

Home News

Woman settles action over breast cancer diagnosis

Case involved series of mammograms

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A CO Galway woman has settled her High Court action against the Health Service Executive (HSE) over an alleged litany of failures over many years at University College Hospital Galway, to diagnose and treat her breast cancer despite her having had a series of mammograms at the hospital.

As a result of the alleged failures from 1993 to 2007, Camilla Freehill (65), a homemaker, with an address at Ballinasloe, claimed her breast cancer became well established and she had to undergo a mastectomy urgently in October 2007.

The mastectomy was followed by chemotherapy and radiotherapy and Ms Freehill suffered other medical problems following those treatments, including infections and a severe allergic reaction to certain drugs, it was claimed.

She had to be treated in various hospitals throughout 2007 and 2008, had suffered excruciating pain and her hearing had been adversely affected, it was also claimed.

The case was listed for hearing yesterday before Mr Justice John Quirke who was told later yesterday afternoon by Bruce Antonietti SC, for Ms Freehill, it had been settled.

The settlement involves no admission of liability and includes an undertaking by the HSE to pay for future reconstructive surgery on a private basis. The HSE had admitted failure to properly diagnose and treat Ms Freehill from the date of a mammography examination in 2000 until 2007, when her breast cancer was diagnosed.

However, it denied negligence in the treatment of Ms Freehill

prior to 2000 and also denied the deterioration in her condition arose from the delay in diagnosis and treatment of it.

Ms Freehill had alleged she was referred to the hospital in 1993 for mammography, re-attended on many occasions after that for further mammography examinations and was reassured by the hospital.

She claimed the hospital wrongly assumed an abnormality in a mammogram in 2002 was probably a scar relating to previous surgery when, she claimed, it had failed to ask her whether she had had surgery.

On October 4th, 2007, a further mammogram was carried out which revealed Ms Freehill had well-established cancer in her right breast and lymph nodes, it was claimed. She was diagnosed then with breast cancer requiring urgent treatment and on October 23rd, 2007, underwent a right mastectomy and clearance of her right axillary lymph node.

The alleged failure of the hospital to properly interpret and recognise the findings of earlier mammograms carried out over years on Ms Freehill would have led to an earlier diagnosis of her condition and she would not have required the radical surgery she later underwent, it was claimed.

In her claim, Ms Freehill alleged she underwent mammography at the hospital in 1993. In 1996, she claimed she was referred to the hospital by her GP who reported she had soreness in her right breast. A mammogram of August 1996 was reported to show no abnormality and her GP was told the mammograms were essentially normal, it was claimed.

In June 2000, Ms Freehill claimed she was reviewed and her

GP was informed by the hospital clinical examination of her breasts was negative. A screening mammogram was arranged given her age but the hospital reported no radiological evidence to suggest abnormality in either breast.

In 2002, Ms Freehill was seen and reviewed at the hospital and further mammograms were arranged for December 2002. These noted an area of distortion in the right breast which was assumed to be a "real abnormality". It was also reported this area was present on mammograms carried out in 1998 and 2000, there had been no change since and the lesion was "probably a scar related to previous surgery and gives no cause for concern".

In 2004, another mammogram was arranged which also reported an area of "architectural distortion" in the right breast and said this was significantly less marked than in the previous mammogram of 2002. It was reported there was no suspicious abnormality in either breast.

In 2005, Ms Freehill was again reviewed and reported nipple inversion in her left breast. A further mammogram was arranged and it was reported the area of distortion was less prominent and also made reference to a resolving scar in the right breast. The findings were categorised as benign.

Ms Freehill claimed she attended at the hospital's breast clinic in October 2006. She claimed no investigations were ordered and it was arranged for her to re-attend a year later. A mammogram of September 2007 reported a distortion in the right breast. A biopsy was carried out and invasive breast cancer was diagnosed, it was claimed.