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Peter J Bedford
Senior Coroner for Berkshire
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Dear Mr Bedford

Re.: Report to Prevent Future Deaths (Regulation 28) following the death of Mrs Violet Levine Nelson

Thank you for your letter and Regulation 28 Report ("Report") issued on 7 December 2017 following the death of Violet Nelson. I would like to offer my condolences to the family of Mrs Nelson. I would also like to apologise for the delay in producing this response.

In your report you raised a number of concerns relating to the content of the ultrasound reports. I thought it may be helpful to explain that aortic aneurysms can be difficult to diagnose and treat in a timely fashion, as they are largely asymptomatic. A national screening programme is currently in place for the detection of abdominal aortic aneurysms ("AAA"), but it only invites men aged 65 years. As with all national screening programmes, this decision is based on the best available evidence of clinical and cost-effectiveness. As AAAs are very rare in women, they are not currently included in this screening programme.

I note that your Report has been sent to The Royal College of General Practitioners and The Society of Radiographers who may be able to address your specific concerns as detailed in section 5 of your Report.

It may be helpful to recognise that General Practitioners ("GPs") are not specialists in a particular area of medicine, but are trained to practice in general medicine. Most GPs will therefore be prompted to make referrals when a recommendation is made in a scan report or if a scan report contains details or indications of further medical problems that require further investigation. It is therefore useful to recognise that GPs will have a different skill set compared to a Consultant Radiologist or an experienced Sonographer who is trained to take images and give indications about further problems that may require further investigations.

As explained above, aortic aneurysms can be difficult to diagnose, one route that could be explored to raise GP awareness would be to try and incorporate specific training/awareness into their appraisal process. NHS England's Medical

Directorates issue regular newsletters to their appraisers and include "lessons learned". This can be fed into an individual GPs' professional development plans.

NICE are developing new Clinical Guideline on "Abdominal aortic aneurysm: diagnosis and management"; the expected publication date is November 2018.¹ The guideline is intended for a wide audience, including patients and their families. It will also provide standards and thresholds for clinicians involved in the diagnosis and management of patients with AAs. This appears to be a timely opportunity for NHS England to inform the NICE AAA Committee of the concerns you raised and ask them to consider incorporating appropriate advice to all relevant clinical professions. Therefore, I will ensure that the NICE lead for this Guideline, Mr Andrew Bradbury, is aware of your Regulation 28 letter and the concerns raised by you. I will also ensure that your Report is considered by the Working group led by the National Clinical Director for Diagnostics, in their current review of another Coroner's case involving aortic aneurysms, so that any recommendations take this case into account.

I hope that the information above addresses the concerns you raised within your report and provides assurance that NHS England recognises your concerns and is taking further action to ensure that appropriate steps are taken.

Yours sincerely,



Professor Stephen Powis
National Medical Director
NHS England

¹ <https://www.nice.org.uk/guidance/indevelopment/gid-cgwave0769>