

PUBLIC RECORD**Dates:** 22/09/2025 - 25/09/2025

Doctor: Mr Manoj SEN

GMC reference number: 3401862

Primary medical qualification: MB BS 1983 Calcutta

Type of case	Outcome on facts	Outcome on impairment
New - Caution	Facts relevant to impairment found proved	Impaired
New - Misconduct	Facts relevant to impairment found proved	Impaired

Summary of outcome

Erasure

Immediate order imposed

Tribunal:

Legally Qualified Chair	Miss Gillian Temple-Bone
Lay Tribunal Member:	Mrs Francesca Martin
Registrant Tribunal Member:	Dr Amir Zafar

Tribunal Clerk:	Ms Jemine Pemu
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Attendance and Representation:

Doctor:	Not present, not represented
GMC Representative:	Mr Nigel Grundy, Counsel

Attendance of Press / Public

In accordance with Rule 41 of the General Medical Council (Fitness to Practise) Rules 2004 the hearing was held in public.

Overarching Objective

Throughout the decision making process the tribunal has borne in mind the statutory overarching objective as set out in s1 Medical Act 1983 (the 1983 Act) to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the medical profession, and to promote and maintain proper professional standards and conduct for members of that profession.

Determination on Facts - 23/09/2025

Background

1. Mr Sen qualified as a doctor in 1983 with an MBBS from Calcutta Medical College. He practiced as a surgeon.
2. The allegation that has led to Mr Sen's hearing can be summarised as, on 10 October 2023, he commented on a social media post of Mr A and his comments were objectively antisemitic and/or seriously offensive and motivated by hostility and/or prejudice against Jews. It is further alleged that, on or around 10 November 2023, at Colindale Police Station, Mr Sen accepted a caution for racially/religiously aggravated harassment/alarm/distress by words/writing in relation to his actions.
3. The initial concerns were raised with the General Medical Council ('GMC') on 11 October 2023 by email from Mr A, the individual in receipt of the alleged comments.

The Outcome of Applications Made during the Facts Stage

4. At the outset of the hearing, the Tribunal granted an application made by Mr Nigel Grundy, Counsel, on behalf of the GMC, that the Notice of the Hearing had been served on Mr Sen in accordance with Rule 40 of the General Medical Council (Fitness to Practise Rules) 2004 as amended ('the Rules'). The Tribunal granted Mr Grundy's application, made pursuant to Rule 31 of the Rules, that the Tribunal should proceed to hear the case in Mr Sen's absence. The Tribunal's written decision is included at Annex A.

The Facts to be Determined

5. The Allegation made against Mr Sen is as follows:

That being registered under the Medical Act 1983 (as amended):

1. On 10 October 2023, you commented on the Facebook post of Mr A as set out in Schedule 1;

To be determined

2. Your comments as set out in paragraph 1 were:

i. objectively antisemitic; and/or

To be determined

ii. seriously offensive; and

To be determined

iii. motivated (in whole or in part) by hostility towards and/or prejudice against Jews.

To be determined

3. On or around 10 November 2023 at Colindale Police Station, you accepted a caution for racially/religiously aggravated harassment/alarm/distress by words/writing, in relation to your actions described at paragraph 1 above

To be determined

Witness Evidence

6. The Tribunal received a witness statement on behalf of the GMC from Mr A, dated 09 December 2024.

7. The Tribunal also received a witness statement on behalf of the GMC from Mr B, GMC Investigation Manager, dated 17 January 2025.

8. Mr Sen did not provide a witness statement. The Tribunal was provided with an email from Mr Sen to GMC regarding the complaint, dated 14 February 2024:

'I have never actually met Mr A but he is [XXX] belonging to a Jewish family.'

I joined [Mr A]’s private Facebook chat group quite some years ago and when on the morning of October 10th 2023, he made remarks on extremist remarks made in the context of the Middle East situation, I readily concurred. The extract from the conversation in the Home Office letter is not the whole communication. They have started with citing the remark by the Israeli Defence Minister about “Untermenschen”. Those were not my words then.

Without provocation he called me [XXX] which was painful to me as I am now [XXX]. I must have lost my senses as in the heat of the moment I made wrongful and injudicious remarks – for which I have apologised in public on Facebook as well as privately to the police. Those remarks are entirely out of character. I am neither racist nor an antisemite. At no time did I make any anti-Israeli comments. These comments were purely personal in nature, however injudicious.

These remarks were on a private exchange in a private Facebook group. Or so I thought till I found them publicized and the subject of a lot of hate mail, all directed toward me.

I had already retired after 43 years as a doctor with much of 25 of them spent in the NHS. . And now I had factually inaccurate articles written about me (no doubt at the urging of [Mr A]) as well as in – both publications coming up with the mistruth that I had been sacked by my Trust! [Mr A] had been [XXX].

I was questioned and received a simple caution by the police who told me clearly that this was on the basis of a complaint by [Mr A].

That was on November 9th 2023. The next thing was receiving the notice.’

9. The Tribunal further received a note of a telephone conversation between the GMC and Dr Sen dated 13 August 2025 in which Dr Sen stated that he was aware of the listing of the hearing due to start on 22 September 2025, and he had no wish to participate in the hearing. The Tribunal received no further evidence on behalf of Mr Sen.

Documentary Evidence

10. The Tribunal had regard to the documentary evidence provided by the parties. This evidence included but was not limited to:

- Screen shot of Mr Sen’s Facebook page;
- Facebook post of Mr A with comments from Mr Sen;
- Police complaint made by Mr A, dated 10 October 2023;
- GMC complaint made by Mr A, dated 11 October 2023;
- Email correspondence between the Metropolitan Police and Mr A;
- Police Simple Adult Caution to Mr Sen, dated 10 November 2023;
- Metropolitan Police Case Summary, Undated;
- Email from Mr Sen to the Police, dated 14 February 2024;
- Correspondence between the Metropolitan Police and the GMC;
- Telephone call between GMC and Mr Sen confirming does not have a copy of signed Caution, dated 11 May 2024;
- Telephone note of a conversation between the GMC and Mr Sen, dated 13 August 2024;
- Jerusalem declaration on Antisemitism;
- IHRA Non legally binding definition of Antisemitism;
- Oxford English Dictionary definition of Antisemitism.

The Tribunal’s Approach

11. In reaching its decision on facts, the Tribunal has borne in mind that the burden of proof rests on the GMC and it is for the GMC to prove the Allegation. Mr Sen does not need to prove anything. The standard of proof is that applicable to civil proceedings, namely the balance of probabilities, i.e., whether it is more likely than not that the events occurred.

12. The Tribunal has listened to the evidence presented on behalf of the GMC and has further written evidence within the bundles before the Tribunal. Mr Sen has not attended nor has he given oral evidence in his defence for the Tribunal to take into consideration. It is upon the evidence before it, that the Tribunal must make its findings.

13. Regarding inferences that may be properly drawn from the evidence the case of *Malhar SONI v GMC [2015] EWHC 364* is relevant. The Tribunal must be mindful that when drawing inferences, it has been able to safely exclude, as less than probable, any other possible explanations for the charges against Mr Sen.

14. In this case the Tribunal should take into consideration Mr Sen's good character. He has practised in the UK as a surgeon since the 1980s and no other complaints or referrals have been made against him or his practice.

The Tribunal's Analysis of the Evidence and Findings

15. On 10 October 2023, Mr Sen engaged in an exchange on Facebook in response to a post made by Mr A. The post stated that the author Mr A 'had the greatest of respect for people who in the midst of a war refuse to dehumanise their apparent enemies. In the exchange that followed, Mr Sen made a series of comments directed at Mr A which the police summarised as follows:

[Mr Sen] The Registrant used racially abusive language about and towards Mr A including comments :

- 'Die Juden sind unsere Unglück' [The Jews are our misfortune]
- [Referring to Mr A as] 'Jewish cunt' and Jewboy'
- 'when dealing with circumcised vermin like you, not even the strongest measures will help'
- 'if you read carefully it is the Jewish rodent who started a personal attack on me..... Judge carefully I am regretful enough rats were not liquidated at Auschwitz. Good thing he is no longer in a respectful place like India. He belongs in the flames of a crematorium.'

Part-way through the exchange, Dr Sen wrote 'I am actually relishing this.'

16. The comments were reported by Mr A, who described the incident to the police as '*repeated antisemitic slurs and abuse online*' and in his complaint to the GMC as "*sustained antisemitic abuse by a doctor.*" In his complaint, Mr A raised concerns that Mr Sen's conduct was incompatible with his professional responsibilities as a doctor who must treat patients from a variety of ethnic and religious backgrounds. Mr A provided screenshots of the comments and also reported the matter to the police.

17. Mr Sen was arrested, interviewed under caution, and made full admissions to the police. On 10 November 2023, Mr Sen was issued with an adult simple caution for racially/religiously aggravated harassment/alarm/distress by words/writing, and for sending a communication/article of an indecent/offensive nature. The Case Summary prepared by the police stated that the comments made on Facebook were widely circulated and resulted in Dr Sen resigning from his position and issuing a statement of apology on his Facebook and to

the Daily Mail, acknowledging that there are no excuses for his comments and that they were 'appalling and unjustified.'

18. The Tribunal has considered each paragraph of the Allegation separately and has evaluated the evidence in order to make its findings on the facts.

Paragraph 1

19. The Tribunal set out to determine whether on 10 October 2023, Mr Sen commented on the Facebook post of Mr A as set out in Schedule 1.

20. The Tribunal considered the Metropolitan Police Case summary:

'The complainant has initially posted a comment on facebook essentially expressing his surprise and disappointment that people he knows and believed to be educated, otherwise reasonable people, have been posting inflammatory comments about the conflict between Israel/Palestine. Within the exchange, that followed, the registrant has used racially abusive language about and towards the complainant.

The pertinent comments from the registrant being as follows:

- Referring to the complainant as "JEWISH CUNT" and "JEWBOY"
- "WHEN DEALING WITH CIRCUMCISED VERMIN LIKE YOU, NOT EVEN THE STRONGEST MEASURES WILL HELP".
- "IF YOU READ CAREFULLY IT IS THE JEWISH RODENT WHO STARTED A PERSONAL ATTACK ON ME"
- "I AM REGRETFUL ENOUGH RATS WERE NOT LIQUIDATED AT AUSCHWITZ. GOOD THING HE IS NO LONGER IN A RESPECTFUL PLACE LIKE INDIA. HE BELONGS IN THE FLAMES OF A CREMATORIUM".
- At one point mid-way through the exchange, registrant writes "I AM ACTUALLY RELISHING THIS!"

The registrant for this is Dr Manoj Sen, a surgeon at NPH. These comments that were made on Facebook have been widely circulated and have resulted in Mr Sen resigning from his position and issuing a statement of apology on his Facebook and also in comment to the Daily Mail, acknowledging that there are no excuses for his comments and that they were "appalling and unjustified".'

21. The Tribunal had regard to the police summary, together with the screenshots of the Facebook comments. The Tribunal noted that the comments were directly attributed to Mr Sen, that they were made from his Facebook account, and that they had been widely circulated.

22. The Tribunal noted that PC C the Officer in the Case, having investigated, provided the information to PS D who decided to administer a Simple Caution to Mr Sen. PS E noted that Mr Sen admitted he had committed the offence, and PS E administered the Simple Caution on 10 November 2023.

23. The Tribunal was further satisfied that Mr Sen acknowledged, according to the Police Case Summary, that his comments were 'appalling and unjustified'.

24. In light of this evidence, the Tribunal was satisfied, on the balance of probabilities, that the comments were made by Mr Sen on 10 October 2023, as alleged.

25. The Tribunal therefore found paragraph 1 of the Allegation proved.

Paragraph 2i

26. The Tribunal set out to determine whether Mr Sen's comments as set out in paragraph 1 were objectively antisemitic.

27. The Tribunal then had regard to the varying definitions of antisemitism provided by the GMC. It considered the content of the comments set out in the police summary, including the repeated use of slurs such as "Jewish cunt" and "Jewboy", and the references to "circumcised vermin" and "Jewish rodent". The Tribunal found the following comment of particular concern:

'If you read carefullx [sic] it is the Jewish rodent who started personal attack on me. Judge carefully or don't judge at all. I am regretful enough rats were nor [sic]

liquidated at Auschwitz. Good thing he is no longer in a respectful plsce [sic] like India. He belongs in the flames of a crematorium.'

28. The Tribunal found that these comments were objectively antisemitic. They referred directly to a protected characteristic and expressed support for atrocities committed against Jews.

29. The Tribunal therefore found paragraph 2i of the Allegation proved.

Paragraph 2ii

30. The Tribunal set out to determine whether Mr Sen's comments as set out in paragraph 1 were seriously offensive.

31. The Tribunal was further satisfied that the comments were seriously offensive, particularly the reference to Auschwitz and a crematorium, which went far beyond any acceptable or lawful expression of opinion.

32. The Tribunal therefore found paragraph 2ii of the Allegation proved.

Paragraph 2iii

33. The Tribunal set out to determine whether Mr Sen's comments as set out in paragraph 1 were motivated (in whole or in part) by hostility towards and/or prejudice against Jews.

34. In considering motivation, the Tribunal acknowledged that there was some degree of provocation preceding Mr Sen's responses. However, it was clear that his comments were calculated, sustained, and repeatedly targeted towards Jewish identity. The language used suggested a deep hostility towards Jews as a group, rather than merely a personal attack on the Complainant.

35. The Tribunal also bore in mind that while there was reference in the papers to Mr Sen having expressed regret, there was no evidence of a formal written apology or an acknowledgement of his wrongdoing in a statement or letter before these proceedings. The Tribunal concluded that, on the balance of probabilities, when he made these comments, Mr Sen was motivated by hostility towards and prejudice against Jews.

36. The Tribunal therefore found paragraph 2iii of the Allegation proved.

Paragraph 3

37. The Tribunal set out to determine whether on or around 10 November 2023 at Colindale Police Station, Mr Sen accepted a caution for racially/religiously aggravated harassment/alarm/distress by words/writing, in relation to his actions described at paragraph 1 above.

38. The Tribunal had regard to the police report confirming that Mr Sen was arrested on 9 November 2023, interviewed, and made a full admission. The report recorded that the deciding officer determined that an adult caution be administered for the offences of racially/religiously aggravated harassment/alarm/distress by words/writing and sending a communication/article of an indecent/offensive nature.

39. The Tribunal also noted the email from Mr Sen to the GMC dated 14 February 2024, in which he referred to the police caution, *‘I was questioned and received a simple caution by the police who told me clearly that this was on the basis of a complaint by [Mr A]’*. Together with the doctor’s own admission, the Tribunal was satisfied that Mr Sen did accept the caution as alleged.

40. The Tribunal considered an email between Mr A and Metropolitan Police, dated 14 November 2023:

‘...Manoj was arrested on 9/11/23, interviewed and provided a full admission. The sergeant on duty at the time made a decision to give him an adult caution for the following offences:

- racially/religiously aggravated harassment/alarm/distress by words/writing*
- send communication/article of an indecent/offensive nature’*

41. The Tribunal therefore found paragraph 3 of the Allegation proved.

The Tribunal’s Overall Determination on the Facts

42. The Tribunal has determined the facts as follows:

1. On 10 October 2023, you commented on the Facebook post of Mr A as set out in Schedule 1;

Determined and found proved

2. Your comments as set out in paragraph 1 were:

i. objectively antisemitic; and/or

Determined and found proved

ii. seriously offensive; and

Determined and found proved

iii. motivated (in whole or in part) by hostility towards and/or prejudice against Jews.

Determined and found proved

3. On or around 10 November 2023 at Colindale Police Station, you accepted a caution for racially/religiously aggravated harassment/alarm/distress by words/writing, in relation to your actions described at paragraph 1 above

Determined and found proved

Determination on Impairment - 23/09/2025

1. The Tribunal now has to decide in accordance with Rule 17(2)(l) of the Rules whether, on the basis of the facts which it has found proved as set out before, Mr Sen's fitness to practise is impaired by reason of misconduct that is serious or his caution.

The Evidence

2. The Tribunal has taken into account all the documentary evidence received during the facts stage of the hearing.

Submissions

3. On behalf of the GMC, Mr Grundy, Counsel, submitted that Mr Sen's fitness to practise is currently impaired. He emphasised that the Tribunal's duty is to assess impairment

as of today's date, not merely at the time of the past events in question. The basis for this submission rests on the engagement of all three public interest strands outlined in the Medical Act: the need to protect public safety, to maintain public confidence in the medical profession, and to uphold proper standards of conduct and behaviour.

4. Mr Grundy submitted that the Tribunal should adopt the well-established two-stage process described in *Cheatle v General Medical Council [2009] EWHC 645* and related authorities. At step one, the Tribunal must decide whether the facts found proved amount to misconduct. At step two, the Tribunal must determine whether, as a result, Mr Sen's fitness to practise is impaired now. Mr Grundy submitted that for conduct to amount to misconduct in law, it must be serious. He referred the Tribunal to *R (Remedy UK Ltd) v GMC [2010] EWHC 1245 (Admin)*, in which Lord Justice Elias identified two principal forms of misconduct: misconduct within professional practice of such seriousness that it goes to fitness to practise; and misconduct outside professional practice of a morally culpable or disgraceful nature which brings disgrace upon the doctor and prejudices the reputation of the profession.

5. Mr Grundy submitted that it is the second category which applies in this case. He submitted that the Tribunal had already found, at paragraph 28 of its determination on facts, that Mr Sen's comments on Facebook were objectively anti-Semitic. They directly referred to a protected characteristic and expressed support for atrocities committed against Jews. Mr Grundy submitted that the Tribunal's findings at paragraph 31, that the comments were "seriously offensive", particularly in their reference to Auschwitz and the crematorium, showed that the behaviour went far beyond any acceptable or lawful expression of opinion. He submitted that at paragraph 34 the Tribunal had further found that Mr Sen's comments were calculated, sustained, and repeatedly targeted towards Jewish identity, and that the language suggested deep hostility towards Jews as a group, rather than a personal attack on the complainant.

6. Mr Grundy submitted that such behaviour is directly contrary to paragraph 65 of Good Medical Practice (2013 edition), which requires doctors to ensure that their conduct justifies both patients' trust and the public's trust in the profession. Mr Grundy submitted that the conduct alleged in paragraphs 1 and 2 of the Allegation amounted to misconduct. He further noted that Mr Sen had accepted a caution, as set out in paragraph 3 of the Allegation and this also amounts to misconduct. Mr Grundy submitted that the Tribunal had found, at paragraph 35 of its determination, that when Mr Sen made these comments, he was motivated by hostility towards and prejudice against Jews. He submitted that while Mr Sen

had described his remarks as “wrongful and injudicious”, the conduct was far more serious as it was deliberate, hostile, and profoundly offensive.

7. Mr Grundy submitted that Mr Sen provided no evidence of meaningful remediation. No formal apology had been provided, no written acknowledgment of wrongdoing had been offered, and no reflective statement had been presented. Instead, Mr Sen had chosen not to engage with these proceedings and had, in effect, buried his head in the sand. Mr Grundy submitted that although remediation may have greater relevance in clinical cases, this was a non-clinical case in which the weight of consideration fell upon the public interest. He submitted that the Tribunal should therefore consider the principles set out in *CHRE v NMC and Grant [2011] EWHC 927 (Admin)*, where Mrs Justice Cox made clear that impairment decisions must have regard not only to any current risk to patients but also to the need to uphold proper professional standards and maintain public confidence in the profession.

8. Mr Grundy submitted that in light of the seriousness of the findings, the absence of remediation, and the wider public interest, the Tribunal should conclude that Mr Sen’s fitness to practise is impaired.

The Relevant Legal Principles

9. The Tribunal reminded itself that at this stage of proceedings, there is no burden or standard of proof and the decision of impairment is a matter for the Tribunal’s judgement alone.

10. In approaching the decision, the Tribunal was mindful of the two stage process to be adopted: first whether the facts as found proved amounted to misconduct, whether the misconduct and the caution was serious, and then whether the finding of any misconduct and/or caution could lead to a finding of current impairment.

11. The Tribunal must determine whether Mr Sen’s fitness to practise is impaired today, taking into account Mr Sen’s conduct at the time of the events and any relevant factors since then such as whether the matters are remediable, have been remedied and any likelihood of repetition. The Tribunal kept in mind throughout their decision making, the overarching objective. The Tribunal considered the issue of misconduct in respect of each issue or type of conduct that had been found proven. Where paragraphs alleged similar conduct to other paragraphs, this similar conduct was considered together but the Tribunal was mindful not to

cumulate or aggregate them to reach a finding of misconduct; rather the Tribunal's findings on misconduct are made in relation to each and every incidence of conduct.

The Tribunal's Determination on Impairment

12. In reaching its decision the Tribunal reminded itself of the test set out by Dame Janet Smith in The Fifth Shipman Report, cited with approval in *Council for Healthcare Regulatory Excellence v Nursing and Midwifery Council & Paula Grant* [2011] EWHC 927 (Admin) at paragraph 76:

“Do our findings of fact in respect of the doctor’s misconduct, deficient professional performance, adverse health, conviction, caution or determination show that his/her fitness to practise is impaired in the sense that s/he:

a. has in the past acted and/or is liable in the future to act so as to put a patient or patients at unwarranted risk of harm; and/or

b. has in the past brought and/or is liable in the future to bring the medical profession into disrepute; and/or

c. has in the past breached and/or is liable in the future to breach one of the fundamental tenets of the medical profession; and/or

d. has in the past acted dishonestly and/or is liable to act dishonestly in the future.”

Misconduct

13. The Tribunal first considered whether the facts found proved amounted to misconduct.

14. The Tribunal found that Mr Sen's comments were objectively offensive, sustained, expressed significant hostility, and were targeted not only at an individual but at Jewish people as a whole. They were therefore not confined to a personal dispute but amounted to comments of a seriously offensive nature to the public generally and particularly to members of the Jewish community. The reference to Auschwitz and the crematorium was especially egregious.

15. The Tribunal was satisfied that such conduct was of a kind that fell far below the standards expected of a registered medical practitioner. It was inconsistent with the obligations of a doctor to act with integrity, uphold the reputation of the profession, and avoid conduct which could undermine public trust.
16. The Tribunal determined that the conduct described at paragraphs 1 and 2 of the Allegation amounted to misconduct that was serious. Although a caution in itself may not always amount to serious misconduct, in this case the caution is intrinsically linked to the prejudicial and offensive comments made by Mr Sen.
17. The Tribunal concluded that Mr Sen's conduct amounted to serious misconduct.
18. The Tribunal further found that the acceptance of a police caution by Mr Sen in itself amounted to misconduct, particularly given the nature and circumstances of the underlying behaviour which gave rise to it.
19. The Tribunal has concluded that Mr Sen's conduct fell so far short of the standards of conduct reasonably to be expected of a doctor as to amount to serious misconduct.

Impairment by reason of misconduct

20. Having determined that the facts found proved amounted to serious misconduct, the Tribunal went on to consider whether, as a result of that misconduct, Mr Sen's fitness to practise is currently impaired.
21. The Tribunal noted Mr Grundy's submissions and his reference to Good Medical Practice (2013) ('GMP'), the guidance in effect at the time of events. It had regard to paragraph 65 of GMP, which provides:

'65 *You must make sure that your conduct justifies your patients' trust in you and the public's trust in the profession.'*

22. The Tribunal considered whether Mr Sen's conduct was capable of being remedied, has been remediated, and whether it was highly unlikely to be repeated. In so doing, the Tribunal considered the available evidence in respect of insight and remediation.

23. The Tribunal noted that Mr Sen delayed notifying the GMC of the caution from November 2023 to February 2024, indicating at the very least a lack of regard for or recognition of the seriousness of his behaviour. The fact that he accepted a caution shows he admitted that he broke the law and the manner in which he broke the law in multiple Facebook comments posted in the public domain brought the medical profession into disrepute. As a result of this there is a continuing risk that he will bring the medical profession into disrepute in the future.

24. The Tribunal noted that Mr Sen had chosen not to participate in this hearing. The Tribunal found that his misconduct demonstrated a lack of self-control. There has been no evidence presented that Mr Sen has considered the gravity of his offending behaviour, no evidence of any meaningful reflection, remediation, or acknowledgement of wrongdoing. There was no evidence that he had identified his conduct as unacceptable or taken steps to improve his self-control.

25. The Tribunal had regard to hearsay accounts that Mr Sen had apologised to the police and expressed remorse, as well as an email in which he stated that he was appalled by his conduct. However, the Tribunal concluded that these initial responses were more likely driven by the occasion of his receiving a caution, as a means of mitigating his wrongdoing, rather than genuine insight or remorse as they were not amplified by oral or written evidence to the Tribunal.

26. The Tribunal noted that while Mr Sen has said he was upset and denied being antisemitic or racist, when the police administered the caution, he has not demonstrated regret for the comments themselves. Most recently on 13 August 2025 in a telephone conversation to the GMC, Mr Sen was noted to have said he didn't want to attend [this hearing] or be represented and didn't want to make any comments. There is no evidence that he has reflected on their impact or recognised that they were wholly inappropriate.

27. The Tribunal considered that the public would be appalled by the comments posted by Mr Sen and would be further appalled if no finding of impairment were made because:

- i. The public could be concerned that Jewish patients or Jewish colleagues of Mr Sen could receive less favourable treatment;
- ii. The misconduct is incompatible with the expectations of high standards of conduct in personal and professional correspondence;

- iii. The public are entitled to expect that a medical professional does not condone or express support for antisemitic behaviour or attitudes.

28. In the absence of evidence of insight or remediation, the Tribunal concluded that Mr Sen presents a continuing risk of repetition. His conduct demonstrates a lack of insight and understanding of the seriousness of his actions. It is in the public interest for him to be found to be currently impaired.

29. The Tribunal was satisfied that Mr Sen is currently impaired. The degree of hostility expressed in his comments is fundamentally incompatible with the duty of a doctor to treat patients equally and without discrimination.

Impairment by reason of a Caution

30. The Tribunal also considered impairment in light of the caution received by Mr Sen on 10 October 2023. It noted that the reason for the caution was the seriousness of the racist and antisemitic comments made by Mr Sen. There has been no evidence to suggest any reconsideration or repudiation of the underlying behaviour since that time.

31. The Tribunal determined that although the delay by Mr Sen in reporting the caution to the GMC on its own does not amount to current impairment, but when taken together with the lack of genuine insight, the nature of the caution itself, and the absence of any evidence of reflection, it indicated a continuing risk. It considered that until Mr Sen is able to demonstrate genuine understanding of the gravity of his conduct, particularly its impact on Jewish people and on public confidence in the medical profession, there remains a real risk of repetition. His apparent dismissal of the seriousness of his actions increases this risk.

32. The Tribunal concluded that there is no evidence of genuine regret, no evidence of remediation, and no evidence of developed insight. Accordingly, Mr Sen's fitness to practise is currently impaired by reason of the caution.

33. The Tribunal has therefore determined that Mr Sen's fitness to practise is currently impaired by reason of misconduct and a caution for a criminal offence.

Determination on Sanction - 25/09/2025

1. Having determined that Mr Sen's fitness to practise is impaired by reason of misconduct and a caution for a criminal offence, the Tribunal now has to decide in accordance with Rule 17(2)(n) of the Rules on the appropriate sanction, if any, to impose.

The Evidence

2. The Tribunal has taken into account relevant evidence in reaching a decision on sanction.

Submissions

3. On behalf of the GMC, Mr Grundy, Counsel, submitted that the appropriate sanction in this case is one of erasure.

4. Mr Grundy referred the Tribunal to the Sanctions Guidance (2024) ('the SG') and submitted that the main reason or the purpose of sanction is to protect the public. He submitted that the Tribunal must take into account the statutory overriding objective, to protect, promote and maintain the health, safety and well-being of the public, to promote and maintain public confidence in the profession, and to promote and maintain proper professional standards of conduct for the members of the profession.

5. Mr Grundy submitted that sanctions are not imposed to punish or discipline doctors, but they may have a punitive effect. He referred to paragraph 17 of the SG which states that patients must be able to trust doctors with their lives and health, so doctors must make sure that their conduct justifies their patients' trust in them and the public's trust in the profession. He submitted that although the Tribunal must ensure any sanction is appropriate and proportionate, the reputation of the profession as a whole is more important than the interests of any individual doctor.

6. Mr Grundy reminded the Tribunal that at paragraph 24 of its impairment determination it found that Mr Sen's misconduct demonstrated a lack of self-control. There is no evidence that he has considered the gravity of his offending behaviour. He submitted that there is no evidence of any meaningful reflection, remediation or acknowledgement of wrongdoing, and no evidence that Mr Sen has identified his conduct as unacceptable or taken steps to improve his self-control.

7. Mr Grundy submitted that this case falls at the most serious, upper end of the spectrum of discrimination. It is a very clear case of anti-semitism. He submitted that the doctor used seriously offensive language, motivated in whole or in part by hostility towards and prejudice to Jews, and that the Tribunal had already found his conduct to be far below the standards expected of a registered medical practitioner. He referred to the Tribunal's findings of a continuing risk of repetition and to paragraph 29 of its decision, which found that the degree of hostility expressed was fundamentally incompatible with the duty of a doctor to treat patients equally and without discrimination.

8. Mr Grundy submitted that this case is far too serious for there to be no order; that the facts are too serious for conditions to be imposed; the findings so serious that action must be taken to protect members of the public and maintain confidence in the profession. He referred to paragraph 92 of the SG, which states that suspension may be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration. He submitted that suspension would not therefore be appropriate. This case is fundamentally incompatible with continued registration and Mr Grundy therefore submitted that is why erasure is the proportionate sanction.

9. Mr Grundy submitted that paragraph 108 of the guidance makes clear that erasure may be appropriate even where there is no risk to patient safety, but where this action is necessary to maintain public confidence in the profession. He referred to paragraph 109, which provides that erasure may be appropriate where there has been a serious departure from the principles set out in Good Medical Practice, deliberate disregard for its principles, abuse of a position of trust, or persistent lack of insight. He submitted that the Tribunal has already found in regard to Mr Sen, a persistent lack of insight and a continuing risk of repetition.

The Relevant Legal Principles

10. The Tribunal reminded itself that the decision as to the appropriate sanction to impose, if any, was a matter for it alone, exercising its own judgment. In reaching its decision on sanction, the Tribunal had regard to the SG. It bore in mind that the purpose of a sanction is not to be punitive, but to protect patients and the wider public interest, although it noted that any sanction imposed may have a punitive effect. It reminded itself that in deciding what sanction, if any, to impose, it should consider the sanctions available, starting with the least restrictive.

11. Throughout its deliberations, the Tribunal had regard to the overarching objective, which includes the protection of the public, the maintenance of public confidence in the profession, and the promotion and maintenance of proper professional standards and conduct for members of the profession. It applied the principle of proportionality, balancing Mr Sen's interests against the public interest.

The Tribunal's Determination on Sanction

12. The Tribunal first identified what it considered to be the mitigating and aggravating factors in this case.

Mitigating Factors

13. The Tribunal considered the mitigating features on behalf of Mr Sen. The Tribunal noted that Mr Sen is otherwise a man of good character, as conceded by the GMC, and that no complaints have been made against him from any other source during his 25 years of service to the NHS. Since receiving his caution, there has been no further evidence of repeat offending, and no further complaints raised.

14. The incident in question arose from Facebook postings which took place almost two years ago. The Tribunal had regard to Mr Sen's self-reported XXX, according to the note of his telephone conversation with the GMC in August 2025. He had also referred to XXX which may have been relevant to the circumstances leading up to the incident. The Tribunal accepted that Mr A's remarks including, "*were you not a doctor once, [XXX] notwithstanding*" referred directly to XXX and caused him a degree of provocation. Later correspondence between Mr A and Mr Sen suggested that Mr A knew enough about Mr Sen to continue with a further provocative posting being made against Mr Sen both before and during the misconduct.

15. The Tribunal took account of paragraphs 25(c) and 25(d) of the Sanctions Guidance, namely that the circumstances before and within the postings may be relevant mitigating features. Regrettably, Mr Sen's choice not to participate in this hearing means that any further consideration of potential mitigating factors would be no more than speculation.

Aggravating factors

16. The Tribunal also considered the aggravating features in this case. It noted that despite the matter having happened nearly two years ago, Mr Sen has demonstrated no subsequent development of insight and no evidence of remediation. The Tribunal was satisfied that this was not an isolated comment, but a number of comments made which expressed hostility and anti-semitism.

17. The Tribunal considered that Mr Sen's length of service was an aggravating factor. Having spent 25 years working for the NHS, he should have been well aware of the need to treat all members of the public equally. He was expected to familiarise himself with the standards and ethics of practice in the country in which he worked, and after such extensive experience he should have known better. The Tribunal found that Mr Sen should have known that his comments were highly inappropriate, hostile and discriminatory. The Tribunal found it is likely that the beliefs set out in his postings reflected long held opinions.

18. The Tribunal noted that there had been no apology made directly to the complainant and no apology made to the Tribunal. That Mr Sen is reported to have made apology to the Police but not to Mr A, further suggests he lacks remorse. It had regard to paragraph 27 and 56 of the Sanctions Guidance, which makes clear that doctors are expected to meet high standards of conduct both inside professional practice and outside in their personal lives. The Tribunal also had regard to paragraphs 55(c) and 56(b) of the Sanctions Guidance which identify discrimination as a particularly serious form of misconduct.

19. The Tribunal noted that despite the significant period of time that has passed since the events in question, Mr Sen has failed to engage in any process of remediation.

20. It is regrettable that, due to Mr Sen's absence from these proceedings, the Tribunal does not have clarity regarding XXX or any other difficulties he may have been experiencing at the time of these events. The Tribunal also notes that the Facebook comments were made during a period of particularly heightened tensions arising from international events.

21. Whilst the Tribunal acknowledged these matters, it did not consider that Mr Sen's personal issues, and any other circumstances which may have led to his misconduct, diminished the seriousness of his actions.

22. Having balanced the aggravating and mitigating features identified in this case, the Tribunal determined that the aggravating features were of more consequence. It bore in mind all the aggravating and mitigating factors throughout its deliberations as regards the appropriate and proportionate sanction. The Tribunal accepted the submissions of Mr Grundy on behalf of the GMC, in particular that the gravity of the offensive postings is towards the upper end of the spectrum of discriminatory and hostile remarks towards another race.

23. The Tribunal considered each sanction in ascending order of severity, starting with the least restrictive.

No action

24. The Tribunal first considered whether to conclude the case by taking no action. It noted that taking no action following a finding of impaired fitness to practise would only be appropriate in exceptional circumstances.

25. The Tribunal was satisfied that there were no exceptional circumstances in Mr Sen's case which could justify it taking no action. Further the Tribunal considered that concluding the case by taking no action would be insufficient to protect the public and would not mark the seriousness of Mr Sen's conduct.

Conditions

26. The Tribunal next considered whether to impose conditions on Mr Sen's registration. It bore in mind that any conditions imposed would need to be appropriate, proportionate, workable, and measurable. In the light of its findings, the Tribunal determined that it would not be possible to formulate conditions, in particular because Mr Sen's conduct did not occur in a work setting. In any event, the Tribunal concluded that a period of conditional registration would not be a sufficient, appropriate, or proportionate sanction to satisfy the wider public interest.

Suspension

27. The Tribunal had regard to its findings in respect of misconduct and impairment, as well as the aggravating and mitigating factors listed above. It considered the paragraphs of the SG in relation to suspension, including:

“91. Suspension has a deterrent effect and can be used to send out a signal to the doctor, the profession and public about what is regarded as behaviour unbefitting a registered doctor. Suspension from the medical register also has a punitive effect, in that it prevents the doctor from practising (and therefore from earning a living as a doctor) during the suspension, although this is not its intention.

92. Suspension will be an appropriate response to misconduct that is so serious that action must be taken to protect members of the public and maintain public confidence in the profession. A period of suspension will be appropriate for conduct that is serious but falls short of being fundamentally incompatible with continued registration (ie for which erasure is more likely to be the appropriate sanction because the tribunal considers that the doctor should not practise again either for public safety reasons or to protect the reputation of the profession).

93. Suspension may be appropriate, for example, where there may have been acknowledgement of fault and where the tribunal is satisfied that the behaviour or incident is unlikely to be repeated. The tribunal may wish to see evidence that the doctor has taken steps to mitigate their actions.”

28. The Tribunal also had regard to the following sections of paragraph 97 of the SG:

“Some or all of the following factors being present (this list is not exhaustive) would indicate suspension may be appropriate:

a. A serious breach of Good medical practice, but where the doctor’s misconduct is not fundamentally incompatible with their continued registration, therefore complete removal from the medical register would not be in the public interest. However, the breach is serious enough that any sanction lower than a suspension would not be sufficient to protect the public or maintain confidence in doctors.

...

e. No evidence that demonstrates remediation is unlikely to be successful, eg because of previous unsuccessful attempts or a doctor’s unwillingness to engage.

f. No evidence of repetition of similar behaviour since incident.

g. The tribunal is satisfied the doctor has insight and does not pose a significant risk of repeating behaviour.”

29. The Tribunal considered that Mr Sen’s misconduct is fundamentally incompatible with his continued registration in particular because of his unwillingness to engage, the likelihood that remediation would be unsuccessful and because he does pose a significant risk of repetition. It was a serious breach of Good Medical Practice and was clear that any sanction lower than suspension would not be sufficient. It took into account that suspension can have a deterrent effect and may be used to send out a signal to the doctor, the profession and the public about behaviour regarded as unbecoming a registered doctor.

30. The Tribunal having found there to have been no remediation or demonstration of insight, could not be satisfied that a suspension order would have the effect of discouraging Mr Sen from committing similar misconduct in the future.

31. In light of these findings, the Tribunal considered it was not satisfied that a suspension order would adequately protect public confidence in the profession or meet the overarching objective of protecting the public.

Erasure

32. Having concluded that Mr Sen’s misconduct and caution for a criminal offence are fundamentally incompatible with continued registration, the Tribunal nonetheless went on to consider whether the sanction of erasure was appropriate and proportionate.

33. The Tribunal had regard to paragraphs 108, 109 (a), (b), (d), and (j) and 139, 140 and 141 of the SG and considered they were particularly relevant in Mr Sen’s case:

‘108 Erasure may be appropriate even where the doctor does not present a risk to patient safety, but where this action is necessary to maintain public confidence in the profession. For example, if a doctor has shown a blatant disregard for the safeguards designed to protect members of the public and maintain high standards within the profession that is incompatible with continued registration as a doctor.

109 Any of the following factors being present may indicate erasure is appropriate (this list is not exhaustive).

a. A particularly serious departure from the principles set out in Good medical practice where the behaviour is difficult to remediate.

b. A deliberate or reckless disregard for the principles set out in Good medical practice and/or patient safety.

....

d. Abuse of position/trust (see Good medical practice, paragraph 65: ‘You must make sure that your conduct justifies your patients’ trust in you and the public’s trust in the profession’).

.....

J. Persistent lack of insight into the seriousness of their actions or the consequences.

139 *Doctors must treat their colleagues and patients fairly, whatever their actions, choices and beliefs...*

140 *Discrimination undermines public confidence in doctors and has the potential to pose a serious risk to patient safety. This includes views about a patient’s or colleague’s lifestyle, culture, or their social or economic status, as well as the characteristics covered by equality legislation...*

141 *More serious outcomes are likely to be appropriate where a case involves discrimination (as defined by equality legislation) against patients, colleagues or other people who share protected characteristics, either within or outside their professional life. This does not affect a doctor’s right to opt out of providing a particular procedure because of their personal beliefs or values, as long as this does not result in direct or indirect discrimination against, or harassment of, individual patients or groups of patients...’*

34. The Tribunal noted that alongside Mr Sen’s non-engagement in these proceedings, he has shown a disregard for the importance of public confidence in the profession, and the upholding of professional standards and the reputation of the profession. In the recent August 2025 telephone conversation with the GMC, he is reported to have said ‘*he understood [that the GMC would apply for the hearing to proceed in his absence] and to go ahead and ‘Good Luck.’*

35. The Tribunal's determination regarding impairment, in particular at paragraphs 15, 23, 24, 25, 26, 27, 28 and 29 highlight the details of the gravity of the misconduct, the absence of remediation and the risk of repetition.

36. The Tribunal considered whether erasure was the appropriate sanction. It reminded itself that the question arises whether Mr Sen could be relied upon to treat patients who are Jewish in the same manner as he treats non-Jewish patients. The Tribunal considered that his comments demonstrated a deep-rooted hostility which raised a real concern about his ability to provide equality of care to all members of the public.

37. The Tribunal determined that it must send a clear message to both the public and the profession that conduct of this nature will not be condoned or allowed to take place without the most serious sanction. Having concluded that the lesser sanctions would not sufficiently meet the gravity of the matters found proved, the Tribunal determined that erasure, and only erasure, was the appropriate sanction. This was required not only to reflect the seriousness of the offences, but also to mark the disregard shown by Mr Sen towards the Tribunal process, the concerns expressed by the GMC, and the GMC's response to those concerns.

38. In the absence of any evidence of regret, insight or remediation, the Tribunal concluded that alternative sanctions were not appropriate. Mr Sen has disengaged from the process and given no indication that he has any awareness of the degree of hurt that such discriminatory beliefs are capable of causing to others. The Tribunal considered that it must ensure the public are protected from a doctor who holds such prejudicial views about another race.

39. The Tribunal determined that Mr Sen's views are wholly unacceptable and that the fact he chose to post them on a public forum placed all members of the public at risk of feeling discriminated against by the actions of a doctor. It further noted that while there is no previous history of such behaviour, the risk of repetition cannot be ensured through a lesser sanction such as suspension.

40. The Tribunal has therefore directed that Mr Sen's name be erased from the Medical Register.

Determination on Immediate Order - 25/09/2025

1. Having determined that erasure is appropriate, the Tribunal has considered, in accordance with Rule 17(2)(o) of the Rules, whether Mr Sen's registration should be subject to an immediate order.

Submissions

2. On behalf of the GMC, Mr Grundy submitted that given the facts found proved in this case and the sanction imposed, an immediate order of suspension is necessary in order to promote and maintain public confidence in the profession and to promote and maintain proper professional standards and conduct.

3. Mr Grundy referred the Tribunal to various paragraphs of the SG including paragraphs 172, 173 and 178:

'172 The tribunal may impose an immediate order if it determines that it is necessary to protect members of the public, or is otherwise in the public interest, or is in the best interests of the doctor. The interests of the doctor include avoiding putting them in a position where they may come under pressure from patients, and/or may repeat the misconduct, particularly where this may also put them at risk of committing a criminal offence. Tribunals should balance these factors against other interests of the doctor, which may be to return to work pending the appeal, and against the wider public interest, which may require an immediate order.'

'173 An immediate order might be particularly appropriate in cases where the doctor poses a risk to patient safety. For example, where they have provided poor clinical care or abused a doctor's special position of trust, or where immediate action must be taken to protect public confidence in the medical profession.'

'178 Having considered the matter, the decision whether to impose an immediate order will be at the discretion of the tribunal based on the facts of each case. The tribunal should consider the seriousness of the matter that led to the substantive direction being made and whether it is appropriate for the doctor to continue in unrestricted practice before the substantive order takes effect.'

The Tribunal's Determination

4. In reaching its decision, the Tribunal has exercised its own judgement and has taken account of the principle of proportionality. The Tribunal has borne in mind that it may impose an immediate order where it is satisfied that it is necessary for the protection of members of the public or otherwise in the public interest or is in the best interests of the practitioner.

5. It has also borne in mind the guidance given in paragraphs 110, 172, 173, and 178 of the SG, which states:

***110** If the tribunal decides that a doctor should be erased from the medical register, it must also consider whether to make an order to immediately suspend the doctor's registration, as required by rule 17(2)(o). The tribunal must take into account any evidence it has received and any submissions made by the parties before making and announcing its decision. Further guidance on when an immediate order might be appropriate is set out at paragraphs 172–178. '*

6. The Tribunal considered the seriousness of the facts found proved against Mr Sen. The Tribunal further balanced the interests of Mr Sen against those of the public.

7. The Tribunal bore in mind the above paragraphs of the SG and took account of the specific basis upon which the Tribunal reached its determination on impairment and sanction. The Tribunal determined that an immediate order of suspension is necessary to protect public confidence in the medical profession and is in the wider public interest.

8. This means that Mr Sen's registration will be suspended from the date on which notification of this decision is deemed to have been served upon him. The substantive direction, as already announced, will take effect 28 days from that date, unless an appeal is made in the interim. If an appeal is made, the immediate order will remain in force until the appeal has concluded.

9. That concludes the case.

ANNEX A – 22/09/2025

Application on Service & Proceeding in absence

Service:

1. Mr Sen is neither present nor legally represented at this hearing.
2. The Tribunal considered whether the relevant documents had been served on Mr Sen in accordance with the General Medical Council (Fitness to Practise Rules) 2004 (The Rules) and paragraph 8, Schedule 4 of the Medical Act 1983 as amended (“The Act”).
3. The Tribunal was provided with a copy of a service bundle from the General Medical Council (GMC). The bundle included:
 - A screen shot of Mr Sen’s registered postal and email address;
 - Rule 34(9) letter and Notice of Allegation letter and the hearing bundle, dated 24 July 2025 sent by Special Delivery and by email on 19 August 2025;
 - Proof of delivery of Rule 34(9) letter and Notice of Allegation sent by special delivery;
 - MPTS Notice of Hearing letter sent 3 July 2025 and 21 August 2025;
 - Note of telephone conversation between GMC and Mr Sen dated 13 August 2025 in which he confirms his knowledge of the hearing date
 - Proof of Delivery of Notice of Hearing sent by special delivery, First class Royal Mail, and Speed Courier;
 - Email from Mr Sen acknowledging receipt of the Notice of Hearing, dated 21 August 2025.
4. Mr Nigel Grundy, Counsel, on behalf of the GMC, submitted that notice of the hearing has been served in accordance with the Rules. He submitted that the MPTS Notice of hearing was sent to Mr Sen on 3 July 2025 and 21 August 2025 and the GMC Rule 34(9) correspondence was sent to him on 24 July 2025 by Special Delivery and by email on 19 August 2025. Mr Grundy submitted that there is acknowledgement from Mr Sen to this correspondence.

5. In the circumstances, the Tribunal was satisfied that notice of this hearing has been served in accordance with the relevant provisions. The Tribunal went on to consider whether to proceed in Mr Sen's absence pursuant to Rule 31 of the Rules.

Proceeding in Mr Sen's absence

6. Mr Grundy reminded the Tribunal that the discretion to proceed in the absence of a doctor should be exercised with the utmost care and caution, balancing fairness to the doctor with the wider public interest, namely the timely and expeditious consideration of regulatory matters.

7. Mr Grundy directed the Tribunal to a telephone note of a telephone call which took place on 13 August 2025 at 12:08 between Mr Sen and the GMC:

'[Ms F] asked Mr Sen if he had received previous correspondence about the allegation and the hearing. Mr Sen confirmed that he had, and that mail still comes to him but that he has a redirect in place for post.'

'[Ms F] asked if Mr Sen would want to postpone the hearing, participate in another way such as have someone participate on his behalf like a representative. Mr Sen said no, he has no wish to participate in the proceedings, he was just calling to spare [Ms F] the trouble of finding him again.'

'[Ms F] asked Mr Sen to clarify that he appeared to be saying that he did not want to participate in the hearing at all. Mr Sen agreed and said he does not want to participate and that he is not practicing medicine in any country in any capacity.'

8. Mr Grundy invited the Tribunal to proceed in Mr Sen's absence. He submitted that all reasonable efforts have been made to serve Mr Sen with notice of the hearing. He submitted that Mr Sen is aware of these proceedings and has chosen not to attend or instruct someone else to attend on his behalf. He submitted that Mr Sen has voluntarily absented himself from this hearing and that there is no evidence that an adjournment would secure his attendance in the future.

The Tribunal's decision

9. The Tribunal had regard to the Rule 31, the statutory overarching objective and the relevant caselaw, namely, the cases of *R v Jones [2001] QB 862*, ("*Jones*"), and *GMC v Adeogba [2016] EWCA Civ 162*, ("*Adeogba*").

10. The Tribunal carefully balanced Mr Sen's interests with the public interest in deciding whether to proceed in his absence.

11. The Tribunal bore in mind that the notice of hearing was properly served on Mr Sen and that he acknowledged correspondence from the GMC and MPTS in relation to the hearing.

12. The Tribunal determined, having taken account of the telephone note of 13 August 2025, that Mr Sen has voluntarily waived his right to attend the hearing. He has not requested an adjournment, and there is no information to suggest that a short adjournment will secure his attendance at a date in the future. The Tribunal determined that given the concerns in this case, there is strong public interest in the hearing proceeding expeditiously.

13. Accordingly, the Tribunal determined that it was fair and appropriate to proceed in Mr Sen's absence in accordance with Rule 31 of the Rules.

SCHEDULE 1

Comment
'Die Juden sind unsere Unglück.' [Translation: The Jews are our misfortune]
'Jewish cunt'
'Hope they hound you out from wherever you are Jewboy. Like they kicked you out of Presidency.'
'Jewboy'
'When dealing with circumcised vermin like you, not even the strongest measures will help.'
'Cunt. Vermin.'
'You have brought out the best in me. Jews do that over the centuries.'
'If you read carefullx [sic] it is the Jewish rodent who started personal attack on me. Judge carefully or don't judge at all. I am regretful enough rats were nor [sic] liquidated at Auschwitz. Good thing he is no longer in a respectful plsce [sic] like India. He belongs in the flames of a crematorium.'
'I was merely responding to his comments. Such rats do not beling [sic] ti [sic] society.'