

Deaths in England Due to Medical Errors up 500%

By Sarah Lyall

About 1,200 people died in public hospitals in Britain last year because of mistakes in prescribing and administering medicine, according to a report published by a government watchdog group.

Outlined in a report by the Audit Commission, the errors included administering the wrong medicine - in one case, a breast cancer patient was given the sleeping drug Temazepam instead of the cancer drug Tamoxifen - to giving out the wrong dosage of the right drug, to unknowingly prescribing a drug that caused a fatal reaction.

The death toll was five times higher than that in 1990, according to the report.

In addition, the thousands of patients who survive medicine-related mistakes each year invariably become sicker, requiring more treatment that create an extra expense for the National Health Service, the report said.

"The health service is probably spending \$725 million a year making better people who experienced an adverse incident or errors, and that does not include the human cost to patients," said Nick Mapstone, an author of the report.

Mr. Mapstone said that many of the most common errors are avoidable and could be rectified if the health service introduced computerized patient record and prescription systems.

As it is now, patients' notes are often illegible, incomplete or missing altogether, the report said, making it impossible for doctors and nurses to have accurate information.

The government has promised to introduce computerized prescriptions - which could include a standard national system for coding medicines and the use of bar codes to support development of electronic prescribing systems - by 2005, but Mr. Mapstone said he did not think it would meet the deadline.

Addressing the issues raised by the report, Dr. Trevor Pickersgill, a spokesman for the junior doctors' committee of the British Medical Association, said that understaffing in hospitals and the increasing complexity of modern drug therapy have created a culture "where mistakes unfortunately do happen."

"The number of drugs is increasing, the effectiveness - and therefore often the toxicity - of drugs is increasing, the number of people on multiple medications is increasing, and that increases the risk of interaction," Dr. Pickersgill told the BBC.

"We must also remember that one in six pharmacy posts in hospitals are unfilled, and new doctors who are doing the work on the wards are overworked as well," he said.

A number of highly publicized cases of drug-related error in recent months has brought home the problem. In one case, a cancer patient was prescribed and administered a drug at 1,000 times the recommended dose, according to the report.

In another case, at Queen's Medical Center in Nottingham, a teenager, who was a cancer patient in remission, fell into a coma and died after an anticancer drug was mistakenly injected into his spine.

"The recent events at Queen's Medical Center illustrate how day-to-day pressures can lead to acknowledged best practice being ignored," the report said.

Jackie Glatter, a spokeswoman for the Consumers' Association, which lobbies for patients' rights, said: "The report shows there is a strong need for detailed and clear patient information about treatments and medicines - not just in hospitals, but also when people are taking medicine at home."

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