

SPSO decision report

Case: 202003195, Grampian NHS Board
Sector: Health
Subject: Clinical treatment / diagnosis
Decision: not upheld, no recommendations

Summary

C's parent (A) had been treated for kidney cancer and then developed cancer of the bladder. They were receiving dialysis three times a week. The GP practice in this case is managed by the board. A developed back pain and called out a GP, who prescribed dihydrocodeine (an opiate painkiller). They remained in pain the following day and called out another GP, who prescribed diazepam (a medicine used to treat anxiety) and told A to double the dose of dihydrocodeine. After increasing the dosage of dihydrocodeine A became drowsy and unresponsive. They were admitted to hospital and transferred to the Intensive Care Unit for dialysis but did not improve and died of multiple organ failure, and presumed ischaemic bowel disease (lack of blood flow to the intestine). Their death certificate also recorded end stage renal failure and a trial fibrillation (a heart condition that causes an irregular and often abnormally fast heart rate). C complained that A's GPs should not have prescribed these medications because of A's renal failure.

We took independent advice from a GP adviser. We found that each GP had assessed and treated A appropriately, taking into account their presenting symptoms and existing health concerns. We noted that A's treatment options were significantly limited by their renal failure. We found that it was appropriate to prescribe opiates, as pain control was the objective and A was due dialysis which would significantly reduce the risk of toxicity. We found that although the medications had a sedative effect, they did not cause A's subsequent death. We found some shortcomings in documentation but were satisfied that the board had addressed this matter. We found that the GP treatment provided to A was of a reasonable standard and therefore did not uphold this complaint.