

**Review of dementia condition and medication regimen
(04HDC10605, 12 December 2005)**

*General practitioner ~ Private hospital ~ Gerontology ~ Dementia ~ Review ~
Referral to specialist ~ Multiple medical conditions ~ Right 4(1)*

An elderly woman was admitted to a public hospital with increasing leg weakness, vomiting and diarrhoea. She had a history of osteoarthritis, double knee joint replacements, a right hip joint replacement and a fractured femur. However, she had remained relatively mobile and was living independently with her husband. She also had a history of depression, heart failure and renal impairment, and was on anti-coagulation therapy.

While in the public hospital the woman received an occupational therapy assessment and was noted to have significant cognitive and physical difficulties, although she had no previous history of cognitive impairment. The following month, she was transferred to a private hospital for permanent residential care. The woman's daughter recalled that her mother became increasingly disorientated and depressed over the next two years. She was told that her mother had dementia. The woman continued to be treated by her general practitioner while at the private hospital, and was not referred for specialist assessment of her symptoms.

Two years later, she was transferred to another private hospital and her medications were adjusted following review by her new general practitioner. There was a marked improvement in her condition and the daughter complained that her mother may have been misdiagnosed with dementia and over-medicated while at the first private hospital.

It was held that the first general practitioner competently managed the woman's various medical conditions over a long period of time. Unfortunately, he made an unjustified assumption that the woman was suffering from dementia. His failure to more carefully assess and review her amounted to a breach of Right 4(1).