

**Assessment and treatment of woman
diagnosed with bowel cancer; inadequate documentation
(03HDC11066, 6 July 2005)**

General practitioner ~ Constipation ~ Bowel cancer ~ Irritable bowel syndrome ~ Differential diagnosis ~ Investigations ~ Referral ~ Diagnosis ~ Ongoing symptoms ~ Self-medication ~ Family history ~ Documentation ~ Contemporaneous notes ~ Communication ~ Standard of care ~ Professional standards ~ Rights 4(1), 4(2)

The family of a 43-year-old woman complained about the standard of care provided by her GP when the woman died of an undiagnosed cancer. Over the 27 months preceding the eventual diagnosis, the woman had attended the GP's practice seeking relief for ongoing abdominal pain, discomfort, and chronic constipation. For the majority of that time, she had been prescribed medication to relieve irritable bowel syndrome (IBS), even though IBS is a "diagnosis of exclusion" which should be used only after investigation has ruled out other causes of constipation. The GP had made little or no effort to encourage the woman to undergo investigations to establish the cause of these symptoms, even though there was a known family history of bowel cancer.

It was clear that there was an ongoing problem, the cause of which needed to be identified. Treating the symptoms alone did not amount to management of the patient's condition. The GP should have been proactive in referring the woman for further investigation and encouraging her to undergo investigation when she was reluctant and trialling alternative treatment. Further, it was inappropriate to prescribe an antispasmodic drug to a patient with a longstanding history of unexplained constipation, in the absence of a clearly established diagnosis and appropriate investigations.

A patient's regular general practitioner is best placed to maintain the most complete record of the health problems of an individual under his or her care and to understand the individual's personal circumstances.

It was held that the GP breached Rights 4(1) and (2). She had not undertaken adequate and appropriate observations, and had failed to provide adequate and appropriate advice and prescribe adequate and appropriate medications. The GP's record-keeping was inadequate and she had added to the notes after diagnosis of the cancer was made at a hospital.

The GP was referred to the Director of Proceedings, who issued proceedings before the Medical Practitioners Disciplinary Tribunal and, on 31 August 2006, a charge of professional misconduct was upheld.

Link to Health Practitioners Disciplinary Tribunal decision:
<http://www.hpdt.org.nz/portals/0/med0515dfindingsanon.pdf>