

Scottish Parliament Region: Central Scotland

Case 200703087: Lanarkshire NHS Board

Summary of Investigation

Category

Health: Hospital; Oncology

Overview

The complainant (Mrs C) raised a number of concerns about the treatment she received at Wishaw General Hospital after she was diagnosed with cancer in 2006.

Specific complaint and conclusion

The complaint which has been investigated is that a consultant inappropriately told Mrs C that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured', in a letter dated 16 March 2006. Mrs C subsequently had a recurrence of the cancer (*upheld*).

Redress and recommendations

The Ombudsman recommends that Lanarkshire NHS Board (the Board) apologise to Mrs C for inappropriately telling her that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured'.

The Board have accepted the recommendation and will act on it accordingly.

Main Investigation Report

Introduction

1. The complainant (Mrs C) complained to the Ombudsman on 25 February 2008 about the treatment she received at Wishaw General Hospital (the Hospital) after she was diagnosed with cancer in 2006. She said that she considered that she was given the wrong information regarding her illness and that the staff involved did not listen to the concerns she raised.

2. The complaint from Mrs C which I have investigated is that a consultant inappropriately told her that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured', in a letter dated 16 March 2006. Mrs C subsequently had a recurrence of the cancer.

Investigation

3. Investigation of the complaint involved reviewing Mrs C's medical records relating to the events and Lanarkshire NHS Board (the Board)'s complaints file. I also sought the views of a medical adviser to the Ombudsman (the Adviser).

4. 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: A consultant inappropriately told Mrs C that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured', in a letter dated 16 March 2006. Mrs C subsequently had a recurrence of the cancer

5. Mrs C was seen at the Hospital in January 2006, as she had a history of post-menopausal vaginal bleeding. Tests were undertaken and these showed the presence of cancer of the lining of the womb.

6. A total abdominal hysterectomy was completed on 3 March 2006 with removal of the uterus, cervix, fallopian tubes and ovaries. No obvious abnormality was found outwith the uterus. Washings were taken from the pelvis and abdomen, but these did not show the presence of any cancer cells. The consultant gynaecologist (the Consultant) wrote to Mrs C's GP (the GP) on the day that the surgery was completed. He said that he was optimistic that the procedure would 'prove curative', but that he would be in touch once the

histology report was available to confirm whether any other treatment was necessary.

7. The Consultant wrote to the GP again on 16 March 2006. He said that the findings looked to him to be rather borderline as to whether any further treatment would be necessary. He said that he was sending the information to the multi-disciplinary team of the West of Scotland Managed Clinical Network for Gynaecological Cancer. This is an expert panel of consultant specialists in the provision of cancer care.

8. The Consultant also wrote to Mrs C on the same day. He said that the report had confirmed that the cancer was present and had spread a little way into the body of the womb. He said that he had provided this information to the experts to assess whether they thought that it would be advisable to carry out any further treatment. He said that he would let her know about this as soon as possible and that he had enclosed an appointment. He also stated that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured'. He said that it was just a matter of deciding whether any further treatment would be advisable to make quite sure that the problem did not come back again.

9. On 10 April 2006, the Consultant wrote to the GP and said that it had been decided that there was no need for any further treatment, but that he would keep Mrs C under review. Mrs C was admitted to the Hospital again on 23 November 2006. It was subsequently recorded that the results of a CT Scan were in keeping with a recurrence of cancer. Further tests in December 2006 confirmed the recurrence of cancer.

10. The Adviser said that overall, he considered that the standard of care offered was appropriate. He said that the multi-disciplinary team had been correctly involved at each relevant stage, but that this of course goes no way to detract from the very sad outcome of the case.

11. However, in relation to the complaint that the Consultant inappropriately told Mrs C that all the cancer had been removed and she was currently cured, the Adviser said that cancer is clearly a very emotive subject and any suggestion of cure is likely to be grasped by the patient. Although the Adviser said that the Consultant had a caveat in his letter regarding possible further treatment, the letter dated 10 April 2006 stating that this was not required would

perhaps have reinforced in Mrs C's mind that she was in fact cured. He said that he would advise that the word 'cure' is avoided and replaced by a statement to the effect that the outlook is extremely good, but there is always a small chance of tumour recurring.

12. I agree with the Adviser's comments and I asked the Board for their comments on the matter. They said that the matter had been discussed with the Consultant. He had commented that Mrs C was extremely anxious, and, in communicating the test results to her, he had endeavoured to use language that she would understand. This was why he had used the word, 'currently', although on reflection, the word, 'cure' was perhaps not the best to use. However, the Board said that it must be seen within the overall context of a very anxious patient and with the caveats that the Consultant then gave of not ruling out the need for any further treatment and the possibility of recurrence.

13. The Board also said that there is always a balance to be struck in clinicians' decisions around how information is conveyed to patients. They said that this must be tailored to what the clinician perceives to be the needs of the individual patient, but that the Consultant would certainly reflect on the Adviser's comments in his future communication with patients.

Conclusion

14. Effective and accurate communication with patients is an integral part of good healthcare. It would have been reasonable for Mrs C to think that her cancer had gone after receiving the letter from the Consultant in March 2006, however, there was subsequently a recurrence of the cancer. In cases such as this, clinical staff should avoid absolutes such as the word 'cured' and clearly explain that there is a chance of cancer recurring. The Consultant failed to manage Mrs C's expectations and inappropriately raised her hopes that her cancer was cured. I, therefore, uphold the complaint.

Recommendation

15. The Ombudsman recommends that the Board apologise to Mrs C for inappropriately telling her that, '[T]here is no doubt at all that all the cancer has been removed and currently you are cured'.

16. The Board have accepted the recommendation and will act on it accordingly. The Ombudsman asks that the Board notify her when the recommendation has been implemented.

Explanation of abbreviations used

Mrs C	The complainant
The Hospital	Wishaw General Hospital
The Board	Lanarkshire NHS Board
The Adviser	Medical adviser to the Ombudsman
The Consultant	The consultant gynaecologist
The GP	Mrs C's GP

Glossary of terms

CT Scan	A special radiographic technique that uses a computer to assimilate multiple x-ray images into a two dimensional cross-sectional image
Histology	The study of cells and tissue on the microscopic level