

## SPSO decision report

**Case:** 201302669, Borders NHS Board  
**Sector:** health  
**Subject:** clinical treatment / diagnosis  
**Outcome:** not upheld, recommendations

### Summary

Mrs C complained about the care and treatment she received in Borders General Hospital following an operation for an umbilical hernia (where fatty tissue or a part of the bowel pokes through into an area near the navel). She said that for a number of months afterwards she suffered problems with the stitches in her wound and the hospital did not deal with these adequately; she also said that she was wrongly told that the stitches used were dissolvable. English is not Mrs C's first language, and she told us that she has difficulty with it. Mrs C said she was also told that further surgical investigations could not be carried out at the time because she was pregnant and, as a result, she suffered worry and distress.

We took independent advice on this case from one of our medical advisers. The adviser explained that if stitches close to the skin are causing pain, they may be removed to prevent a breach in the skin and/or possible infection. Mrs C was, however, pregnant and it is accepted practice that non-urgent surgery should not be performed in the first three months of pregnancy. After that, as surgery carries an increased risk of premature labour and miscarriage it is still better to defer non-urgent procedures until after the baby is born. We accepted that the hospital had acted appropriately and in accordance with accepted medical practice when dealing with the problems with Mrs C's stitches. The evidence also showed that both dissolvable and non-dissolvable stitches had been used. It was unclear what, if any, allowances medical staff had made for the fact that English is not Mrs C's first language, and the board accepted that explanations may not have been communicated as clearly as they could have been. We could not reconcile the differing accounts of what the doctors say they told Mrs C and what Mrs C understood she was told. However, there was no evidence that Mrs C was given incorrect information. Although we did not uphold this complaint, we made a recommendation based on the board's acceptance that it was possible that explanations had not been clear due to language difficulties.

### Recommendations

We recommended that the board:

- remind the medical staff involved in Mrs C's care and treatment that consideration should be given to the use of the board's Interpretation and Translation Guidelines where a patient's first language is not English.