



NEWS FROM THE SOCIETY

Letters-to-the Editors

Blood Transfusions and Renslow

In the case of *Renslow v. Mennonite Hospital*, cited on page 25, vol. 6, no. 1 of *MEDICOLEGAL NEWS*, I would like to know whether the litigation involved damage to the infant because of Rh(D) hyperimmunization of the mother. If this was the case, the words negative and positive in the review have been reversed. An Rh positive recipient would not immunize from a negative unit of blood. Even though there is a possibility of immunization to an antigen other than D which might be present in a negative unit, it would be extremely rare.

A D positive unit transfused into a negative recipient, however, would immunize about 70% of the time, but would be medically justified in a life-threatening situation. Upholding this type of decision could be paralleled to the rumors about someone stopping at an accident scene to give medical aid only to be sued for his efforts.

If the physician must decide whether to let the patient bleed to death, or transfuse a negative patient with positive blood and risk immunization (if it's the only available unit), should he let the patient die because a child — not yet conceived — might bring suit twenty years later for "damages" or should he transfuse? What decision would a lawyer make?

It is most distressing to note that the courts uphold the action as negligent. It shows a definite lack of knowledge of reasonable medical treatment and underscores an ever widening gap of understanding between law and medicine.

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Editors Note: Mr. Dillin is correct; the terms "negative" and "positive" were inadvertently transposed. Mrs. Renslow, then unmarried and only 13, was blood type A-Rh negative, and the blood transfused into her was type A-Rh positive.

At this point of the lawsuit, which was brought in the name of the daughter, born nine years after the transfusion, the Illinois Supreme Court was not deciding the issue

of negligence in the performance of the transfusion, nor was any factual determination made relative to the availability of the proper type of blood. Rather, the court had to assume that the plaintiff's allegations were correct, since the only issue before the high court was whether a minor plaintiff could sue for "prenatal injuries resulting from tortious conduct occurring before the conception of the injured child." The court determined that such a cause of action for negligence could be maintained, and that the defendants had not established that they could not reasonably have foreseen that the teenage girl would later marry and bear a child and that the child would be injured as the result of the improper blood transfusion.

A.E.D.

MEMBERS IN THE NEWS

Editor's Note: This new section of *MEDICOLEGAL NEWS* is designed to announce achievements, re-locations, speaking engagements and other honors received by American Society of Law & Medicine members. To be an effective service, members are requested to submit appropriate items concerning themselves or colleagues to the Managing Editor, *MEDICOLEGAL NEWS*, 454 Brookline Avenue, Boston, MA 02215.

Neil L. Chayet, J.D., of the Boston firm of Chayet and Sonnenreich, P.C., will be writing a column for *MEDICAL TRIBUNE* entitled, *Law & Medicine*. Mr. Chayet hopes to show that the law can be interesting and understandable, and that a partnership between those who make and administer the law and those who are governed by it will result in a better, more responsive legal system. His April 12, 1978, column relates to mental incompetency and the ability to stand trial.

Douglas Danner, J.D., a partner in the Boston firm of Powers & Hall, had some encouraging comments on medical malpractice for physicians at the recent American Bar Association seminar on medicolegal litigation, held in New Orleans. Mr. Danner noted that jury awards are decreasing, at least in Massachusetts, and that the so-called "nuisance" suits are almost non-existent. Attorney Danner attributed the change to the public response to the much publicized "malpractice crisis" and to the new tribunal systems imposed in Massachusetts and many other states.

A. Edward Douders, J.D., Executive Director of the American Society of Law & Medicine and Managing Editor of *MEDICOLEGAL NEWS*, will be a panelist on the topic *Institutional Review Boards — Their Function and Authority* at the 12th Annual Meeting of the Society of Research Administrators in Boston in November 1978.

American Society of Law & Medicine Vice President, Richard F. Gibbs, M.D., J.D., who is also the newly installed President of the American College of Legal Medicine, will receive an honorary Doctor of Laws degree from Suffolk University Law School, in Boston, in recognition of his many contributions to the field of legal medicine. Dr. Gibbs and Honorary Life Member Walter H. McLaughlin, retired chief justice of the Massachusetts Superior Court, were interviewed by *MEDICAL ECONOMICS* (May 15, 1978) concerning the two-year old Massachusetts medical malpractice pretrial tribunal system. According to Gibbs, the success of the tribunal system has been phenomenal, and Justice McLaughlin commented upon the extensive number of claims that have seemingly been screened out prior to trial.

Elliot L. Sagall, M.D., American Society of Law & Medicine President, presented a paper on the "Legal Implications of Cardiac Rehabilitation" at a three-day symposium on *Heart Disease and Rehabilitation — State of the Art* at Mount Sinai Medical Center, Milwaukee, Wisconsin, on May 11-13, 1978.

Together with representatives of the American Medical Association, the Illinois State Medical Society, and the American Society for Hospital Attorneys, a number of American Society of Law & Medicine members participated in the recent *Controversies in Law & Medicine* symposium held at the American Hospital Association headquarters in Chicago. Included were: George J. Annas, J.D., M.P.H., Assistant Professor of Law & Medicine, Boston University Medical School; Leonard Berlin, M.D., Director of Radiology, Skokie Valley Community Hospital, Skokie, Illinois; Rowene Hayes Brown, M.D., J.D., Medical Director, Cook County Hospital, Chicago; Lee J. Dunn, Jr., J.D., LL.M., General Counsel, Northwestern Memorial Hospital, Chicago; John A. Norris, J.D., M.B.A., Editor-in-Chief, *AMERICAN JOURNAL OF LAW & MEDICINE*; and Sandra G. Nye, J.D., Director, Child and Family Law & Psychiatry, Illinois Department of Mental Health and Developmental Disabilities.