

## insidestory

political feature

# Dr Shame: who's to blame?

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gist and GP.

NSW Police Strike Force Tarella is investigating allegations of mutilation and abuse against Mr Reeves after former patient Carolyn Dewaegeneire went public with claims he removed her external genitalia during an operation in 2002 to excise a minor lesion from her labia.

The fall guys are the NSW Medical Board and the Health Care Complaints Commission (HCCC), both besieged by claims they didn't do enough to stop him.

The MEAG has guided the complainants to form a class action lawsuit against the board, the NSW Department of Health, and the Greater Southern Area Health Service (into which Mr Reeves' former employer, the Southern Area Health Service, was amalgamated in 2005).

There have also been calls to sue the medical board, which is unprecedented in Australia, and the case has been referred to the special commission of inquiry into NSW's health system.

## POINTING THE FINGER

So, who's to blame?

Could the board and the HCCC have done more, or are their powers so limited they are rendered almost useless at times like this?

patients of the former doctor, Graeme Reeves, over the past 33 years.

"I recognised the photo and name when I read the article in the Sunday paper. I felt repulsed.

"Instantly I thought: 'Could anything have happened to me?' I felt nauseated and was almost sick."

Jane, a registered nurse, believes she is one of the lucky ones. Although she now feels very vulnerable and has lost some trust in male doctors, she doesn't believe Mr Reeves' conduct with her was inappropriate.

But that doesn't stop her wondering.

There are some 500 women who have now lodged complaints with the Medical Error Action Group (MEAG) about Mr Reeves' conduct during his career as an obstetrician, gynaecolo-

gist and GP. ulty of medicine at Sydney University, explains that if someone contacts the medical board they'll be told the doctor has conditions, but not the details.

As in Mr Reeves' case when he applied for a job at Bega and Pambula hospitals (see box, opposite page), a letter from the board didn't reveal details of the Professional Standards Committee conditions that he not practise obstetrics.

"That's an interpretation of the law that they can't [disclose]," Professor Walton says. "I think it should be made legally clear that they are obliged to do that."

But she points out that responsibility should also be taken by prospective employers: "Hospitals should be obliged to check every time they employ someone."

She adds that if the Southern Area Health Service had asked for more detail about Mr Reeves' registration conditions, the medical board would probably have told them.

The NSW Medical Board won't comment on the case, except to point out that prior to a change in the Medical Practice Act in 2005, boards had no statutory power to independently notify subsequent employers of conditions or orders.

The board added that information on a doctor's registration status has always been available on request.

## HOW THE SYSTEM WORKS

AUSTRALIA'S medical regulatory system is a multifactorial one based on peer review.

Professional Standards Committees (PSCs) are formed by medical boards and are largely made up of doctors.

A PSC has a number of powers and can impose conditions on a medical practitioner's registration, but it can't deregister a doctor.

The medical tribunal, which includes a district court judge appointment, is the only body that can deregister a doctor.

PSC investigations and decisions are confidential, while medical tribunals are held in the public domain.

If the HCCC or a medical board believes allegations against a practitioner are of a criminal nature, they can:

- advise the complainant of their right to go to the police
- refer a complainant's written statement to the police with consent
- investigate and refer the matter to the Department of Public Prosecutions.

The disturbing allegations of gross misconduct against former doctor Graeme Reeves have the medical profession and the community reeling. So, who allowed the situation to happen? *Pamela Wilson reports.*

SYDNEY mother-of-two Jane\* doesn't know what to think.

She has spent many hours over the past weeks agonising over whether her body was violated during two operations performed under general anaesthetic by the man now referred to as the 'Butcher of Bega'.

Jane's concerns and fears are surely resonating in the minds of the thousands of women who have been

As to the apparent secrecy of Mr Reeves' former colleagues, Professor Leon Piterman, head of the School of Primary Health Care at Monash University, says this is an issue not isolated to the medical profession.

"There is the general issue of whistleblowing which applies to the community as a whole... people are generally reluctant to do in [others]."

He says it's difficult to clearly identify if a doctor's practice is "shoddy" and that the fear of defamation "overrides the desire to do social good".

## MORE COMPLAINTS

An HCCC spokesman told *MO* that more complaints against Mr Reeves were being received, and that if any raised allegations of criminal conduct, it would, with the consent of the patient, refer them to the police.

He added that the complaints received against Mr Reeves between 1990 and 2007 related to matters such as poor surgery and rudeness, not criminal matters.

"There was an assessment made that none of these issues raised criminal allegations."

In light of recent events, there are now more questions than answers, and the profession, patients and community have little choice but to await

the outcome of inquiries to learn if the regulatory process was flawed.

But the NSW Medical Board is not the only board currently under fire.

In Victoria, the board apologised last month for not protecting patients against dermatologist David Wee Kin Tong, who was jailed two weeks ago after pleading guilty to rape.

And Queensland is likely to make headlines again following the US arrest and pending extradition of Dr Jayant Patel, who's been linked to numerous deaths while employed as director of surgery at Bundaberg Base Hospital.

But Australian Medical Council president Dr Joanna Flynn stands by the job that medical boards do.

"Certainly, the registration processes... are much more robust, and there's nothing like an issue coming into the public arena... [to] always make us review what we're doing."

But she points out that boards cannot become "kangaroo courts", and that they often have only limited information and are thwarted when doctors deliberately mislead them.

"The best we can do... is pick things up early and stop further damage occurring. But how early is early? How much data do you need before you realise it's a serious problem?"

\* Name has been changed.

## THE FACTS BEHIND THE CASE

IN 2004, the Medical Tribunal of NSW struck Graeme Reeves off the medical register for three years.

Prior to the tribunal hearing, the HCCC had received 22 complaints about Mr Reeves between 1990 and 2003.

In 1997, the Professional Standards Committee (PSC) imposed an order that Mr Reeves cease obstetrics because he was guilty of unsatisfactory

professional conduct and suffered from "personality and relations problems and depression" that affected his mental capacity to practise medicine.

The tribunal pointed out that "the PSC had conducted an inquiry into his management of nine obstetric patients. His treatment of one patient led to her death. In another case, the death of a baby occurred. The life of another patient was endangered".

Mr Reeves then worked for several years at Hornsby Hospital in Sydney under a conditional appointment, during which time numerous complaints were made by staff about his conduct.

In 2001, the hospital refused to renegotiate his employment, citing breaches of his conditional appointment.

Mr Reeves then applied for the job of

specialist obstetrician and gynaecologist at Bega and Pambula hospitals, telling the deputy director there were conditions on his medical registration and stating he wouldn't manage obstetric patients in his name or run a private obstetric practice.

Mr Reeves submitted a letter from the medical board detailing the conditions.

But the letter only referred to his registration being subject to health-related and monitoring-related conditions, making no reference to the conditions that he cease obstetrics.

The tribunal found Mr Reeves' job application included lies and "calculated omissions", and that he began employment which included providing gynaecological and on-call obstetric services.

The medical board later discovered Mr Reeves' breach and, in asking him the nature of his employment, received a letter that the tribunal declared "comprised a litany of lies and deceptive statements".

Mr Reeves' employment was terminated in 2003.

The tribunal struck Mr Reeves from the register, saying it considered "that the practitioner's conduct [constituted] gross professional misconduct of the most serious kind".



Graeme Reeves

Graeme Reeves photo courtesy of Merimbula News Weekly

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