

SPSO decision report



Case: 202110356, Greater Glasgow and Clyde NHS Board - Acute Services Division
Sector: Health
Subject: Clinical treatment / diagnosis
Decision: not upheld, no recommendations

Summary

C complained about treatment they received in relation to an alleged failure to promptly identify and treat developing symptoms of cauda equina syndrome (CES, compression of the nerve roots in the lower back affecting various neurological functions). C was initially admitted to hospital within another health board area before being discharged the following day on the basis that there was no evidence of CES at that time. However, C re-presented to the emergency department at the same hospital four days later with new symptoms thought to be CES. On the basis of advice provided by NHS Greater Glasgow and Clyde's neurosurgical department at the Queen Elizabeth University Hospital (QEUE) to clinicians at the health board, C was fasted and underwent an MRI scan the following morning, which showed a large disc protrusion compressing the cauda equina nerve roots. C was thereafter taken by emergency ambulance to the QEUE where they underwent surgery the same day.

In order to investigate the neurosurgical advice provided by NHS Greater Glasgow and Clyde to the other health board, we took independent advice from a consultant neurosurgeon. We found that the advice provided had been reasonable given that it was well accepted practice that surgery to decompress the cauda equina nerve roots should be performed within 24-48 hours of a patient presenting to hospital, which had occurred in this case. Therefore, we did not uphold C's complaint.