GMC clears doctors who signed cremation forms for Shipman

Owen Dyer *London*

Four GPs who signed the cremation forms of patients murdered by serial killer Harold Shipman have been cleared of serious professional misconduct by the General Medical Council.

Doctors Jeremy Dirckze, Stephen Farrar, Alastair MacGillivray, and Susan Booth, who all worked close to Dr Shipman's surgery in Hyde, Greater Manchester, between them signed 214 cremation form Cs for Dr Shipman's deceased patients between 1979 and 1997. Of these, 124 were later found to have been unlawfully killed.

The four GPs were accused of failing to notice coincidences between the pattern of Shipman's home visits and the deaths of his patients (*BMJ* 2005;331:68, 9 July). But the GMC panel, sitting in Manchester, accepted the doctors' arguments that they could not have been reasonably expected to account for behaviour as extraordinary as Dr Shipman's.

Summing up, Linda Buchanan, chairing the GMC's

Fitness to Practise Panel, said that Dr Shipman was "highly regarded, thought to be a skilled and caring family doctor, and was widely respected among his patients and professional colleagues."

"It has subsequently been established that, while the overwhelming majority of doctors are honest and truthful, he was

an accomplished liar who set out to deceive his patients and colleagues alike, even going so far as to create false records in his patient notes.

"The extent to which he lied was so extraordinary that it could not have been within the contemplation of any of those who dealt with him. The panel has no doubt that the oral account which he gave... would have been totally convincing. The panel considers that such a person would have created the impression of giving an honest and truthful account which would have been impossible to

distinguish from one which was in fact truthful."

Before Dr Shipman's murders came to light, Dr Buchanan noted, "it was generally the practice in England, and specifically in the Hyde area, that further inquiries were not made" when countersigning cremation forms.

The four Hyde GPs just cleared were among six criticised by Dame Janet Smith's Shipman Inquiry for their role in signing cremation certificates. Two other doctors, Peter Bennett and Rajesh Patel, were cleared of similar charges by the GMC last December. (See pp 166, 167) □

Exonerated (from left to right): Drs Jeremy Dirckze, Stephen Farrar, and Alastair MacGillivray. A GMC panel said that they could not have been expected to account for behaviour as extraordinary as Dr Shipman's

Dutch doctors adopt guidelines on mercy killing of newborns

Tony Sheldon *Utrecht*

Dutch paediatricians have voted unanimously to adopt as national guidelines the so called Groningen protocol that covers the mercy killing of newborn babies who are incurably sick and are suffering severely. The Dutch Paediatric Society accepted that "in exceptional circumstances and under strict conditions... deliberate ending of life" of such newborns "can be an acceptable option."

The protocol gives exact details of the requirements doctors must follow and includes the mandatory reporting of all cases. The local protocol drawn up at Groningen University Hospital last autumn caused an international outcry. Its clinical direc-

tor of paediatrics, Eduard Verhagen, told the *BMJ* at the time, "It is time to be honest; all over the world doctors end lives discreetly, out of compassion" (*BMJ* 2005;330:560).

The protocol, which the Groningen doctors agreed with the public prosecution service, enables doctors to report their actions without being prosecuted.

Its requirements include a clear diagnosis and prognosis; that the newborn baby must be suffering hopelessly and unbearably with no prospect for future treatment; that both parents must give their informed consent; that the decision must be confirmed by a second independent doctor; and that the death and treatment must be reported to the local coroner.

After the recent decision, Dr Verhagen, who chairs the society's ethics and law committee, said, "The society has agreed a clear and uniform approach to the decisions regarding deliberate life ending procedures in sick new-

borns." The "confirmation of the acceptability" of this practice was an important step for parents and doctors.

It "underlines accountability," Dr Verhagen said. "Dutch paediatricians have indicated their choice for a control mechanism based on self reporting and public review. They fully realise they themselves are the ones who need to report."

The society now stresses the urgent need for a system of reporting, in the first instance to a national committee of doctors, lawyers, and ethicists rather than to the public prosecutor. Such a system already exists under the euthanasia law but the system excludes newborns as a request for euthanasia from the patient is required.

It believes that a system of reporting to a national committee rather than to the public prosecutor would encourage doctors to report their actions and thus ensure legal and societal control. It estimates that currently 15 cases occur each year in the Nether-

lands and that on average only three are reported. The cases are thought to be babies born with severe spina bifida, involving brain damage, and babies who suffer severe hypoxia at birth.

The society points out that last year the government promised proposals to improve the reporting of life ending decisions for newborns, while calling on the medical profession to take initiatives too. "That is what the society has now done. The ball is now with the politicians," said Dr Verhagen.

Dutch opposition Labour MP and former health academic Godelieve van Heteren has now asked justice minister Piet Hein Donner in parliament if he supports the protocol. A health ministry spokeswoman said that she expects proposals for a national assessment committee to be drawn up by the Ministry of Justice after the summer. □

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