20073-24-143

3 Woodley Avenue, Remuera, Auckland 5.

27th January, 1982

The Medical Superintendent, National Womens' Hospital, Auckland.

Dear Sir or Madam,

Today I had an appointment to have a scan at N.W. Hospital. I had had a scan six weeks previously to see whether I was carrying twins. This scan showed that I had a single pregnancy, but that I had partial placenta praevia and the report recommended another scan in three to four weeks time. It also said that any sign of bleeding was to be regarded as serious. Because I was still on monthly appointments, and <u>unaware</u> of the diagnosis it was, in fact, five weeks before I saw my doctor, and a further week before I had the appointment for the scan. It had to be done as soon as possible so an appointment was made for me, which I accepted gratefully, although it was not at the most convenient time for me, as it is school holidays and I had to change previous committments. I made the decision to bring my three children along with me, as I was anxious of the outcome and felt it would be better for family understanding and co-operation from them if, at any stage, I should have to leave them to go in to hospital for any length The children are 8, 6, and 3 years and are well behaved.

The appointment was for 110'clock, and we arrived at 10.50. As required, I had drunk a pint of liquid two hours previously and had held on to it for the two hours. Whilst not anxious on this score, this is not a comfortable situation for a 32 weeks' pregnant woman. The staff were kind and courteous and could have taken me fairly promptly, but had had instructions to wait for Dr. Stewart to do the scan. By 11.30, one of the staff took me through to do the scan as Dr. Stewart had still not arrived for my appointment. I was pleased as, not only was I uncomfortable, but also I had had an anxious eight days wondering about the outcome and the consequences. Mostly I was concerned as I did not know precisely what the consequences would be but understood that the possibility of a number of weeks stay in hospital was a good one and I was concerned for my family. I asked the girl who was doing the scan if she could tell what the position was. She told me she could but would not tell me what it was and told me that I would have to ask Dr. Stewart. A scan does not take long and I was asked to wait for him, which I did for a further half hour.

At 12 o'clock when Dr. Stewart arrived I greeted him with relief and said something like: "Ah, Dr. Stewart, how marvellous, the man who has the decision of life and death. Do tell me what you have found." This was greeted by stunned silence and the

question "What did I mean, and what did I want to know?" (The implication being that the question was uncalled for!) I was surprised and told him that I wanted to know if I was still placenta praevia and asked him whether or not he would tell me. He then called me "young woman" (which startled me as I am 35) and said I must not be aggressive which shocked and upset me. He also said I was being unreasonable to ask before he had done an examination. I was under the impression that I had had a scan, and I knew he had been discussing me with the radiographer, and I also knew that she at least knew, and reasonably presumed that he knew what that had shown. Miserably, still while he began another sort of scan. He then asked me again why I wanted to know and added "What difference would it make anyhow?" This question implied that my question was unnecessary and fatuous and somehow that the "patient should not bohter her silly little head". I told him that as a responsible and caring mother, it would make a difference as I could have modified my behaviour if I had been aware of the risks to the baby and to me, particularly the warning about the danger of bleeding. At about this time he also called me "foolish". So now I was aggressive and foolish. This was not progressing well and I fell silent. He then began to offer unsolicited comments about his not being able to do the scan well, as the previous conversation had not been helpful. So now I was "Aggressive," "foolish", and a nuisance. I told him"it was my bloody baby and that I was the one who cared most whether it was dead or harmed and it was ultimately my responsibility."

At this point he tapped me on my bare hip and became angry and told me to improve my standard of language. I am sorry that the "bloody" apparently offended him. I didn't think that people even noticed things like that these days. Certainly I do not use swearing as an offensive weapon. He then remarked "that as an obviously intelligent woman, who has had previous children, I should know....." I forget precisely what he felt I ought to know, but he was obviously overlooking the fact that I had not had a placenta praevia before and was asking questions to find out more.

At about this time, my 3 year old came along and said "Mummy" to which Dr. Stewart said "What is this?" (I felt that "what"). I said that he was one of my three children and one of the reasons that I wanted to know how I was progressing. He asked me "who was looking after them". When I said "No-one" he said "There is a creche for that sort of thing". So by now, cumulatively, I am "aggressive", "foolish", and a nuisance, and labelled the sort of woman who unnecessarily drags her kids around with her. How unfortunate in an institution geared to bringing forth children.

The examination finished for us both in a haze of misery peppered with more remarks from Dr. Stewart designed to make me feel miserable, at which he not only succeeded, but also had the effect of making me angry. One is not at one's best lying down half naked with one's skirt up to one's neck! At the conclusion I sat up and said that I was extremely sorry that he mistook "an anxious enquiry for aggression" and asked him whether he was not accustomed to telling his patients his results. Also at this time I used the word "bloody" again. The first time was not a mistake as I didn't believe it would upset someone. The second time was a mistake and he began again to lecture me on the standards of language and behaviour and called me "Miss". Now, not only am I not a "young woman" (and I guess that that is subjective, but I felt it was strongly us3d as a pejorative description) but now I am "Miss", which, in the circumstances was used offensively! and this whilst he is lecturing me on standards of language. At which point I interrupted his lecture and told him that we would examine his standard of language and pointed out to him that he had told me I was "aggressive" and "foolish" amongst other things, and that he would not have taken advantage of my vulnerability had my husband been present. "Oh," came back the sneer "and where is your husband?" I told him that as we were anticipating a greater than ususal amount of stress because of my condition that I had not asked my husband to accompany me, as we felt that as long as possible he should be able to work without extra pressure. This, Dr. Stewart conceded. I did not tell Dr. Stewart that my husband was in fact addressing a meeting of 500 people. My husband has a very important job and I am not accustomed to make unnecessary demands on his time as I am usually capable of dealing with most things on my own, especially doctors' appointments. At which point print Dr. Stewart said he felt he had better leave "before I made any further outrageous comments", and he left me sobbing, knowing the children were a anxiously waiting for me down the corridor.

I have not had a lot of experience with hospitals as, despite the fact that I have had three children, I have had only one in hospital, and that was in England, the other two I have had pleasantly at home, one in England, and one here. I had been anticipating another planned home delivery here and so my condition now threw up all sorts of questions and new concepts for me. We had planned, this weekend, to set up the bed I usually deliver on in the baby's room. My only previous dealings with National Womens' up till now had been as a visitor or as a participant of the sex selection survey being conducted by Dr. Graham. I had been coming up to the hospital for several months in the planning stages of this baby; and I had had the previous scan, and at all times i had had a cheerful relationship with the staff, to whom I had mentioned my planned home births in the course of conversation. Mostly the reaction had been curious and accepting, so I had no reason to believe that it should be viewed unfavourably. I had mentioned it to the radiographer who did the first scan this morning. I asked

her afterwards whether she had told Dr. Stewart, and she said that she had. I had been puzzled at his use of the word "aggressive in a non-aggressive situation and realised retrospectively that if there were any aggression that it was coming from him.

I realise that his behaviour, is not the norm, but I have never had to put up with that sort of behaviour from any of my G.P. sor the people who attended me in my deliveries at home. I did encounter some like that with my previous hospital delivery and still remember the hurt and surprise. This is the kind of interaction which makes me fear hospitals and I do know that much is being done to ensure it does not happen. I feel that the best way to judge the situation is if the postions were reversed and a woman-doctor of half the man's age were to make personal comments and disparaging asides whilst the man was half naked, anxious, and being subjected to a fairly personal examination.

When Dr. Stewart asked me for the third time why I wanted to know the outcome of the scan and what I would do with the information I defended myself by explaining that I was concerned to know the likelihood of my being admitted to hospital and he said "Well, you won't be admitted today; and the tone and manner of his delivery and the emphasis on "today" left more queries than it gave answers.

I do hope that you take this up with Dr. Stewart. I apologised to him for the use of the word "bloody" and this was a sincere apology as I did not wish to offend. However, when I told him that I thought his language to me was offensive, there was no recipr ocal apology forthcoming. If Dr. Stewart wished to upset me and put me down, well, then, he succeeded. It is now midnight, I have not been able to sleep and am in a lather of perspiration. My husband urged me to write it all down for your benefit. If Dr. Stewart wished to subdue me, as I guess may have been his objective, he did not succeed as I am now angry. Because my condition has not improved I will probably have to return for further tests. My husband assures me that he will be there to protect me from now on.

I regret that I had to write this letter.

Yours sincerely,

Vivien Littlewood

P.s.

On Friday, 29th January, at 2.30p.m. my doctor rang me with the results, having just spoken to Dr. Stewart. She opened the conversation by saying "I suppose you know the results". She seemed surprised that I did not know the results. My impression was that there was no significant change in my condition. She, however, had rung to tell me that it was all clear, that my condition was now satisfactory and that there was no further cause for worry.

The distinct impression That I left hospital with on Wednesday was that there was still cause for concern. It would now appear that this was an unecessary burden of worry for the whole family. This would seem to further underline his attitude to me, and has confirmed my resolve to send this on to you.

V. Littlewood

On Friday, 9th April, at 1.40a.m. I was safely delivered of a healthy 101b 5oz baby girl - another positive result for Dr. Graham's sex selection survey.

At the time of writing my original letter I consciously decided to wait until after the delivery of my baby, in case there was any further possibility of my having contact with Dr. Stewart again.

As an average New Zealander I would not normally have had contact with home births had it not been for my five year stay in England. My experience with Dr. Stewart has regrettably reinforced my unhappiness and fear of the hospital birthing process.

I would be pleased to hear the results of your investigations into this matter.

Vivien Littlewodd