

**Case 200701335: Lothian NHS Board**

**Summary of Investigation**

***Category***

Health: Hospital

***Overview***

The complainant (Mrs C) was concerned that she had not been offered appropriate treatment when she was seen by a doctor (Doctor 1) during an out-patient appointment at the Western General Hospital.

***Specific complaint and conclusion***

The complaint which has been investigated is that Doctor 1 failed to provide Mrs C with appropriate treatment (*not upheld*).

***Redress and recommendation***

The Ombudsman has no recommendations to make.

## **Main Investigation Report**

### **Introduction**

1. On 22 August 2007, the Ombudsman received a complaint from a woman, referred to in this report as Mrs C, who was concerned that a doctor (Doctor 1) she saw when attending an out-patient appointment at the Western General Hospital (the Hospital) failed to offer her appropriate treatment for an anal fissure (an ulcer or a tear in the skin at the margin of the anus).

2. The complaint from Mrs C which I have investigated is that Doctor 1 failed to provide Mrs C with appropriate treatment.

### **Investigation**

3. The investigation of this complaint involved obtaining and reading all the correspondence between Mrs C and Lothian NHS Board (the Board) and obtaining copies of Mrs C's clinical records. I also sought the advice of one of the Ombudsman's medical advisers (the Adviser). I have not included in this report every detail investigated but I am satisfied that no matter of significance has been overlooked. Mrs C and the Board were given an opportunity to comment on a draft of this report.

### **Complaint: Doctor 1 failed to provide Mrs C with appropriate treatment**

4. Mrs C was concerned that when she saw Doctor 1 during an out-patient appointment on 16 April 2007, he did not offer her any surgery for her anal fissure and simply referred her back to her GP. Mrs C subsequently wrote to another doctor (Doctor 2) at the Hospital requesting surgery to have a skin tag removed (this is where a tag of skin protruding from the anus is removed). Although Doctor 2 put Mrs C on a waiting list, she decided to seek private treatment as she felt she had already waited long enough to see Doctor 1 and her condition was causing her distress. The doctor who saw Mrs C privately (Doctor 3) decided that she should have V-Y advancement flap surgery (where skin at the edge of a fissure is cut in a Y shape and the triangle of skin created by this Y shape incision is then advanced to make a V-shaped wound). Mrs C believed that she should have been offered surgical treatment by Doctor 1 and she felt that the Board should reimburse her the cost of the private treatment she went on to obtain.

5. I asked the Adviser for his comments on the complaint and, particularly, for his view on whether the actions of Doctor 1 had been reasonable. His advice,

based on his analysis of the clinical records, is summarised at paragraphs 6 to 12 below.

6. An anal fissure is an ulcer, or tear, in the skin at the margin of the anus. They can be acutely painful, particularly after defecation. In general, anal fissures are divided into acute and chronic. Fissures persisting for longer than four weeks are generally defined as chronic. Acute fissures often heal spontaneously.

7. There are a variety of treatments possible for chronic anal fissures and these can be divided into non-surgical treatment (topical medicine, such as a cream, applied to the anus) and surgical (for example, the procedures referred to in paragraph 4 above).

8. When Mrs C was first seen in the out-patient clinic by Doctor 1, her anal fissure had healed. It was, therefore, entirely appropriate for Doctor 1 to recommend that no surgical treatment should occur.

9. When Mrs C wrote to Doctor 2, it was reasonable for him to put her on a waiting list for skin tag removal even though Doctor 2 correctly advised Mrs C that this surgery might not improve her symptoms. Indeed, surgery to remove Mrs C's skin tag would not have resulted in any reduction in the likelihood that her anal fissure would recur.

10. When Mrs C sought private treatment, she was given V-Y advancement flap surgery which aimed to prevent the recurrence of her fissure. Relevant medical guidelines show that this particular surgery is a possible alternative to the surgical treatment of choice for anal fissures (which is the division of the muscular sphincters inside the anus). However, the V-Y advancement flap surgery is of unknown effectiveness, is not a proven procedure and lacks a clinical evidence-base.

11. Therefore, it was right that Mrs C was treated conservatively by Doctor 1 given that he found the anal fissure had healed when he saw her as an out-patient. His decision was in accordance with all current accepted surgical knowledge and guidelines. Mrs C was subsequently placed on a waiting list for removal of her skin tag at her request and, although this was a reasonable course of action, there was no clinical need for this to be performed urgently.

The waiting times that Mrs C would have faced fell within accepted practice within the NHS at the time.

12. Overall, therefore, the treatment Mrs C received at the Hospital was reasonable.

#### *Conclusion*

13. In light of the Adviser's very clear advice, which I accept, I find that Doctor 1 acted reasonably by not offering Mrs C any surgical treatment when he saw her as an out-patient on 16 April 2007.

14. While I can appreciate that Mrs C was very distressed by her condition and wished to have surgery, I am satisfied that Doctor 1's actions were clinically appropriate and were a reasonable response to the condition that Mrs C presented with at the time.

15. I am also satisfied that, although not necessary, it was reasonable for Doctor 2 to place Mrs C on a waiting list for skin tag removal.

16. Finally, I consider that, although Mrs C went on to have a different treatment carried out privately, this does not call into question the actions of Doctor 1. As noted above, his actions were reasonable in the circumstances.

17. In light of my comments above, I do not uphold this complaint.

**Explanation of abbreviations used**

Mrs C	The complainant
Doctor 1	The doctor who saw Mrs C at an out-patient appointment on 16 April 2007
The Hospital	Western General Hospital
The Board	Lothian NHS Board
The Adviser	One of the Ombudsman's medical advisers
Doctor 2	Another doctor at the Hospital
Doctor 3	A doctor who saw Mrs C privately

**Glossary of terms**

Anal fissure	An ulcer, or tear, in the skin at the margin of the anus
Skin tag removal surgery	Surgery to remove a tag of skin protruding from the anus
V-Y advancement flap surgery	Surgery where the skin at the edge of an anal fissure is cut in a Y shape and the triangle of skin created by this Y shape is then advanced to make a V-shaped wound