

Code breached in management of endometriosis symptoms

21HDC00152

Deputy Health and Disability Commissioner Deborah James has found the rights of a woman were breached under the Code of Health and Disability Services Consumers' Rights (the Code) during the management of her endometriosis.

The woman, in her late twenties, requested a hysterectomy to relieve endometriosis symptoms that were significantly impacting on her life. She had two children and was certain she had completed her family. Her gynaecologist advised that her request required discussion at a multidisciplinary meeting (MDM) and consensus from different consultants. He also advised treatment with a Mirena¹ and a second laparoscopy. The woman sought a second opinion and underwent a hysterectomy.

Ms James found the gynaecologist breached the Code for not fully informing the woman of her available options | whakamōhio or enabling her to make an informed choice and give informed consent | whakaritenga mōu ake.

“Ensuring the patient was aware of the different options was very important, but it was also important that the gynaecologist gave sufficient weight to the woman’s wishes and preferred treatment option,” said Ms James.

“I am not satisfied that sufficient weighting was given by the gynaecologist to the wishes of the woman, who should have been at the centre of the decisions made about her care.”

She said the information provided to the woman about trialling the Mirena made it seem like it was a prerequisite to her case being presented at an MDM and subsequently to proceed to a hysterectomy. However, this was not the case.

In addition, there was no evidence to support the gynaecologist’s advice to the woman that her case required further discussion from the MDM and consensus from different consultants. Ms James also considered that the gynaecologist did not provide accurate answers to the woman’s questions about the outcome of the MDM.

“It appears that hysterectomy was an available option, irrespective of the need for MDM or consensus. In my view, this is the kind of information that a reasonable person in the woman’s circumstances would expect to receive, particularly as she specifically requested a hysterectomy,” said Ms James.

Ms James was also critical that the woman was not adequately informed of what procedures would occur during laparoscopy, but noted that this information is not included in the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) information sheet on laparoscopy.

¹ A T-shaped contraceptive device.

In her report, Ms James outlined several recommendations for the gynaecologist, including that he familiarise himself with the Medical Council of New Zealand's Good Medical Practice publication and statements on communication and consent, and that he consider writing to patients immediately following an MDM with a note stating what was discussed and recommended.

In addition, she recommended that RANZCOG consider reviewing the information sheet and guidance to practitioners for laparoscopic surgery.

RANZCOG has subsequently advised that its Women's Health Committee agree it should be standard practice for medical practitioners to inform women of the likely position they will be placed in during surgery, as part of consent process for their procedure and also inform women around the use of surgical instruments.

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Editor's notes

Please only use the photo provided with this media release. For any questions about the photo, please contact the communications team.

The full report of this case can be viewed on HDC's website - see HDC's '[Latest Decisions](#)'.

Names have been removed from the report to protect privacy of the individuals involved in this case.

The Commissioner will usually name providers and public hospitals found in breach of the Code unless it would not be in the public interest or would unfairly compromise the privacy interests of an individual provider or a consumer. More information for the media, including HDC's naming policy and why we don't comment on complaints, can be found on our website [here](#).

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