

SPSO decision report

Case: 201201457, A Practice in the Borders NHS Board area
Sector: health
Subject: clinical treatment / diagnosis
Outcome: not upheld, no recommendations

Summary

Ms C complained that her medical practice had not provided her with reasonable care and treatment. She said that they had stopped prescribing medication that she had been on long term, asked her to attend for reviews at the practice and had not supplied her with a neck collar to address the symptoms of her dystonia (a condition which causes shaking, in Ms C's case of the neck muscles). She further complained that they had not re-referred her to the dystonia clinic and declined to issue a certificate to excuse her from appearing in court.

Our investigation, which included taking independent advice from a medical adviser who is a GP, found that the actions of the practice had been reasonable, and we did not uphold Ms C's complaints. We found that Ms C had been taking a high dose of Hormone Replacement Therapy (HRT) since a hysterectomy (surgical removal of the uterus) a number of years ago. Medical opinion is that long-term use of HRT carries serious health risks and our adviser thought it was reasonable for the practice to encourage Ms C to reduce the HRT with a view to stopping eventually. When she declined to do so and also declined to attend the practice for health reviews, we considered it reasonable for them to refuse to continue to prescribe the HRT.

Ms C was also taking diazepam (a tranquiliser) to treat her dystonia. Diazepam is an addictive drug and the practice tried to encourage Ms C to attend for reviews of her long-term use of it. Again Ms C was reluctant to do so and at times the practice, therefore, prescribed a reduced amount of it until she was reviewed. This also happened when her son abused her supply. Again we considered the actions of the practice to be reasonable.

On the matter of the neck collar, our adviser said that current medical opinion is that neck collars cause the muscles to weaken and waste away which is the opposite to what is required in a patient with dystonia. Ms C had been seen twice at the dystonia clinic, where the only treatment they were able to offer her was botox injections, which she had declined. The practice invited Ms C to come in and discuss this but she declined to attend. We took the view that in the circumstances it was reasonable for the practice not to supply a collar or to re-refer Ms C to the clinic.

Ms C had not been seen in person at the practice for some six months when she asked one of the GPs by phone to write her a certificate to excuse her from attending court. The GP said that he could not do so without seeing her but Ms C said she did not want to visit the practice. We found that it was, therefore, reasonable for them not to provide the certificate.