SPSO decision report



Case:	201102992, A Medical Practice in the Grampian NHS Board area
Sector:	health
Subject:	clinical treatment / diagnosis
Outcome:	some upheld, recommendations

Summary

Mrs C complained about the treatment prescribed by her medical practice for fungal nail infection. In addition, Mrs C was unhappy with the practice's response to her complaint and with their view that she and her husband behaved inappropriately towards staff.

Mrs C has lupus (an autoimmune disease that causes inflammation in various parts of the body). She did not take the prescribed medication after reading on the information leaflet that it was potentially harmful to lupus sufferers, and complained that it had been inappropriately prescribed. Although Mrs C's prescription was subsequently changed, she said that the new course of treatment also had an adverse effect on her health.

As part of our investigation, we took independent advice from a medical adviser. He said that available treatments for fungal nail infection can have a number of side effects, interact with many other drugs and can cause reactions including impairment of liver function. The initial drug Mrs C was prescribed can cause a lupus type effect and the British National Formulary (BNF - national guidance for healthcare professionals regarding the prescribing of medicines) advises caution when prescribing it to patients who suffer from an autoimmune disease. Our adviser said that although the BNF does not advise against prescribing the drug, there was no record to suggest that the medical practice had considered Mrs C's medical history when prescribing it, nor did they note a follow-up plan or request blood tests.

We also found that there was no evidence to show that the medical practice considered any follow-up plan when prescribing the replacement treatment. The BNF recommends that if the treatment is prescribed for more than a month, liver function should be monitored. We noted that the blood tests taken from Mrs C after she complained of being unwell were only carried out as a result of her symptoms, rather than being planned at the time of prescribing.

We concluded that although it was reasonable for the practice to have prescribed both courses of treatment, their care of Mrs C was deficient because there was insufficient evidence to show that they had actively considered the impact on her condition or monitored the effects of the drugs.

We also identified that the practice's response to Mrs C's complaint lacked relevant information about the BNF advice, and upheld this complaint. However, we did not uphold the complaint about the allegation that she and her husband behaved inappropriately towards staff. This is because, due to a lack of independent witnesses, we were unable to know for certain whether the medical practice had acted inappropriately in saying this.

Recommendations

We recommended that the practice:

• apologise to Mrs C for failing to clearly discuss the possible risks and side effects when prescribing both drugs or to actively monitor her liver function; and

• remind relevant staff to ensure that all medicines prescribed are adequately recorded and the associated risks discussed with the patient are also noted.