DMC/DC/F.14/Comp.2963/2/2020/ 10th September, 2020

**O R D E R**

The Delhi Medical Council through its Executive Committee examined a complaint of Shri Santosh Agarwal r/o Flat 6, First Floor, Richmond Park Society, Vasundhara Sector-6, Near Bhagwan Budh Chowk, Ghaziabad, Uttar Pradesh-201012 alleging medical negligence on the part of Dr. Ashish Srivastava of Dharmashila Hospital, Dharamshila Marg, Vasundhara Enclave, Near New Ashok Nagar, Metro Station, Delhi-110096, in the treatment of complainant’s mother Smt. Rukmani Devi

The Order of the Executive Committee dated 26th August, 2020 is reproduced herein below:-

The Executive Committee of the Delhi Medical Council examined a complaint of Shri Santosh Agarwal r/o Flat 6, First Floor, Richmond Park Society, Vasundhara Sector-6, Near Bhagwan Budh Chowk, Ghaziabad, Uttar Pradesh-201012 alleging medical negligence on the part of Dr. Ashish Srivastava of Dharmashila Hospital, Dharamshila Marg, Vasundhara Enclave, Near New Ashok Nagar, Metro Station, Delhi-110096, in the treatment of complainant’s mother Smt. Rukmani Devi(referred hereinafter as the patient).

The Executive Committee perused the complaint, joint written statement of Dr. Ashish Kumar Shrivastav Sr. Consultant Neurosurgery, Dr. Nitin Kumar Sharma Dy. Medical Superintendent of Dharmashila Hospital, copy of medical record from Dharmashila Hospital, and other documents on record.

The Executive Committee noted that as per the complaint a surgery of tumour was done in Jan-19 at AIIMS Hospital. A diagnosis of GBM Grade-4 tumour was made on the biopsy report. The tumour was successfully removed by 95% and advised for CT/RT by doctor. The patient was 100% ok as normal person, she was able to do all the activity as just like as healthy person. In the month of August, 2019 the patient started experiencing some memory loss and weakness. They went to Dharamshila Narayana Cancer Hospital, Delhi and met Dr. Ashish Srivastava (Sr. Surgeon) in OPD. He advised for MRI. In MRI report a tumour was found in left side of head. Dr. Ashish Srivastava suggested that patient was perfectly fit as she can speak, walk and understand everything except some memory loss and Dr. Ashish given assurance that if they do second surgery of patient for removal of tumour then the patient life can be saved. They admitted patient on 12th August, 2019 and next day surgery was done. After the surgery Doctor informed them they tried to remove the tumour, but tumour was very hard and rapped in veins, so it was not possible to remove. They removed the head bone flap. They also said that there was some blood loss during the operation and now they required 5 units of blood. They kept patient on ventilator for three days to control BP. When patient was shifted from OT to ICU, patient’s right side of body was paralyzed; also she was not speaking anything and couldn’t sit, stand or walk. They asked the doctors about this condition. They were informed that the patient has less chance of survival and advised them to take care of her at home after discharge and that this was very bad tumour in the head and acquired maximum area of head and no doctor can do anything in this case. After some time, a bump was formed on patient’s head. Doctor said that due to the tumour many parts of body will stop to work in body and nothing can be done. Also Doctor said that the patient’s survival was maximum 1 or 2 months. They took appointment in AIIMS Hospital Delhi and explain the incidence of second surgery to the doctor. They suggested them surgery for removal of tumour. The patient was hospitalized on 30th September, 2019 and after necessary investigation and diagnosis, surgery was done on 9th October, 2019 and the tumour was removed approximate 95% as confirmed by doctor and an artificial bone flap placed in head as original bone flap was destroyed by Dharamshila’s Doctor in second surgery. Complainant alleges that doctors tried to destroy life of a sr. citizen patient with willful wrong treatment and misguidance, just for making money. Dharamshila removed the bone flap of patient, even this should be kept in bone bank or other possible place where bone can be kept alive to fit again in its natural place, in future, but maybe they were not expecting that patient relatives will go to AIIMS hospital for further treatment. The patient became paralyzed and placed permanently on bed due to this line of treatment of doctors. Present condition of patient :- tumour is removed, and the head size is returning in shape and AIIMS doctors advice for RT/CT in oncology department. Due to wrong treatment of Dharamshila Hospital, patient can’t speak, and right part of body is not working. The patient and entire family facing lots of harassment physically, mentally and financially.

Dr. Ashish Kumar Shrivastav Sr. Consultant Neurosurgery and Dr. Nitin Kumar Sharma Dy. Medical Superintendent in the joint written statement averred that Smt. Rukmani Devi a 63 years old lady, had been operated at AIIMS in January, 2019 for a left frontotemporal biopsy-proven Gliobolastoma Multiforme, WHO grade IV. Despite the advice for radiotherapy and chemotherapy, she had not received any treatment after the first surgery. The patient was dyphasic at the time of discharge from AIIMS. She presented with progressive deterioration in mentation, forget fullness, inability to understand and talk relevantly. Later she became aphasic. The condition of the patient had been worsening progressively. On admission, she was conscious, dysphasic with right hemoplegia, power 2/5. She was haemodynamically stable with normal respiration. A MRI revealed large residual/recurrent tumour in the left frontotemporal area. Routine investigations were within normal limits. As the patient was deteriorating neurologically and had not received radiotherapy and chemotherapy after the first surgery, surgical intervention was offered. The family was counselled about the nature of the disease, the lesion itself, the need for surgery followed by radiotherapy and chemotherapy the pros and cons of surgical treatment the risks and complications in surgery including risk of life and the guarded prognosis. Informed consent was taken after explaining all of the above in simple terms and language to the attendants and her son, Mr. Santosh Agarwal. He gave consent along with the patient. Smt. Rukmani Devi was taken up for surgery on the 13th august, 2019. Re-exploratory craniotomy was done. However, the tumour was extremely vascular and only minimal decompression and biopsy could be achieved. The surgery had to be curtailed to prevent any untoward event due to excessive bleeding. Meticulous haemostasis was done and wound closed in layers. The bone flap was not replaced during the closure of the wound to allow for postoperative oedema. The family and attendant including Mr. Santosh Agarwal were apprised of the course of events during the surgery. They were unequivocally apprised of the fact that minimal decompression could be achieved due to bleeding from the tumour and fact that the bone flap had not been replaced to prevent the ill-effects of postoperative swelling. They were offered the option of either preserving the bone flap in the hospital for cranioplasty later or taking the bone flap themselves for safekeeping. They opted for the latter, and the bone flap was handed over to them (Recorded in the file, operation theatre records and operation note). The operation theatre has written record of Mr. Santosh Agarwal being handed over the bone flap, duly signed by him. The patient was kept in the ICU on a ventilator and recovered over the next few days. She was discharged on the 17th August 2019, in stable condition. She was conscious, dysphasic moving all 4 limbs albeit with right hemiparesis, haemodynamically stable with normal respiration, afebrile and a healthy wound. The patient was seen in the OPD for suture removal and advised radiotherapy and chemotherapy. The patient was admitted to AIIMS on the 30th Septmeber, 2019. She was operated on the 9th October, 2019 and further decompression carried out. However, as per the operative findings of the surgeon, the tumour had invaded major vessels of the left side of the brain, viz, internal carotid artery and middle cerebral artery, and was extending into the sella. The operation note from the AIIMS also reiterates the extremely vascular nature of the tumour. It clearly states that only decompression could be done. More importantly, it states that the left middle cerebral artery could not be preserved. The use of Floseal to control bleeding also implies that the tumour was very vascular. The tumour left behind was enchasing the ICA and extending to the sella. The patient had a high grade malignancy involving the left frontotemporal area causing dysphasia and right sided weakness. None of the facts were hidden from the patient’s son Mr. Santosh Agarwal during the hospital stay and thereafter. They were all recorded in the file and discharge summary. The bone flap was not destroyed, but handed over to Mr. Santosh Agarwal which he duly received. The operation note from AIIMS documents that the middle cerebral artery could not be preserved during the third surgery and the left internal carotid artery was encased by the tumour. This vascular compromise is the most likely cause for worsening of speech and dense right hemiplegia and not the surgery at Dharamshila Narayana Superspeciality Hospital from which she was discharged in stable condition. The residual tumour and postoperative oedema and ischemia/infarction from loss of middle cerebral artery blood supply produce a significant neurological deficit. The decision to limit the surgery due to blood loss before any untoward incident was a clinical decision taken by the surgeons and the anaesthesia team in the best interest of the patient to preserve life. The limitation in the procedure was due to this technical reason, and not due to negligence or lack of skill. The fact that she could undergo further decompression later at AIIMS does not reflect adversely on the procedure carried out at Dharamshila Narayana Hospital. It is well known that sometimes the blood supply of the tumour reduces after surgery and further decompression can be carried out at a later stage. The bone flap was not replaced after intracranial surgeries to prevent anticipated postoperative oedema harming the brain and this is a standard well established and recommended strategy and technique in neurosurgery. The bone flap so removed is usually implanted in the abdominal wall to keep it safe and sterile. At times it can be stored at the operation theatre/hospital or may be handed over to the family. If required later for cranioplasty, it is autoclaved and used. In this case, implanting it in the abdominal wall would have necessitated another incision entailing further bleeding, even if minor.

The Executive Committee observes that the patient Smt. Rukamani Devi 63years old Female was admitted at AIIMS in 11th January, 2019. She had a mass in left Fronto temporal area. She underwent first surgery at AIIMS on 17th January, 2019. Diagnosis of Glio blastoma (high grade cancer) was established at AIIMS. She was advised CT/RT. She was discharged from AIIMS on 19th January, 2019. The patient deteriorated in August 2019 (around 7 months after diagnosis), was taken to Dharamshila Narayan Cancer hospital with complaints of forgetfulness and dysphasia. A repeat MRI revealed recurrence of tumour. Second surgery was advised after admission on 12th August, 2019. She underwent second surgery on 13th August, 2019. After taking adequate informed consent, surgery was performed. During surgery it was not possible to remove tumour due to excessive bleeding. Brain was tense, hence bone flap was removed. Only biopsy was taken. In post-Op, patient had right hemipersis. She was discharged from hospital on 17th August, 2019. The patient was taken once again to AIIMS Delhi where she was advised re- operation. She underwent third surgery on 9.10.19 at AIIMS and was discharged on 15.10.19. The complaint alleges wrong treatment at Dharamshila cancer hospital leading to post op paralysis and removal of bone flap.

It is observed that the tumour was located in left fronto-temporal area of brain which control speech. She had Dysphasia prior to second surgery as well. That tumour could not be removed during second surgery due to excessive bleeding is well known in neurosurgical practice. The discharge summary of Dharamshila Hospital makes a mention that due to extreme vascularity tumour couldn’t be decompressed significantly. Tumour A HIGH GRADE Cancer is known to be very vascular at time and can pose problems of bleeding. In such situation taking Biopsy or subtotal removal is a standard treatment. It was a right decision taken at that state of surgery. Post operative neurological deficit is well known outcome in all brain operation for which an informed consent had been obtained. Bone flap was removed as a part of standard steps taken in such situation to compensate post op oedema, and bone flap was handed over to attendant, as per the OT notes dated 13th August, 2019 of Dharamshila Hospital. Further the same is also confirmed by a copy of an entry in the OT register submitted by the said hospital.

In light of the observations made herein-above, it is, therefore, the decision of the Executive Committee that prima-facie no case of medical negligence is made out on the part of Dr. Ashish Srivastava of Dharmashila Hospital, Dharamshila Marg, Vasundhara Enclave, Near New Ashok Nagar, Metro Station, Delhi-110096, in the treatment of complainant’s mother Smt. Rukmani Devi.

Complaint stand disposed.

Sd/: Sd/: Sd/:

(Dr. Arun Kumar Gupta) (Dr. Vinay Aggarwal) (Dr. Ajay Gambhir)

Chairman, Member, Member,

Executive Committee Executive Committee Executive Committee

Sd/: Sd/:

(Dr. Satendra Singh) (Dr. Daljit Singh)

Member Expert Member

Executive Committee Executive Committee

The Order of the Executive Committee dated 26th August, 2020 was confirmed by the Delhi Medical Council in its meeting held on 02nd September, 2020.

By the Order & in the name of Delhi Medical Council

(Dr. Girish Tyagi)

Secretary

Copy to:-

1. Shri Santosh Agarwal r/o Flat 6, First Floor, Richmond Park Society, Vasundhara Sector-6, Near Bhagwan Budh Chowk, Ghaziabad, Uttar Pradesh-201012.
2. Dr. Ashish Srivastava, Through Medical Superintendent, Dharmashila Hospital, Dharamshila Marg, Vasundhara Enclave, Near New Ashok Nagar, Metro Station, Delhi-110096.
3. Medical Superintendent Dharmashila Hospital, Dharamshila Marg, Vasundhara Enclave, Near New Ashok Nagar, Metro Station, Delhi-110096.

(Dr. Girish Tyagi)

Secretary