

Medical Professional Liability Claims Related to Esophageal Cancer Screening

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PRESS RELEASE



Study examines medical professional liability claims related to esophageal cancer screening

ANN ARBOR, Mich. – An analysis of liability claims related to esophageal cancer screening finds that the risk of claims arising from failing to screen as well as complications of the procedure used to screen for the cancer are similarly low, according to a study in the Oct. 1 issue of JAMA.

Endoscopic screening for esophageal cancer has been recommended for patients with chronic symptoms of gastroesophageal reflux disease, but only if they have additional risk factors. “There may be legitimate reasons to screen for esophageal cancer in some patients, but our findings suggest that the risk of a medical professional liability claim for failing to screen is not one of them,” authors say. “Physicians need to balance the risk of complications from diagnostic procedures, even if those complications are rare.”

Although the rate of serious adverse events arising from esophageal cancer screening with a procedure known as esophagogastroduodenoscopy is small, 6.9 million were performed in the United States in 2009.

Results of surveys suggest that gastroenterologists’ concern about litigation for missing a cancer may drive endoscopy use in patients at low risk for esophageal cancer. However, the perception of medical professional liability may not accurately reflect the true incidence of liability claims, according to the study led by Megan A. Adams, M.D., J.D., a U-M gastroenterology fellow, and Joel Rubenstein, M.D., a gastroenterologist at the University of Michigan and research scientist at the Veterans Affairs Center for Clinical Management Research in Ann Arbor.

Researchers used data from a medical professional liability claims database, identifying all claims relating to a diagnostic esophagogastroduodenoscopy (1985-2012), then focusing on claims alleging inadequate indication for the procedure.

“We found a low incidence of reported medical professional liability claims against physicians for failure to screen for esophageal cancer in patients without alarm features (19 claims in 11 years, 4 paid). In contrast, in 28 years, there were 17 claims for complications from esophagogastroduodenoscopies with questionable indication (8 paid).”

“This suggests that the risks of medical professional liability claims arising from acts of commission,” that is complications from the screening, “as well as acts of omission in endoscopic screening are similarly low,” the authors write.

Links to the **full text** and additional information can be found here: <http://jama.jamanetwork.com/article.aspx?articleid=1910097>