

Doctor referred to GMC after inquiry into epilepsy diagnoses

Caroline White *London*

An independent review of the management of childhood epilepsy at Leicester Royal Infirmary has confirmed allegations of misdiagnosis and overtreatment against consultant paediatrician Dr Andrew Holton. The hospital has now referred the matter to the General Medical Council.

Since his appointment in 1990, Dr Holton has cared for just over 10 000 children, almost 2000 of whom he diagnosed as having epilepsy. So far, the case notes of 214 children have been examined in the three stage review, carried out by the Royal College of Paediatrics and Child Health Specialty Advisory Committee in Paediatric Neurology. Sixteen hundred cases remain to be reviewed.

Of the 214 cases, 171 gave definite or possible "cause for concern." Just over a third of the children were not thought to have had epilepsy, and just under a third were thought to have been overtreated. To date, the investigating team have managed to review in greater depth the diagnosis and treatment of only 45 of these children, but it has concluded that there is "some level of concern in approximately 80%."

The findings have prompted the regional director of public health for the Trent region, Professor Lindsey Davies, to announce a further review into how the situation had been allowed to develop at the hospital. This is expected to start within weeks and report within six months.

Dr Holton was suspended from his post in May after Dr Allan Cole, medical director of the newly merged University Hospitals of Leicester NHS Trust, said he had been "convinced that it was unsafe to leave [Dr Holton] in clinical practice." His decision followed a review of children's services by the newly appointed clinical director at the

hospital at the beginning of the year and mounting numbers of complaints from parents and clinicians, some of which are alleged to date back to 1995.

Dr Cole confirmed that informal discussions had been held with Dr Holton five years ago after concerns had been raised, but he denied that there had been evidence of a serious problem. An internal investigation two years ago, he said, had led medical management to devise various protocols to respond to con-

cerns, but no definitive time scale had been set for their implementation.

In a statement issued last week, Adrian Stevenson, chairman of the 3390 strong Leicestershire Epilepsy Concern Parents and Carers Group, demanded to know why Dr Holton's clinical practice had gone unmonitored and unchallenged for so long. "The failings are both clinical and systemic," he said. The group has called for an independent statutory inquiry, and 125 families are considering individual legal action against the trust.

Phil Underhill, a member of the group, said that Dr Holton had diagnosed epilepsy in his daughter when she was 2 years old and had continued treating her until she was 12.

"At one point, she was taking 36 tablets a day, including five types of anticonvulsants, and steroids," he said. "She couldn't walk unaided, and she could scarcely speak." Dr Holton resisted all requests for second opinions and reductions in drug dose, he said.

The independent review had

neurology, Dr Holton was not a specialist, of whom there are just 62 in the United Kingdom. The report also points to professional isolation and under-resourcing as important mitigating factors in Dr Holton's practice.

Dr Richard Newton, president of the British Paediatric Neurology Association and author of the report, said that epilepsy is difficult to diagnose accurately, which made it all the more important to have someone with whom to confer. He added: "It wasn't envisaged that Dr Holton would have as much work as he was asked to do, and as the years went by, he had more and more... There was an important systems failure in the NHS, which we need to look at closely because it has important implications for other paediatric services in other parts of the UK."

The trust has rejected the report's recommendation to reinstate Dr Holton after a minimum of six months' further professional development in paediatric neurology until it has completed a separate investigation into Dr Holton's behaviour towards parents. That investigation is due to begin shortly.

The trust has accepted, however, the need for a "robust paediatric neurology service in Leicester in the long term." It has advertised for another consultant paediatric neurologist.

At a press conference held last week, the trust chief executive, Peter Reading, said: "The trust fully accepts the findings of this report."

In a statement issued after the inquiry findings were released, Dr Holton said that his "one and only" aim had been to help the children, and that he had done this "to the best of his ability." He also went on to attack the lack of resources and support available to him.

"I can only apologise for my part in this," he said. □



Dr Richard Newton (left), Dr Peter Reading (centre), and Dr Allan Cole give the findings of the report on paediatrician Dr Andrew Holton at a press conference in Leicester