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Medical error is third biggest cause of death

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Medical error is the third leading cause of death in the US after heart disease and cancer, say academic surgeons who are calling for better reporting to help understand the scale of the problem.

Currently, death certification in the US (and in Australia) relies on assigning an International Classification of Disease (ICD) code to the cause of death – so those not associated with an ICD code, such as human and system factors, are not captured.

As a result, accurate data on deaths associated with medical error is lacking, but a recent analysis suggests a range of 210,000 to 400,000 deaths a year among hospital patients in the US.

In Australia, by some estimates, as many as 18,000 people die every year as a result of medical error. About 50,000 suffer a permanent injury.

But, like the US, there is no systematic collection of data, so it is impossible to know for sure how many medical mistakes cause serious harm or death.

Writing in *The BMJ*, Professor Martin Makary and Dr Michael Daniel at Johns Hopkins University School of Medicine in Baltimore say strategies to reduce death from medical care should include three steps: making errors more visible when they occur so their effects can be intercepted; having remedies at hand to rescue patients and making errors less frequent by following principles that take human limitations into account.

For instance, instead of simply requiring cause of death, they suggest death certificates could contain a field asking whether a preventable complication stemming from the patient's medical care contributed to the death.

Another strategy would be for hospitals to carry out a rapid and efficient independent investigation into deaths to determine the potential contribution of error.

"Sound scientific methods, beginning with an assessment of the problem, are critical to approaching any health threat to patients," the researchers write. "The problem of medical error should not be exempt from this scientific approach."

In Australia, the open disclosure policy provides a nationally consistent basis for communication following unexpected healthcare outcomes and harm. However, research shows doctors have been slow to embrace the practice.

You can read the study [here](#).

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