A nationwide descriptive study of obstetric claims for compensation in Norway.

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OBJECTIVE: To describe causes of substandard care in obstetric compensation claims.

DESIGN AND SETTING: A nationwide descriptive study in Norway.

POPULATION: All obstetric patients who believed themselves inflicted with injuries by the Health Service and applying for compensation.

METHODS: Data were collected from 871 claims to The Norwegian System of Compensation to Patients during 1994–2008, of which 278 were awarded compensation.

MAIN OUTCOME MEASURES: Type of injury and cause of substandard care.

RESULTS: Of 871 cases, 278 (31.9%) resulted in compensation. Of those, asphyxia was the most common type of injury to the child (83.4%). Anal sphincter tear (29.9%) and infection (23.0%) were the most common types of injury to the mother. Human error, both by midwives (37.1% of all cases given compensation) and obstetricians (51.2%), was an important contributing factor in inadequate obstetric care. Neglecting signs of fetal distress (28.1%), more competent health workers not being called when appropriate (26.3%) and inadequate fetal monitoring (17.3%) were often observed. System errors such as time conflicts, neglecting written guidelines and poor organization of the department were infrequent causes of injury (8.3%).

CONCLUSIONS: Fetal asphyxia is the most common reason for compensation, resulting in large financial expenses to society. Human error contributes to inadequate health care in 92% of obstetric compensation claims, although underlying system errors may also be present.