

Removal of ovarian cyst

Haigh v Lawson
(Unreported, 24 Feb 1998, District Court)
Richard Pincus, Sydney

The extent of and reasons for differing medical views as to the need for removal of a 7cm ovarian cyst, and the information a patient should be given was the subject of reports and extensive oral evidence. No curial determination required, as the matter settled. ■

Commonwealth outlines response to Mewett

The Commonwealth Government has announced that it will no longer rely upon s 44 of the Safety, Rehabilitation and Compensation Act 1988, which bars common law claims for injuries suffered while in the Commonwealth's employ. The decision is a response to the High Court's ruling in *Mewett v The Commonwealth*, which found that claims arising before 1 December 1988 were not barred. The decision affects remaining claims arising from the collision between HMAS Melbourne and Voyager. Such claims will be dealt with through the 1995 settlement scheme or through the courts. ■

Anyone with information on the following types of cases should contact their Medical Negligence SIG state representative:

NSW: Loss of opportunity to terminate pregnancy.

SA: Issue of whether or not a regional hospital had proper facilities and procedures to cope with an emergency which arose when an iliac artery was perforated in the course of a gynaecological laparoscopic procedure. The patient died as a result of lack of prompt and proper treatment being rendered.

SA: Issue of whether a vascular surgeon has the expertise to diagnose a condition from an angiogram. The diagnosis resulted in an incorrect operative procedure being performed.

Qld: At present there is a need for cardiac specialists based in Queensland to provide opinions in medical negligence matters.

SATURDAY, MARCH 28, 1998

Big jump in doctors who face discipline

By DEBRA JOPSON

The number of health professionals facing disciplinary action following formal complaints has more than doubled in the past three years, with doctors leading the field, the State Government's health consumer watchdog has revealed.

The things people complained about remained surprisingly constant from year to year, with the top complaint being incorrect treatment, followed by insensitive or rude communication and poor institutional practice, especially in hospitals.

Figures released this week show that last year the Health Care Complaints Commission (HCCC) found that supporting evidence for 198 complaints against health professionals was substantial enough to refer them to other bodies for disciplinary action. This compared with 90 in 1995.

Those health professionals – mainly general practitioners, specialists and nurses – faced disciplinary measures including suspension, having their practice restricted and undergoing clinical audits.

The number of complaints against doctors being referred on to three disciplinary bodies – the Medical Board, the Medical Professional Standards Committee and the Medical Tribunal – almost tripled over the three years from 56 to 152.

GPs accounted for the bulk of these referrals, jumping from 33 in 1995 to 126 last year.

The head of the HCCC, Ms Marilyn Walton, said the rise in substantiated complaints reflected an increased willingness by health professionals' peers to provide the criticism

necessary to refer cases to disciplinary boards.

"A few years ago we were seen as a doctor-bashing unit," she said. "Now there is a peer willingness to protect and maintain standards."

However, there were still cases where peers would not give the criticism needed for matters to be referred on for serious disciplinary charges, she said.

For instance, a lack of criticism from one doctor's peers in the case of a 49-kilogram woman with anorexia who had liposuction and then committed suicide meant the doctor would not face disciplinary action.

Last year, almost a quarter of the 1,696 complaints to the HCCC were against GPs, who were subject of more than half the 916 complaints against doctors.

She warned that an increase in complaints against GPs was likely because an oversupply of doctors and the pressured, competitive environment in many GP surgeries, which produced poor practice because of the tendency to keep consultations short.

"Lack of time leads to incorrect diagnosis, which leads to incorrect treatment," she said.

The second most complained about doctors last year were surgeons, followed by obstetricians and gynaecologists, physicians and psychiatrists. Ms Walton said that as sub-specialties increased, there was an increase in complaints about a lack of co-ordination of care when people were referred to several different specialists.

Last year there were 35 complaints about wrong or incorrect prescribing, 25 allegations of sexual assault and 67 of incorrect diagnosis.

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