## **SPSO decision report**



Case:	201402226, Greater Glasgow and Clyde NHS Board - Acute Services Division
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	not upheld, no recommendations

## Summary

Mr C complained that the board failed to monitor the steroid treatment he was receiving for his chest condition and its consequences. He said the lack of monitoring systems in place resulted in him developing cataracts; his adrenal glands (two small hormone secreting glands, one located above each kidney) no longer functioning; and in him developing osteoporosis (a condition that affects the bones, causing them to become fragile and more likely to break). Mr C also complained that when he emailed the board three questions about the side effects of steroids, the points he raised were never answered.

We obtained independent advice on the case from our medical adviser, a consultant in respiratory and general medicine. Our adviser said the information available suggested that the steroid treatment Mr C received was in line with both formal guidelines and established clinical practice throughout the UK. He explained that there was no universal agreement as to whether, or how, to monitor patients who were receiving steroids for bone loss and said the guidelines indicated that it was only when courses of treatment lasted three months or more that any form of osteoporosis screening or treatment needed to be considered. In Mr C's case, it appeared that his steroid was prescribed in short courses, suggesting that monitoring was not required.

Our adviser said he was not aware of any guidelines which suggested that monitoring for adrenal suppression (where the adrenal glands do not produce adequate amounts of steroid hormones) or cataracts was a necessary component of steroid therapy for adults. He also said it was not usual practice to screen patients with Mr C's chest condition needing short course steroid treatment for cataracts.

In terms of Mr C's three questions to the board, they acknowledged that osteoporosis, cataracts and adrenal suppression were known side effects of steroid therapy. They explained their policy on screening/monitoring for osteoporosis and adrenal suppression. While we feel the board could have commented on screening/monitoring for cataracts, on balance, we considered their response covered the main points in Mr C's email.