

The straight road not taken

Phil's patient has had an exhausting journey through the NHS – right back to where he started

It's currently fashionable to talk about the patient's 'journey' through the NHS. Like most – okay, all – bureaucratic jargon, it's a disingenuous attempt to redefine something simple as something that can be regulated.

Unfortunately, because of the way the NHS now functions (I use that word in its loosest possible sense) our patients do embark upon journeys – not all simple, and not all to the place they'd like to go. An exhausting journey can end with a patient dumped, bemused, back on their doorstep.

I had evidence of this the other day, when three letters about one patient arrived in one post. His journey started when he went for an eye exam. The next week I got a letter asking me to refer him to ophthalmology to get his cataracts looked at.

So far, so good. He got his appointment, it wasn't cancelled, he turned up at the eye infirmary on the correct day and waited his turn. Unfortunately, some confusion in my



The diagnosis has now changed from cataracts to 'unexplained falls'

patient's mind prompted him to turn up nil by mouth since midnight the day before. When he stood up after an hour in a hot waiting room, he fainted flat on the floor.

Letter number one – from the eye infirmary. 'Patient not assessed as collapsed in the waiting room. Came round quickly.' The attending doctor thought he had probably fainted, but I suspect dealing with only eyeballs for a couple of decades had made him a bit cautious. An ambulance was called and the patient was carted off to A&E (in a different hospital, naturally).

Letter number two – from A&E. The diagnosis has now changed to 'unexplained falls'. My patient had his blood pressure measured several times, blood tests, a chest X-ray and an ECG, all normal. The 'falls' remained unexplained (not to me, or indeed my patient, who knew damn well he had fainted – it wasn't the first time), and the A&E doctor referred him to the 'Falls Clinic'. I'm not entirely certain what this is – I suspect it's a bunch of physiotherapists and some rubber wrestling mats.

Letter three – from the Falls Clinic and addressed to me, not the A&E doctor who made the referral. They have assessed my patient over the phone. According to their

scoring system, he only scores three points, and they won't see anyone with less than nine. Therefore they regretfully inform me that 'my' referral was inappropriate. Helpfully, they include a copy of their criteria. Unhelpfully, it won't flush.

I've seen my patient since these incidents – he came to find out what was happening about his cataracts. He was bemused. It's obvious he fainted, obvious why, and obvious that a combination therapy of tea and sugar would have cured him, allowing him to get his eyes looked at.

Nobody had mentioned the Falls Clinic referral, not even the clinic's phone assessor who called to ask which floor his bathroom was on and whether he had a dog, before mysteriously telling him to see his GP.

I wonder how many 'patient episodes' were completed here – how many processes were undergone and forms filled in. How many protocols were followed? How many internal invoices are flying around as a result of this exemplary patient journey? What has it all cost? I don't know. I can, however, answer the key question – has he had his cataracts looked at? No.

Dr Phil Peverley is a GP in Sunderland

“WHO'S A STINKY, STUPID, BABY, BEDWETTER?”

Bedwetting can be a distressing condition. Children may suffer low self esteem, anxiety, depression and become withdrawn.^{1,3} And those wetting the bed twice a week or more are more likely to continue throughout childhood into adolescence.^{4,5}

It is important that children who wet the bed twice a week or more are identified early, and treated quickly and effectively.^{4,6} DesmoMelt can be used from 5 years of age and is preferred to tablets, especially by younger children.⁷

DESMOMELT
120 mcg and 240 mcg oral lyophilisate
desmopressin (as acetate)

MELT AWAY THE MISERY OF BEDWETTING

Prescribing Information: DesmoMelt 120 and 240 micrograms oral lyophilisate; Desmotabs 0.2mg. **Please consult the full Summaries of Product Characteristics before prescribing. Name of Product:** DesmoMelt 120 micrograms oral lyophilisate; DesmoMelt 240 micrograms oral lyophilisate; Desmotabs 0.2mg. **Composition:** DesmoMelt: 120 or 240 micrograms of desmopressin (as acetate). Desmotabs: 0.2mg desmopressin acetate. **Indications:** Treatment of primary nocturnal enuresis (5 to 65 years of age). **Dosage:** Children and adults (5–65 years of age) with normal urine concentrating ability. **DesmoMelt:** Initial dose of 120 micrograms sublingually at bedtime and only if needed should the dose be increased to 240 micrograms sublingually. **Desmotabs:** Initial dose of one tablet (0.2mg) at bedtime and only if needed should the dose be increased to two tablets (a total of 0.4mg). Fluid restriction should be observed. The need for continued treatment should be reassessed after 3 months by means of a period of at least 1 week without desmopressin. **Contraindications:** Cardiac insufficiency and other conditions requiring treatment with diuretics, moderate and severe renal insufficiency.

DesmoMelt and Desmotabs should only be used in patients with normal blood pressure and they should not be used in patients over the age of 65. Exclude diagnosis of psychogenic polydipsia or alcohol abuse. **Special Warnings and Precautions:** Take care in patients with reduced renal function and/or cardiovascular disease or cystic fibrosis. Fluid intake must be limited to a minimum from 1 hour before until 8 hours after administration. Care should be taken to avoid ingesting water while swimming. Treatment with desmopressin should be interrupted during an episode of vomiting and/or diarrhoea until their fluid balance is once again normal. Precautions to prevent fluid overload must be taken in: illnesses characterized by fluid and/or electrolyte imbalance; patients at risk for increased intracranial pressure. **Side Effects:** Headache, stomach pain and nausea. Isolated cases of allergic skin reactions and more severe general allergic reactions. Very rare cases of emotional disturbances in children. Treatment with desmopressin without concomitant reduction of fluid intake may lead to water retention/hyponatraemia with or without accompanying warning symptoms of headache, nausea/vomiting,

decreased serum sodium, weight gain and in serious cases convulsions. Please consult the full Summaries of Product Characteristics for further information about side effects. **Basic NHS Prices:** DesmoMelt: Carton containing 30 oral lyophilisates in blister strips. 30 x 120 micrograms £30.34. 30 x 240 micrograms £60.68. Desmotabs: Polyethylene bottle containing 30 tablets. £29.43. **Marketing Authorisation Number:** DesmoMelt: 120 micrograms 03194/0094. 240 micrograms 03194/0095. Desmotabs: 03194/0046. **Marketing Authorisation Holder:** Ferring Pharmaceuticals Ltd., The Courtyard, Waterside Drive, Langley, Berks, SL3 6EZ. **Legal Category:** [POM] **Date of Preparation of Prescribing Information:** January 2009. **References:** 1. Hägglöf B et al. Scand J Urol Nephrol 1997; 183: 79–82. 2. Warzak WJ. Clinical Pediatrics 1993; 38–40. 3. Joinson C et al. J Paed Psychol 2007; 32(5): 605–616. 4. Yeung CK et al. BJU Int 2006; 97: 1069–1073. 5. Butler RJ & Heron J. Scan J Urol Neph 2008; 42: 257–64. 6. Hjälmås K. Acta Paediatr 1997; 86: 919–22. 7. Lottman H et al. Int J Clin Pract 2007; 61(9): 1454–1460.

Further information is available from: Ferring Pharmaceuticals Ltd., The Courtyard, Waterside Drive, Langley, Berkshire SL3 6EZ. Telephone: 01753 214800. *DesmoMelt and Desmotabs are trademarks of Ferring BV. **Adverse events should be reported. Reporting forms and information about adverse event reporting can be found at www.yellowcard.gov.uk. Adverse events should also be reported to: Medical Information, Ferring Pharmaceuticals Ltd., The Courtyard, Waterside Drive, Langley, Berkshire SL3 6EZ, United Kingdom. Tel: 01753 214800. Email: medical@fering.com**



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