

SPSO decision report

Case: 201301378, Lothian NHS Board
Sector: health
Subject: clinical treatment / diagnosis
Outcome: some upheld, recommendations

Summary

Mr C complained about the board's treatment of his wife (Mrs C) when she was admitted to the Royal Infirmary of Edinburgh. Mrs C, who had a history of severe renal (kidney) failure, had hip replacement surgery and was kept in for five days. During that time she experienced constipation and although she asked staff for laxatives, these were not provided before she was discharged home. Mrs C continued to suffer from constipation there. She developed a sore, swollen stomach and began vomiting black liquid. Concerned about her condition, Mr C phoned NHS 24 and requested a home visit from an out-of-hours GP. The GP examined Mrs C and prescribed two enemas and laxatives. He advised Mr C to monitor her overnight and to call Mrs C's own GP in the morning if she did not improve. As she did not improve, Mr C called the GP, who examined her and immediately referred her to hospital, where she was diagnosed with a perforated bowel and had emergency surgery. Mr C complained that this could have been avoided had his wife been given laxatives in the hospital and had the out-of-hours GP recognised the seriousness of her condition.

We upheld the complaint about Mrs C's hospital treatment, as we found that that staff clearly failed to provide her with laxatives during her admission, despite her requests. We accepted independent medical advice that patients with renal failure are particularly sensitive to medications and their side effects, noting that Mrs C was on pain medication containing codeine, which is known to cause constipation. Staff should have been aware of the increased risk of constipation and should have closely monitored her for this. Although tools were available to prompt them to ask patients about their bowel movements, staff did not use these and Mrs C was discharged without a proper assessment of her bowel activity. We did not, however, uphold the complaint about the out-of-hour GP's examination of Mrs C, as we found that medical records showed that her symptoms at the time did not suggest a perforated bowel. As such, the treatment provided and the advice offered was entirely reasonable under the circumstances.

Recommendations

We recommended that the board:

- apologise to Mr and Mrs C for failing to implement the safeguards that they had in place to identify and manage constipation during Mrs C's admission; and
- conduct a review to assess whether their post-operative care pathway and patient information are sufficiently rigorous, particularly for patients with renal failure.