



Queries for Expert Paediatric  
Renal Transplant Surgeon

November 2011

Keith Rigg 3/11/11

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1. You state at page 5 of your 2<sup>nd</sup> report to the Inquiry, dated 12<sup>th</sup> October 2010, that “a suprapubic catheter was inserted [...] This can be a useful procedure in small children as it may be more effective in draining the bladder than a small urethral catheter.”
  - a. Please explain what you mean by “*more effective*”.

A suprapubic catheter will be of a larger gauge than the maximum size of urethral catheter that is possible in a small child. If large volumes of urine are produced after the transplant the bladder will be drained more effectively through a larger bore of catheter.
  - b. Would a suprapubic catheter be “*more effective*” than a urethral catheter if they were the same size?

No
  - c. Would the maximum flow rate through a urethral catheter (say 8 or 10 FG) be sufficient to drain Adam’s usual urine output of 60 ml/h?

We believe it would, but after a transplant much larger volumes of urine can be produced in the early post-operative period where a 8 or 10FG urethral catheter may not be sufficient.
2. In relation to your comments on page 8 of your 2<sup>nd</sup> report to the Inquiry, regarding the size of Adam’s bladder, in June 1992, when he was only 10 months old, his bladder size is noted as being 170ml and ‘grossly distended’. (Ref: 054-057-134).
  - a. State if this has any effect on your comments regarding the estimated size of Adam’s bladder in November 1995.

We provided a formula which stated what the normal capacity of the bladder in a child of 20 kg was. Being reminded of the size of Adam’s bladder at the age of 10 months our statement can be amended to read, ‘In light of Adam’s polyuria and his previous urological history and surgery his bladder ~~was likely to~~ will have had a larger capacity than normal; although it is not possible to say by how much more.
3. In Mr Keane’s third witness statement to the Inquiry (WS-006-3), he states in his answer to Question 12(a) that “*Adam’s urethra was very small and in my opinion urethral catheterisation was unnecessary. I wanted the bladder full.*”
  - a. Please comment on Mr Keane's statement that “*Adam’s urethra was very small*” and its significance, including whether you are aware of any evidence of this in Adam’s medical notes and records and whether that should have been recorded in them.

Adam’s urethra was small because he was young. We are not aware of any reason why his urethra would have been smaller than usual, and therefore there would have been no reason to document this.