

## EDITORIAL

---

On the Christmas day of this year (2009), Prakanong provincial court judged that a famous private hospital, an obstetrician and a radiologist must pay compensation of 12 million baht due for carelessness, dereliction of duty care and violation to the accuser in case that both obstetrician and radiologist performed ultrasound to the accuser at 4-5 month of gestation and advised the result that her fetus was completely normal. But the male neonate congenitally lose his upper left and lower right extremities. Working as an obstetrician and gynecologist for 24 years, I have some opinions to share with the colleagues.

1. I think that physicians have been taught an important clause "There is no 100% in medicine" ever since they were medical students. So we must not confirm 100% complete normal for any condition.

2. My professor taught me many years ago that there were two important reasons leading to suing in the bad-outcome cases, especially in the obstetric cases, usually with normal or high expectation from their families. They are, firstly, the high expense they paid for treatment, and secondly, inappropriate communication between doctor and patient or doctor-patient relationship. Sometimes, even though poor medical outcomes occurred but the doctors had a very good communication with patients as well as their families, presents were given to the doctors instead of suing.

3. We must accept that this case was a kind of medical error but caused no harm because the baby already had its deformity in the womb without medical intervention.

Diagnostic errors from ultrasound examination might be caused from four factors

A) Operator's experience.

Nowadays, ultrasound machines were widely used in several areas of both government and private hospital, especially district hospital, because of their lower prices compared with the past decade. However the newly-graduated doctors had not been trained to use the machines in medical school. Usually they learned themselves or sometimes from their senior colleagues. So diagnostic error might occur from these low-experienced doctors

B) Quality of ultrasound machine

Even though the lower cost of ultrasound machine compared with the previous years, the more expensive machine usually produce the better image. Therefore error rate of the cheaper machine might be higher.

C) Time interval of the examination.

Time constraint is not a problem in foreign countries, especially in developed countries, because the doctors usually had 30-45 minutes for each obstetric ultrasound examination in the normal cases. But time constraint is a very important factor for such examination in Thailand, especially in some big government hospitals. Sometimes 30-40 pregnant women were examined within 3 hours, that means 5-6 minutes were used per case. The more patients they examine, the more chances they can make a mistake.

D) The maternal and fetal conditions.

Limitation of each machine must be known before starting examination. Ultrasound machine may give poorer image for the fat mothers and also for moving fetus.

4. I am not sure whether doctor fee of several hundred bahts for each ultrasound examination is fair enough for compensation of 12 million bahts, because the doctors did not produce these congenital deformities. They spontaneously occurred in the womb already.

I would like to ask all colleagues what would be the fairer doctor fee based on the 12 million baht sue. Professor Dr.Nares Sukcharoen wrote a very good special article "Medical error : An overview" in this journal on June 2003, Vol.15 pp. 63-8. You can download the full paper from our college's website "www.rtcog.or.th". I am afraid that this case is not the final sue case in Thailand, just like a classic sentence "History repeats itself, especially if we did not identify and correct the causes.

Ekachai Kovavisarach  
Editorial Board