

Physician Ignores Patient's Allergic Reaction to Allopurinol, Resulting in Death

In November 2007, Geraldine Speier was referred to Dr. X to be treated for mild anemia and elevated uric acid levels. Dr. X gave Mrs. Speier a prescription for Allopurinol, 200 mg daily. Allopurinol is a highly toxic medication. The most frequent allergic reaction to Allopurinol is a skin rash. The literature accompanying the prescription is replete with warnings that skin reactions can be severe and sometimes fatal, and that treatment should be discontinued immediately if a rash develops. When prescribing potentially harmful medications such as Allopurinol, the prevailing standard of medical care requires that the physician evaluate the patient at each visit to determine whether or not there are symptoms of any allergic reaction to the medication.

At Mrs. Speier's very first follow-up appointment with Dr. X, she presented a condition which Dr. X described as "a faint rash over the upper extremity." Despite the appearance of this tell-tale rash, Dr. X did not take Mrs. Speier off of the prescribed Allopurinol.

Throughout the holiday season, Mrs. Speier's energy level and appetite significantly decreased. Her husband and their friends noted that her rash was getting progressively worse. In December 2007, Mrs. Speier again presented to Dr. X's office for another follow-up evaluation. At this time, Dr. X's physician assistant noted that Mrs. Speier had a "head to toe macular popular rash with some pruritis (itching) to it." Incredibly, the physician assistant failed to consider the symptomatic significance of the worsening rash as a potentially fatal allergic reaction to Allopurinol. Rather than following the prevailing standard of care, the physician assistant instructed Mrs. Speier to go to the pharmacy and purchase over-the-counter Benadryl tablets and cream. Mrs. Speier, relying on the specific instructions of the physician assistant, immediately purchased the Benadryl medications and began using them. Her physical condition began to deteriorate rapidly.

Within days, Mrs. Speier called Dr. X's office complaining of worsening symptoms. She had been unable to get out of bed for the last few days, and was eating and drinking very little. She had developed a high fever. Dr. X admitted Mrs. Speier for an emergency examination in his office and observed that the rash had spread throughout her entire body. She had hive-like patches, increased pruritis, and pain at any touch. Dr. X's notes confirmed that her rash was now "quite severe".

Siegbert Speier, Geraldine Speier's husband for over fifty-two years, demanded that his wife be taken to a

hospital immediately for further evaluation. Mr. Speier then drove his wife to Delray Medical Center and was referred to a dermatologist who immediately noted her "wide-spread rash, fever, and hypotension." The consulting dermatologist also noted significant crusting and blistering on Mrs. Speier's body, obviously indicative of a "severe drug hypersensitivity syndrome."

Mrs. Speier's condition was so severe that the physicians at Delray Medical Center immediately transferred her to the Jackson Memorial Hospital Intensive Care Burn Unit. Her condition was listed as critical.

Despite the intensive care, Mrs. Speier's condition continued to deteriorate. The failures of Dr. X and his staff to timely suspend the Allopurinol medication had resulted in Mrs. Speier developing septic shock, multi-bacterial infection, and acute renal failure. She died within days of her admission.

Siegbert and Geraldine Speier were a loving couple. They had two loving sons, and two wonderful grandchildren. Mr. Speier, shocked and heartbroken by the

loss of his wife, contacted SDSBS attorney **Karen Terry** to investigate what he believed was medical neglect resulting in the death of his beloved wife.

The defense argued that Mrs. Speier's pre-existing medical conditions had weakened her immune system, resulting in her reaction to the Allopurinol medication. Karen Terry retained experts who strongly contended that, had Dr. X and his staff immediately stopped Mrs. Speier's use of Allopurinol upon the first signs and symptoms of a developing rash, she would, more than likely, be alive today.

Within months of initiating suit, Ms. Terry was successful in obtaining a substantial settlement for Mrs. Speier's family. ♦



Above: Siegbert and Geraldine Speier

When prescribing potentially harmful medications... the prevailing standard of medical care requires **that the physician evaluate the patient at each visit to determine if there are any allergic reactions.**