PRESS RELEASE

DISCIPLINARY COMMITTEE INQUIRY FOR DR TEOH KHENG HOE GERRARD

1. A Disciplinary Committee ("DC") of the Singapore Medical Council ("SMC") held a disciplinary inquiry ("Inquiry") on 2 August 2012 for Dr Teoh Kheng Hoe Gerrard ("Dr Teoh"), age 52, a registered medical practitioner specialising as a Haematologist. At all material times, Dr Teoh practised at the Clinic for Blood Disorders and Research, Gleneagles Hospital, 6A Napier Road, Singapore 258500, as its Medical Director. The proceedings arose out of a complaint to the SMC dated 13 August 2009.

2. Dr Teoh faced two charges of professional misconduct in respect of his treatment of the Patient. The charges are as follows:

   a. That Dr Teoh recommended and administered to the Patient, Rituximab, Velcade, Dexamethasone, Thalidomide, Zometa therapy ("the VELCADE-based Targeted Therapy") as a first-line treatment to treat advanced diffuse large B-cell lymphoma ("the Patient’s Medical Condition"), when Dr Teoh knew or ought to have known that it was not a generally accepted method of treatment by the medical profession; and

   b. That Dr Teoh recommended and administered to the Patient the VELCADE-based Targeted Therapy as a first-line treatment to treat the Patient’s Medical Condition, when he knew or ought to have known that it was not the appropriate treatment.

3. Dr Teoh pleaded guilty to both charges at the Inquiry and accordingly, the DC convicted him of the charges.
4. The DC stated that it is incumbent on all medical practitioners to be apprised of current medical standards and the appropriate treatment methods and considered that Dr Teoh had acted in disregard of his professional duties when he carried out inappropriate treatment which is not scientifically supported.

5. The DC found that Dr Teoh’s conduct breached paragraph 4.1.4 of the SMC’s Ethical Code and Ethical Guidelines (“ECEG”) which provides, *inter alia*, that a doctor shall treat patients according to generally accepted methods and use only licensed drugs for appropriate indications and a doctor shall not offer to patients, management plans or remedies that are not generally accepted by the medical profession, except in the context of a formal and approved clinical trial.

6. The DC reiterated that a breach of the ECEG involving inappropriate treatment will attract substantial punishment involving a period of suspension for the doctor concerned.

7. In coming to the appropriate sentence, the DC found, *inter alia*, the following matters to be relevant and of grave concern:

   a. Dr Teoh had provided a picture to the Patient’s family that the treatment was provided in a trial setting when it was not;

   b. Given Dr Teoh’s close association with the pharmaceutical company that manufactures Velcade, Dr Teoh was not well-placed to advise the Patient on his treatment options as Dr Teoh’s perceptions could have clouded his judgment;

   c. It was disturbing that Dr Teoh recommended VELCADE-based targeted therapy when he knew that R-CHOP is the accepted first-line treatment for the Patient’s Medical Condition. Given that the Patient and the family were vulnerable in the face of life-threatening illness and would have greatly relied on Dr Teoh’s advice, the DC also found that the
Patient’s and his family’s trust was abused. There is therefore a public interest element involved;

d. As a consequence of Dr Teoh’s misconduct, substantial sums well in excess of Dr Teoh’s estimate, were incurred by the family for the treatment of the Patient using the method advocated by the Dr Teoh and to address the complications arising from the treatment;

e. The Patient’s health deteriorated and suffered complications after undergoing the VELCADE-based Targeted Therapy. The administration of appropriate treatment to the Patient was also delayed as a result of the administration of Dr Teoh’s recommended treatment. In this regard, the duty not to harm the patient was breached by Dr Teoh through his actions; and

f. Dr Teoh’s remorse for his actions was doubtful as Dr Teoh continued to justify the appropriateness of the treatment he recommended when he addressed the DC at the Inquiry.

8. However, the DC also took into account the following mitigating factors:

a. Dr Teoh is a first-time offender. Prior to these proceedings, he had an unblemished record of 26 years’ practice and there are numerous testimonials and evidence of contributions to the medical community; and

b. Dr Teoh had pleaded guilty and avoided a protracted inquiry.

9. At the conclusion of the inquiry, the DC ordered that Dr Teoh:

a. Be suspended for 6 months on each of the 2 charges, with both periods of suspension to run concurrently;

b. Be fined a sum of $10,000;

c. Be censured;
d. Provide a written undertaking to the SMC that he will not engage in the conduct complained of, or any similar conduct; unless he had obtained the requisite approval for such a clinical trial; and

e. Pay the costs and expenses of and incidental to these proceedings, including the costs of the counsel to the SMC and the Legal Assessor.

10. The DC ordered that the Grounds of Decision be published.

11. Dr Teoh’s 6-month suspension took effect on 2 September 2012.

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