

**Case:** 201103609, A Medical Practice in the Greater Glasgow and Clyde NHS Board area

**Sector:** health

**Subject:** clinical treatment / diagnosis

**Outcome:** some upheld, recommendations

### Summary

Mr C and Mrs D complained about the care and treatment provided to their late mother (Mrs A) by her medical practice. Mrs A attended the practice in May 2011 complaining of pain over the previous four months. Her GP arranged a number of tests including a pelvic ultrasound scan, which was inconclusive.

In June and July, Mrs A continued to attend the practice complaining of pain. Her GP prescribed antidepressants, and medication for her spasms and pain. After further visits, the GP referred Mrs A for a routine surgical out-patient consultation in August. This referral was upgraded to an urgent priority following another GP consultation in September. Before she could attend her out-patient appointment, she was admitted to hospital by emergency services. She was diagnosed with pancreatic cancer after a scan, and died at the end of October.

Mr C and Mrs D complained that no follow-up action was taken following the inconclusive results of the pelvic scan and they believed that, given the severity of their mother's pain and the number of times she attended the practice, she should have been referred urgently to hospital for further investigation. They also said that the practice failed to prescribe pain relief within a reasonable time and they raised concerns that their mother was diagnosed with anxiety and depression. They said that anybody suffering pain of this severity would understandably be anxious and depressed and felt that this distracted the practice from properly investigating the causes of her pain.

We found that although the practice could have been more proactive in searching for the cause for Mrs A's pain, the time taken to refer her was, on balance, reasonable particularly as there was no evidence of abnormalities available to the GP in August. We also found that although there may have been an over-emphasis on the psychological aspects of Mrs A's condition, the

suggestion that she was suffering from anxiety and depression was not in itself inappropriate. We did not uphold either of these complaints. However, we found that while the practice attempted to manage Mrs A's pain, pain relief was prescribed relatively late and we upheld the complaint about this.

### **Recommendations**

We recommended that the practice:

- review the management of this case in light of our findings; and
- apologise to Mrs A's family.