

Gadsby Wicks Clinical Negligence Casebook – birth injury

Injury: Delay in delivery leading to neo-natal death

Compensation: £18,000 (General Damages £4,000 + Special Damages £14,000)

Lawyer: Tony Mitty

The Facts:

At around $37^{1}/_{2}$ weeks into her third pregnancy, Mrs Cummings began to feel unwell. She was lethargic and feeling foggy-headed and her face, hands and feet began to swell. The pregnancy so far had been uneventful. Over the following couple of weeks, her symptoms became worse and she started to experience episodes of blurred vision so her midwife referred her to the local hospital. At the hospital, it was discovered that her blood pressure was raised. She was discharged home without treatment and told to return the following day to be induced. In the meantime, she started to have incidents of diarrhoea and vomiting.

On her return to hospital the following morning, by 6.15am Mrs Cummings was 4cm dilated and experiencing contractions. The CTG reading showed that the baby's heart rate was slowing down (decelerating) with every contraction and, just over an hour later, a fetal blood sample was taken. The decelerations continued for a further hour. When the fetal heart rate continues to drop, it can be a sign that the baby is in distress.

By 9am, Mrs Cummings was fully dilated and felt ready to push, but pushing didn't start for another hour or so, after she had been given an epidural. Mrs Cummings' daughter was born an hour later but was covered in her first bowel movement and quickly closed her eyes.

Sadly, attempts to resuscitate Mrs Cummings daughter were unsuccessful and the baby was pronounced dead. The cause of death was recorded as meconium aspiration and placental infarction – where there is an interruption in blood flow between the placenta and the fetus.

Mrs Cummings approached Gadsby Wicks to see if we could find out what had happened.

The Claim:

We helped Mrs Cummings make a claim that the delays in delivering her daughter had led to the baby inhaling meconium into her lungs, causing her to die shortly after birth. We successfully argued that, if the hospital had assisted with the baby's delivery and resuscitated her sooner, she would have inhaled far less meconium and would have survived without being disabled.

Client names have been changed to protect their identity.



Court proceedings were issued two and a half years after Mrs Cummings had begun her claim. The family really wanted answers and so were happy when the Hospital Trust finally admitted liability. They settled shortly afterwards and, after negotiations, Mrs Cummings accepted £18,000 in compensation.

File: 3897