

SPSO decision report

Case: 201802758, Highland NHS Board
Sector: Health
Subject: clinical treatment / diagnosis
Decision: not upheld, no recommendations

Summary

C was diagnosed with pleomorphic lobular carcinoma in situ (PLCIS, an uncommon condition in which abnormal cells form in the milk glands (lobules) in the breast). Following excision of the carcinoma, a programme of 15 radiotherapy treatments was undertaken by the board to reduce the risk of recurrence. Subsequently, C experienced breathlessness and an increase in phlegm. Clinicians initially felt this may be due to radiation pneumonitis (inflammation of the lung caused by radiation therapy) before a likely diagnosis of cryptogenic organising pneumonia (COP, a rare lung condition) was reached. A consultant oncologist (cancer specialist) told C's GP that COP was a rare toxicity of breast radiotherapy. C wrote to and met with the consultant oncologist to detail their concern that the fourth fraction of their radiotherapy had not been undertaken accurately. The consultant oncologist investigated the matter but did not consider there were any discrepancies or irregularities regarding C's positioning for radiotherapy. C complained to the board about these matters. The board's investigations did not indicate that their actions had been unreasonable and they advised C of this. C remained dissatisfied and brought their complaint to us.

We took independent advice from an appropriately qualified adviser. We found that the board had provided reasonable treatment to C and had taken steps to rectify the poor communication to C before we became involved with the complaint. We found evidence that it was reasonable to conclude that C was advised of alternative treatments to radiotherapy. We concluded that the board responded reasonably to C's complaint. We did not uphold C's complaints.