

Lethal liver injury blamed on birth trauma

BECAUSE OF PREMATURE CONTRACTIONS and bleeding, a woman underwent cesarean delivery by her ObGyns. When Dr. A reached in to extract the fetus, it floated away. Dr. B then attempted delivery while Dr. A applied fundal pressure. Photographs of the

baby taken by the father 2 minutes after birth showed severe bruising over the liver area. Sonography performed shortly after birth revealed a liver laceration. Surgery to repair the liver was unsuccessful. The infant died.

- ▶ ESTATE'S CLAIM The trauma from improper fundal pressure and improper manipulation when extracting the infant through an inadequately sized incision caused the liver to rupture. A vertical incision should have been made initially, instead of a transverse incision, because of the small size of the fetus and uterus. When the fetus could not be extracted, a reverse "T" incision should have been made so the fetus could be extracted without trauma.
- ▶ PHYSICIANS' DEFENSE The mother had a preexisting disorder that caused bleeding before delivery; the liver laceration occurred hours before delivery.
- ▶ VERDICT A \$1,461,507 Maryland verdict was returned, including \$461,507 to the infant's estate, and \$500,000 to each parent.

Perforated colon after hysteroscopy

A 44-YEAR-OLD WOMAN UNDERWENT

hysteroscopic surgery to remove polyps and a fibroid tumor. During the procedure, the ObGyn used a hysteroscopic resection loop. Two days later, the patient developed peritonitis. A perforation was detected, requiring resection of part of the colon and a temporary colostomy.

► PATIENT'S CLAIM The injury occurred when the ObGyn pushed

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the resection loop of the hysteroscope through the uterus, burning a hole in the uterus and the colon. The ObGyn should have performed a more extensive check to ensure that no perforation had occurred.

- PHYSICIAN'S DEFENSE Perforation was a delayed thermal effect that did not occur until 2 days after the procedure. There was no negligence.
- ► VERDICT A \$1.55 million New York verdict was returned.

Did retractors cause neuropathy?

AFTER CERVICAL CANCER was diagnosed, a 37-year-old woman was referred to a gynecologic oncologist. He performed a modified radical hysterectomy with pelvic node dissection and lymphadenectomy. A Pfannenstiel incision was used, and the procedure involved removal of

the uterus, cervix, upper quarter of the vagina, pelvic lymph nodes, and surrounding tissue. Surgery lasted longer than 5 hours.

The next day, the patient reported pain, burning, tingling, and numbness in her left thigh, which was eventually diagnosed as lateral femoral cutaneous neuropathy. This condition did not resolve.

- PATIENT'S CLAIM The surgeon failed to reposition retractors with sufficient frequency. He allowed the retractor blades to press on the psoas muscles, thus injuring the lateral femoral cutaneous nerve.
- PHYSICIAN'S DEFENSE The retractors were used properly; they were periodically shifted to gain better exposure to the surgical area. The surgeon also used his hands to determine that the retractors were properly positioned.
- ▶ VERDICT An Illinois defense verdict was returned.

"I would have terminated my pregnancy if..."

A PREGNANT WOMAN UNDERWENT a blood test that indicated that the fetus had an elevated risk of being born with Down syndrome. The child was born 7 months later with Down syndrome.

- PATIENT'S CLAIM She was not told of the increased risk that her child would have Down syndrome. If she had been informed, she would have terminated the pregnancy.
- ▶ PHYSICIAN'S DEFENSE According to the physician's records, the mother was told the blood test results many times. Amniocentesis was recommended, but the mother had declined. ▶ VERDICT A Maryland defense verdict was returned. ②