

VERDICTS & SETTLEMENTS

Plaintiff had known allergy to prescribed asthma medicine

\$627,868 Settlement

Plaintiff was a 51-year-old woman with asthma and multiple allergies, who presented to the offices of the defendant physician for evaluation of exertional shortness of breath. She provided the defendant with a list of her known drug allergies and recounted to the defendant an experience she had the year before with a delayed allergic reaction following use of an inhaled medication. That

Type of action: Medical malpractice

Injuries alleged: Angioneurotic edema, restrictive ventilator defect, orthopnea, dyspnea, dysphagia, dysphonia, vocal cord dysfunction, laryngeal scarring and stenosis, tracheal narrowing and diaphragmatic weakness due to hypoxic muscle damage

Date resolved: Feb. 7, 2014

Special damages: Medical expenses of \$97,000; lost wages of \$43,000

Verdict or settlement: Settlement

Amount: \$627,868

Attorneys for plaintiff: Ann LaCroix Jones and Donna Miller Rostant, Fairfax

reaction included the development of swollen lips the day following use of the inhaler.

Defendant hand-copied the list of drug allergies into the patient's chart, including the patient's allergy to the steroid Budesonide. At the conclusion of the appointment, defendant diagnosed the plaintiff with asthma and instructed his staff to administer a dose of an inhaled steroid to the plaintiff. Unbeknownst to the plaintiff, one of the primary ingredients in that medication was the steroid Budesonide to which she had a known allergy. The dose administered at the office was the only dose of the medication the plaintiff received.

The following morning, the plaintiff woke with swollen lips and a slightly sore throat. Later, the symptoms worsened and she reported to the Emergency Department with difficulty breathing and swelling of the lips, mouth and throat. She was diagnosed with angioneurotic edema as a result of an allergic reaction to Budesonide. The plaintiff's allergic reaction to Budesonide was akin to the reaction people have following exposure to poison ivy, with delayed onset of symptoms followed by a progressive escalation of the intensity of symptoms.

In the emergency room, the plaintiff's airway continued to swell, despite administration of rescue medications. Intubation was necessary in



JONES



ROSTANT

the face of impending airway compromise. However, its performance in the setting of severe edema led to injury within the larynx and trachea. When the plaintiff was discharged from the hospital 10 days later, she could not recline, speak or move any meaningful distance without significant difficulty breathing. She could not swallow solid foods. Her hair fell out. Her voice was hoarse, and she lost her voice quickly. She had two subsequent inpatient hospitalizations for pulmonary compromise. She had two outpatient surgeries to correct laryngeal scarring and tracheal narrowing. She was out of work six months due to her debilitation. When she returned to work, she required a modified schedule, permitting her to telecommute two days a week. She accumulated \$97,000 in medical expenses and \$43,000 in lost wages.

The case settled shortly after the plaintiff's deposition was taken.

[14-T-034]