stem cells would enable the patient's body to incorporate the synthetic trachea as a natural organ. But in reality, the synthetic material caused substantial infections and tissue death, eventually resulting in suffocation. All three patients who received a synthetic trachea in Sweden died. 17 of Macchiarini's patients in other countries met a similar fate. In 2020, Macchiarini was indicted for aggravated assault by the Swedish Prosecution Authority relating to the three failed trachea transplants. The criminal proceedings are still pending.

4. Pivotal to the present case are six articles that were published in prominent scientific journals between 2011 and 2014, in which Macchiarini described the transplants as successful, using fabricated and misleading data. These articles had dozens of co-authors, including the applicants. The first and fourth applicant had minor roles in the first article and the first three applicants had minor roles in the second. The articles have now been retracted (see bundle pp. 1–70).

III. THE FIRST THREE APPLICANTS BLEW THE WHISTLE AND UNCOVERED MACCHIARINI'S MISCONDUCT

5. The third and final trachea transplant performed by Macchiarini at Karolinska University Hospital in August 2012 caused particularly severe complications for the patient. After the operation, the patient was cared for at an intensive care unit for more than three years before being transferred to an American hospital, where she eventually passed. In 2013, the attending physician, ██████████ sought out the first three applicants' expertise in an effort to save the patient's life. During their investigations into the cause of the patient's complications, they uncovered that Macchiarini had misled colleagues and co-authors, and manipulated the results of his procedures. Macchiarini's research articles on the synthetic trachea transplants had falsely described the procedures as successful, and had lacked necessary ethical approvals.

6. On 21 February 2014, the applicants alerted management at KI and Karolinska University Hospital in order to get the impugned articles retracted and further operations stopped; but no action was taken. The applicants continued gathering evidence and on 18 August and 24 September 2014 respectively, they submitted two reports to the Vice-Chancellor of KI, amounting to about 500 pages each, where they exposed and proved Macchiarini's research misconduct in detail.

7. Throughout their investigations, the applicants experienced significant pressure from the management of KI. They were repeatedly called into meetings, admonished that they risked harming KI's reputation, and cautioned that they could "get in trouble". They were threatened with dismissal and several measures were taken to undermine their credibility. They were berated by high ranking figures at KI, accused of stealing data and reported to the police for breach of patient confidentiality. (See bundle pp. 74, 98–99 and 128. For an extensive account of KI's attempts to silence the applicants, see in particular attached LeapsMag article from 8 October 2018, p. 253)

Statement of the facts (continued)

59.
8. It was not until the New York Times published an article on 24 November 2014 featuring the first three applicants' revelations regarding Macchiarini's misconduct, that KI eventually appointed an independent expert to investigate the alleged misconduct (see bundle p. 71). After six months, the expert confirmed that Macchiarini by omitting and fabricating information about his patients' postoperative conditions, had made the procedures seem successful while, in reality, the patients were dying. But in a decision delivered on 28 August 2015, the Vice-Chancellor of KI disagreed with the independent expert and held that Macchiarini was not guilty of research misconduct. (See bundle pp. 75–97.)

9. On 7 January 2016, a documentary about Macchiarini's transplants titled "Experimenten" (the Experiments) aired on Swedish public service television channel SVT. The documentary propelled the whistle-blowers muzzled misconduct allegations into a head-line scandal, both in Sweden and abroad. Shortly after, the Vice-Chancellor and other high-ranking members of KI's management were forced to resign, and Macchiarini was fired. (See bundle pp. 107–127 and 174–181). The applicants then urged the new leadership to re-open the investigations into Macchiarini's misconduct. In February 2016 the case of research misconduct brought by the first three applicants against Macchiarini was re-opened.

IV. THE MISCONDUCT DECISION

10. On 25 June 2018, the new Vice-Chancellor of KI delivered a decision in the re-opened case, in which Macchiarini was found guilty of "research misconduct" (oredlighet i forskning) in respect of all six of the reported articles. In addition to Macchiarini, six co-authors were also found guilty of research misconduct. Another 31 co-authors were found "blameworthy" (klandervärda), but not guilty of research misconduct – an indictment that had not previously been used in misconduct decisions by KI or any other university. (See KI's misconduct decision, bundle pp. 191–228.) Subsequent to the decision, the impugned articles were retracted, and the authors, including the applicants, were pilloried internationally in retraction notices posted by the prestigious and widely read medical journals where the articles were published (see bundle pp. 232 and 335).

11. The first and fourth applicant were found guilty of research misconduct for their limited involvement in the first of the six articles. The first three applicants were found blameworthy for their limited involvement in the third article. Primarily, KI accused the applicants of being complicit in Macchiarini's misconduct by failing to blow the whistle earlier. But at the time the articles were published, none of the applicants had the right to access the patients' medical journals or be privy to changes in the patients' medical conditions. The applicants submit that the allegations leveled against them are false and merely a pretext for chastising them for blowing the whistle on malpractices and abuse taking place at KI – the first three applicants for exposing the Macchiarini affair and the fourth applicant for exposing the so-called placenta scandal.

V. THE PLACENTA SCANDAL UNCOVERED BY THE FOURTH APPLICANT

12. In 2011, the fourth applicant discovered that a research group at KI was experimenting with injections of placenta cells to suppress immune response in patients that had received bone marrow transplants. The clinical treatments were carried out without prior in vivo testing on animals, without complying with the conditions of their ethical approval and without the necessary authorisation from the Health and Social Care Inspectorate and the Swedish Medical Products Agency. The fourth applicant further found that the researchers had failed to take into consideration that placenta cells have a significantly stronger coagulating effect than the cell types that had previously been used in similar treatments. Consequently, the patients risked blood clots, which in severe cases could lead to heart attacks or stroke. In total, the injections were given to around 70 seriously ill patients, several of whom were children.

13. The fourth applicant alerted her head of department and repeatedly insisted that the placenta study be halted and that there be a misconduct inquiry. But her allegations elicited little response from the management of Karolinska University Hospital and KI. Only after she submitted a formal report on the placenta study to the management of KI on 28 December 2016 – demonstrating serious risks for research participants' safety – and participated in a news article about her findings in one of Sweden's largest newspapers (see bundle pp. 131–153), did KI initiate an inquiry. In its misconduct decision of 6 February 2017, KI subsequently affirmed the fourth applicant's allegations. Although KI found substantial shortcomings in the research, it did not find that those rose to the level of seriousness required for a finding of research misconduct (see bundle pp. 154–168). The findings did, however, lead to the study being discontinued.

VI. THE CONSEQUENCES OF THE MISCONDUCT DECISION FOR THE APPLICANTS

14. KI's misconduct decision has adversely affected the applicants' professional reputation and constitutes an interference with their right to practice their profession and their freedom of expression. Most notably, their prospects of obtaining grants and being published in reputable medical journals have greatly diminished.

Statement of the facts (continued)

- 60.
15. Since the misconduct decision was delivered none of the applicants have been able to obtain sufficient grants to finance the advanced level of research they were previously engaged in. The policy of most funding bodies is to cut off appropriations to researchers who have been found guilty of research misconduct (see inter alia the policies of the Swedish Cancer Fund, the Swedish Childhood Cancer Fund and the Swedish Research Council, bundle pp. 169–173 and 182–190). As funding is a prerequisite for advanced medical research, the misconduct decision has permanently curtailed the applicants' possibilities of continuing their research careers.
16. As a direct consequence of the misconduct decision the fourth applicant's pending grant application to the Swedish Cancer Fund for 2018 was rejected. It was also decided that she would not be able to obtain any new grants for a period of three years (see bundle p. 302). A similar decision was later adopted by the Swedish Childhood Cancer Fund (see bundle p. 303). Even though the three year ban has now been lifted and she is currently able to apply for grants again, she finds that her reputation and credibility have been damaged by the misconduct decision to such an extent that her possibilities of obtaining grants have been impeded permanently. The same is true for the other applicants.
17. Even if the applicants were to accrue sufficient funding to carry out publishable research, the misconduct decision has impaired their professional reputation to such a degree that they have difficulties being published (see statement of [REDACTED] who is an editor of several medical journals, to the effect that authors deemed responsible for research misconduct will find it harder to publish future papers, bundle p. 301). The misconduct decision has, in other words, lead to the applicants being ostracised by large parts of the research community.
18. Prior to the misconduct decision, the first applicant headed a research team at KI that he has since been forced to dissolve due to a lack of funding. At the time of the decision, the second applicant was a junior researcher on his way to qualifying as a senior researcher – an effort that has now been thwarted. He has further been prevented from supervising PhD students and has been excluded from scientific conferences. Still, they both continue their research as best they can. The third applicant has decided to discontinue his research career altogether.
19. Before she was found guilty of research misconduct, the fourth applicant headed a research team of 15 researchers at KI, and was a member of several international and national committees, including the Nobel Assembly, the Royal Swedish Academy of Sciences and the Swedish Research Council's Scientific Council for Medicine and Health. She was also chair of the working group on cell therapy within the Swedish National Council for Organs, Tissues, Cells and Blood. In 2021, her research team has been completely dissolved and she has been forced to either resign or take time-out from all of the above mentioned committees.
20. Following the misconduct decision, KI further decided that the fourth applicant, who unlike the other applicants was still employed at KI at the time of the decision, was also to be issued a formal caution (erinran), which is a disciplinary sanction under Swedish labour law. KI explicitly stated that additional employer sanctions were not called for, since she had suffered other "substantial consequences" because of the decision (see bundle pp. 229–230).
- VII. THE APPLICANTS' ATTEMPTS TO APPEAL THE MISCONDUCT DECISION**
21. Having been notified of the misconduct decision, the applicants – being aware of its impending consequences – inquired how they could lodge an appeal. KI informed the applicants that under Chapter 12, section 4 of the Higher Education Ordinance (Högskoleförordningen; 1993:100), its decision was not subject to appeal (see bundle p. 231).
22. After consulting a lawyer, the applicants nevertheless lodged an appeal with the Administrative Court of Stockholm, arguing that the prohibition on appeal should be set aside with reference to Article 6 § 1 and that the decision should be reversed (see bundle pp. 233–266). On 6 November 2018, the Administrative Court found that Article 6 § 1 did not entitle them to judicial review of the decision (see bundle p. 291–300). The applicants appealed to the Administrative Court of Appeal in Stockholm, which, on 19 March 2019, decided not to grant leave to appeal (see bundle pp. 304–334 and 336–338). The applicants requested leave to appeal to the Supreme Administrative Court, which, on 5 June 2019, rejected their request (see bundle pp. 339–354).
- VIII. THE APPLICANTS' COMPLAINT TO THE CHANCELLOR OF JUSTICE**
23. On 4 June 2020, the applicants submitted a claim for damages to the Chancellor of Justice arguing that the courts' refusal to examine their case on the merits constituted a violation of their right of access to court under Article 6 § 1 of the Convention (see bundle pp. 357–412). The Chancellor dismissed the claim on 24 February 2021 (see bundle pp. 413–416).

F. Statement of alleged violation(s) of the Convention and/or Protocols and relevant arguments

61. Article invoked	<p>Explanation</p> <p>IX. THE CASE RAISES IMPORTANT ISSUES OF WHISTLE-BLOWER PROTECTION AND THE RULE OF LAW</p>
	<p>24. This case revolves around two medical scandals at KI – one of the world's foremost medical universities and Sweden's most renowned public research institute. The applicants blew the whistle on malpractices and abuse at KI and tainted KI's reputation. Acting both as prosecutor and judge in its own case, KI then retaliated by holding the applicants responsible for Macchiarini's research misconduct. This was done in a public law decision, which could not be appealed, was reached without regard for the applicants' due process rights, and had far reaching consequences for the applicants' research careers. Under the domestic courts' understanding of the Strasbourg case-law, the Convention does not require that such a decision be subject to review by an independent tribunal.</p> <p>25. Against this background, the case raises important issues of the rule of law and whistle-blower protection in academic medicine. It presents a pressing opportunity for the Court to clarify the fundamental due process guarantees required under the Convention to safeguard such whistle-blowers against unlawful retribution.</p>
Article 6 § 1	<p>X. THE STATE HAS VIOLATED THE APPLICANTS' RIGHT OF ACCESS TO COURT</p>
	<p>26. The applicants submit that their right of access to court under Article 6 § 1 of the Convention has been breached because of the domestic courts' refusal to examine their appeal of KI's misconduct decision of 25 June 2018 on the merits.</p>
	<p>27. KI's misconduct decision, establishing that the first and fourth applicant were guilty of "research misconduct" and that the second and third applicant were "blameworthy" for their involvement in Macchiarini's research articles, gives rise to a genuine and serious dispute between the applicants and KI. The outcome of this dispute is directly decisive for the applicants' professional reputation, their right to exercise their profession and their freedom of expression. These rights are civil in nature and can on arguable grounds be said to be recognised under domestic law.</p>
	<p>28. Professional reputation and the right to exercise one's profession are protected under Article 8 of the Convention (see <i>Denisov v. Ukraine</i> [GC], no. 76639/11, § 107, 25 September 2018). The right to freedom of speech, protected under Article 10 of the Convention, comes into play in the present case both with regard to the limitations on the applicants' possibilities of publishing research articles and the fact that the misconduct decision, in the applicants' submission, was intended as a direct reprisal against them for blowing the whistle and damaging KI's reputation.</p>
	<p>29. These rights under Articles 8 and 10 of the Convention have been recognised as civil rights by the Court (see <i>Le Compte, Van Leuven and De Meyere v. Belgium</i>, 23 June 1981, § 44, Series A no. 43; <i>Helmets v. Sweden</i>, 29 October 1991, § 27, Series A no. 212-A and <i>Shapovalov v. Ukraine</i>, no. 45835/05, §§ 48–49, 31 July 2012). They can also be said, at least on arguable grounds, to be protected under domestic law. The Convention has been incorporated into Swedish law by the Act on the European Convention for the Protection of Human Rights and Fundamental Freedoms (<i>Lagen om den europeiska konventionen angående skydd för de mänskliga rättigheterna och de grundläggande friheterna</i>; 1994:1219). As the Court has repeatedly held, it is sufficient for the application of Article 6 that there is a genuine and serious dispute regarding a right that is protected under the Convention (see <i>inter alia</i> <i>Arlewin v. Sweden</i>, no. 22302/10, § 60, 1 March 2016 and <i>Fayed v. the United Kingdom</i>, 21 September 1994, § 67, Series A no. 294-B). In any event, freedom of expression and the right to exercise one's profession are also protected under the Swedish Constitution (see Chapter 2, Sections 1 and 17 of the Instrument of Government – <i>Regeringsformen</i>).</p>

Statement of alleged violation(s) of the Convention and/or Protocols and relevant arguments (continued)

62. Article invoked	<p>Explanation</p> <p>30. The outcome of the appeal proceedings was, furthermore, directly decisive for the applicants' civil rights. As has been described in paragraph 14–20 above, the misconduct decision has had concrete and immediate adverse consequences for the applicants' reputation and their possibilities to conduct research and publish research articles.</p> <p>31. The dispute can also be characterised as genuine and serious. The applicants submit that KI's misconduct decision does not have a sufficient basis in law, that the decision has been made in breach of the procedural safeguards in the the Public Administration Act (Förvaltningslagen; 2017:900) and that the allegations against them are false. Under Article 6, such a genuine and serious dispute as to the lawfulness of an interference entitles them to have their case determined by a tribunal (see T.P. and K.M. v. the United Kingdom [GC], no. 28945/95, § 97, ECHR 2001-V [extracts]; Tre Traktörer AB v. Sweden, 7 July 1989, § 40, Series A no. 159; and Sporrang and Lönnroth v. Sweden, 23 September 1982, § 81, Series A no. 52).</p> <p>32. Finally, as the Court observed in its Golder judgment: "in civil matters one can scarcely conceive of the rule of law without there being a possibility of having access to the courts" (see Golder v. the United Kingdom, 21 February 1975, § 34, Series A no. 18). There is no such possibility here. Under Swedish law, the only possible action for the applicants to get KI's decision overturned and the effects of the decision cancelled is through an appeal to the administrative courts. The administrative courts' refusal to examine the applicants case on the merits thus impairs the very essence of their right of access to court and constitutes a violation of Article 6 § 1 of the Convention.</p>
Article 8 and 10 in conjunction with Article 13	<p>XI. THE STATE HAS VIOLATED THE APPLICANTS' RIGHT TO AN EFFECTIVE REMEDY</p> <p>33. The applicants further submit that the facts of the case can be characterised in law not only as a breach of the right of access to court under Article 6 § 1, but also, in the alternative, as a breach of the right to an effective remedy under Article 13.</p> <p>34. As mentioned above, the misconduct decision has adversely affected the applicants' reputation and their possibilities to conduct research and publish research articles. The applicants have also submitted that the decision was intended as a direct reprisal against them for blowing the whistle and staining KI's reputation. The decision thus constitutes an interference with the applicants' right to respect for their private life and freedom of expression under Articles 8 and 10 of the Convention.</p> <p>35. Because the misconduct decision lacks sufficient basis in law, and is incorrect and arbitrary as to the facts, the applicants can, on arguable grounds, submit that the decision constitutes a violation of their rights under Articles 8 and 10 of the Convention. They thus have a right to an effective remedy that is capable of remedying the consequences for their reputation and their possibilities to conduct research and publish research articles. No such remedy has been available to them. Consequently, their right to an effective remedy has been breached.</p> <p>XII. CONCLUSION</p> <p>36. At bottom, it is incompatible with the rule of law that a public authority can act both as prosecutor and judge in a case where its own reputation is at stake and then shield itself from accountability under a prohibition on appeal. This case calls for clarification of the Convention requirements for the protection of whistle-blowers as regards the right to appeal public law decisions. That right has long been a deep-seated issue for the Swedish courts, which has given rise to more than a dozen rulings against Sweden for failure to guarantee the right of access to court under the Convention. In the present case, the lack of independent review is particularly concerning as it discourages potential whistle-blowers in the medical profession and leads to serious patient safety risks (see statement of the Swedish Medical Association, bundle pp. 355–356).</p>

G. Compliance with admissibility criteria laid down in Article 35 § 1 of the Convention

For each complaint, please confirm that you have used the available effective remedies in the country concerned, including appeals, and also indicate the date when the final decision at domestic level was delivered and received, to show that you have complied with the six-month time-limit.

63. Complaint	Information about remedies used and the date of the final decision XIII. THE APPLICANTS HAVE EXHAUSTED DOMESTIC REMEDIES
Article 6 § 1 and Article 8 and 10 in conjunction with Article 13	37. The applicants' right of access to court and right to an effective remedy were breached once the Supreme Administrative Court refused leave to appeal on 5 June 2019 (case file numbers 2110-19 and 2129-2132-19, see bundle pp. 353–354). With a view to exhaust domestic remedies, the applicants then lodged a complaint for damages with the Chancellor of Justice for breaches of their rights under the Convention (see bundle pp. 357–412). The alleged breach of Article 6 § 1 was raised explicitly and the alleged breach of Articles 8 and 10 in conjunction with Article 13 – which is based essentially on the same ground – was raised "at least in substance" (see <i>mutatis mutandis</i> <i>Hanan v. Germany</i> [GC], no. 4871/16, §§ 148–151, 16 February 2021). The Chancellor of Justice rejected the applicants' complaint on 24 February 2021 (case file number 2020/3484, see bundle pp. 413–416).
	XIV. THE APPLICANTS WERE REQUIRED TO SUBMIT A CLAIM FOR COMPENSATION
	38. Under the Court's established case-law, the applicants were required to either lodge a complaint for damages with the Chancellor of Justice or sue the State for damages before the ordinary courts before submitting an application to the Strasbourg Court (see <i>inter alia</i> <i>Ruminski v. Sweden</i> [dec.], no. 10404/10, §§ 37–38, 21 May 2013). Exception from the requirement to submit a domestic claim for compensation is only made where such a claim could not put an end to an ongoing violation (see <i>Jovanovic v. Sweden</i> , no. 10592/12, § 61, 22 October 2015, where the authorities refused to terminate the public care of a child in alleged breach of the Convention). The violation in the applicants' case is not ongoing; it occurred when the Supreme Administrative Court refused leave to appeal and the applicants were conclusively denied access to court. Accordingly, the applicants here do not fall under the exception that would relieve them from submitting a claim for compensation.
	39. Indeed, the Court has previously declared complaints against Sweden under Article 6 inadmissible where the applicants had not first submitted a domestic claim for compensation (see <i>inter alia</i> <i>Ruminski v. Sweden</i> [dec.], no. 10404/10, §§ 44–46, 21 May 2013, concerning the courts' refusal to grant an oral hearing and <i>Marinkovic v. Sweden</i> [dec.], no. 43570/10, §§ 43–44, 10 December 2013 concerning excessive length of custody proceedings). Conversely, the Court has also declared a case admissible merely because the Swedish Government had not shown that, at that time, there was case-law demonstrating that compensation could be awarded for a lack of access to court (see <i>Karin Andersson and Others v. Sweden</i> , no. 29878/09, §§ 61–63, 25 September 2014). In the same judgment, however, the Court accepted that following the Swedish Supreme Court's judgment of 3 December 2009 (NJA 2009 N 70), there is an effective compensatory remedy in Sweden capable of affording redress in respect of alleged breaches of the Convention (<i>ibid.</i>). The Court would, therefore, have rejected the complaint in that case for non-exhaustion of remedies, if the application had been lodged with the Court after 3 December 2009. Since compensation can now be awarded for lack of access to court or lack of effective remedies, the applicants in the present case were required to submit a domestic claim for compensation before lodging their application with the Court.
	XV. THE APPLICANTS HAVE COMPLIED WITH THE SIX-MONTH TIME-LIMIT
	40. The applicants exhausted domestic remedies on 24 February 2021 when the Chancellor of Justice delivered her decision (which consequently is the final decision at domestic level). The applicants were notified of the decision on the same day it was delivered; their application was lodged with the Court before 24 August 2021; they have thus complied with the six-month time-limit.

I. List of accompanying documents

You should enclose full and legible copies of all documents. No documents will be returned to you. It is thus in your interests to submit copies, not originals. You MUST:

- arrange the documents in order by date and by set of proceedings;
- number the pages consecutively; and
- NOT staple, bind or tape the documents.


70. In the box below, please list the documents in chronological order with a concise description. Indicate the page number at which each document may be found

1.	The Lancet, "Tracheobronchial transplantation with a stem-cell-seeded bioartificial nanocomposite: a proof-of-concept study", 24.11.11	p.	1
2.	The Lancet, "Engineered whole organs and complex tissues", 10.03.12	p.	9
3.	Biomaterials, "Verification of cell viability in bioengineered tissues and organs before clinical transplantation", 06.03.13	p.	19
4.	Journal of Biomedical Material Research, "Review Article: Are synthetic scaffolds suitable for the development of clinical tissue-engineered tubular organs?", 27.07.13	p.	30
5.	Thoracic Surgery Clinics, "Airway Transplantation", 01.02.14	p.	52
6.	Biomaterials, "Biomechanical and biocompatibility characteristics of electrospun polymeric tracheal scaffolds", 03.04.14	p.	62
7.	The New York Times, "Leading Surgeon is Accused of Misconduct in Experimental Transplant Operations", 24.11.14	p.	71
8.	Karolinska University Hospital, police report against the first three applicants' for breach of patient confidentiality, 22.12.14	p.	74
9.	KI's first misconduct decision in the Macchiarini case, part I, 28.08.15.	p.	75
10.	KI's first misconduct decision in the Macchiarini case, part II, 28.08.15	p.	82
11.	The prosecutor's decision to close preliminary investigations into accusations against the applicants for breach of patient confidentiality, 03.11.15	p.	98
12.	Dagens Nyheter, "KI har en del att förklara" (KI has some explaining to do), 28.01.16	p.	100
13.	Aftonbladet, "Efter kirurgskandalen: 'Stoppa Nobelpriset'" (After the surgeon scandal: 'Stop the Nobel Prize'), 30.01.16	p.	102
14.	Huffington Post Italy, "Paolo Macchiarini, da 'mago dei trapianti di trachea' al licenziamento in Svezia con una lettera a Science" ("[...] from 'wizard of trachea transplants' to being fired in Sweden with a letter to Science", 07.02.16	p.	105
15.	Dagens Nyheter, "I resign from my position as vice-chancellor of Karolinska Institutet", 13.02.16	p.	107
16.	Le Figaro, "Les cobayes humains du Dr Macchiarini", 24.03.16	p.	110
17.	Reuters, "Nobel Assembly seeks resignation of two members over scandal: agency", 06.09.16	p.	113
18.	BBC News, "Swedish Nobel judges fired in Karolinska medical scandal", 06.09.16	p.	117
19.	The Washington Post, "'Biggest scandal' in Swedish medicine touches Nobel Prize with two committee members asked to resign", 07.09.16	p.	120
20.	Le Monde, "Paolo Macchiarini, la chute d'un « magicien » de la greffe", 03.10.16	p.	124
21.	Statement of the Central Ethics Review Board regarding Macchiarini's misconduct allegations against the first applicant, 02.12.16	p.	128
22.	The fourth applicant's formal report regarding the placenta study at KI, 28.12.16	p.	131
23.	Svenska Dagbladet, "Svårt sjuka behandlades utan tillstånd på Karolinska" (Seriously ill patients were treated without [ethical] approval at Karolinska University Hospital), 17.01.17	p.	146
24.	KI's misconduct decision in the placenta case, 06.02.17	p.	154
25.	Policy of the Swedish Cancer Fund regarding research misconduct, 11.05.17	p.	169

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Continuation of list of accompanying documents

No.	Description	Page number
26	The Guardian, "Dr Con Man: the rise and fall of a celebrity scientist who fooled almost everyone", 01.09.17	174
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