

HALSTROM LAW OFFICES, P.C.
WEB RELEASE
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DELAYED DIAGNOSIS OF CYSTIC FIBROSIS; WOMAN WITH VARIANT FORM NOT DIAGNOSED UNTIL AGE 32 CAUSING HER TO PROCEED TO BILATERAL LUNG TRANSPLANT MANY YEARS BEFORE SHE OTHERWISE WOULD HAVE REQUIRED ONE; WOMAN HAS LOST APPROXIMATELY A DECADE OR MORE OF LIFE EXPECTANCY

\$3 Million Dollar Settlement

A seventeen year-old Caucasian female (“the patient”) with a history of asthma, allergies, bronchitis, and rhinitis, underwent a battery of tests at a Boston hospital in 1989 in an attempt to diagnose her condition. The patient was told she was being worked up for cystic fibrosis. Most of the cystic fibrosis tests were administered to the patient, but some were not, including a “sweat” test. The physician ordering the tests never informed the patient that a sweat test was not performed, and the patient was not diagnosed with cystic fibrosis at that time.

The patient’s course of asthma, allergies, bronchitis, rhinitis, pneumonia, and hemoptysis continued until 2000, when she came under the care of a physician in Southeastern Massachusetts (“the defendant pulmonologist”) who was board certified in pulmonology and critical care medicine. The patient gave an oral history to the defendant pulmonologist of having been worked up for, but not diagnosed with, cystic fibrosis when she was a teenager.

Between and including the years 2000 and 2005, the defendant pulmonologist failed to order the appropriate tests to definitively diagnose cystic fibrosis, and the patient lost half her lung capacity. The defendant pulmonologist should have ordered a repeat sweat test, because he did not have the results of the test the patient presumably underwent at the Boston hospital in 1989. The defendant pulmonologist should have also ordered a genetic blood test that had been widely available in Massachusetts since the early 1990s, which would have detected the patient’s variant form of cystic fibrosis, but which was not available when she was tested at the Boston hospital in 1989.

The defendant pulmonologist also failed to order routine pulmonary function tests and sputum tests to track the patient’s lung function and bacteria that was growing in her lungs. The defendant pulmonologist also failed to take the advice of other consulting physicians to order a genetic test for the patient or to “rule out” cystic fibrosis.

Only when the patient traveled to Massachusetts General Hospital in Boston, MA for a consultation in the summer of 2005 were the correct tests ordered and reordered, and she was diagnosed with a variant form of cystic fibrosis. The patient was immediately provided with aggressive and appropriate treatment, including nutrition supplements, physical therapy, medications, etc.

Despite the aggressive and appropriate treatment initiated at MGH, the patient was given a poor prognosis and was expected to live only 12 months without a bilateral lung transplant. The patient finally received the bilateral lung transplant at the age of 36, after being at the top of the transplant list for two years. She was airlifted to the University of Pittsburgh Medical Center for the transplant in the fall of 2008.

Attorney Halstrom and Halstrom Law Offices staff retained world- renowned expert physicians learned in the diagnosis and treatment of cystic fibrosis to critique the pulmonologist's substandard care. Eliezer Nussbaum, M.D., a pulmonologist and cystic fibrosis specialist, would have testified at trial that under the care of the defendant pulmonologist, the patient's lung function went from slightly/moderately decreased to severely decreased. Dr. Nussbaum would have testified further that if the patient had received appropriate and aggressive treatment in 2000, the decline in her lung function would have been halted or slowed, and she would have required a lung transplant at around the age of 50, instead of at 36. Because of the early bilateral lung transplant, the patient also lost approximately ten to fourteen years of life expectancy, in Dr. Nussbaum's opinion.

The patient is married with three children, ages 14, 11, and 6, and she worked as an administrative assistant for a public school district. Her husband is a bridge operator. Halstrom and Halstrom Law Offices staff obtained a settlement whereby the defendant pulmonologist, his practice group, and their insurers paid a total of three million dollars, part of it to be received by the patient and her family in cash, and part to be paid to fund annuities for the family that provide significant tax advantages

The settlement compensates the patient and her family for the damages inflicted to the patient's body and to her family and lifestyle by the negligent medical treatment provided by the defendant pulmonologist. As a result of this settlement achieved by Attorney Halstrom and Halstrom Law Offices, the children's college educations will be fully funded, and they will each receive a monthly stream of income. The patient and her husband will receive lump sum payments as well as monthly income streams.