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3 May 2013

PRESS RELEASE DISCIPLINARY COMMITTEE INQUIRY FOR DR PANG AH SAN

1. The Disciplinary Committee (“**DC**”) of the Singapore Medical Council (“**SMC**”) held a disciplinary inquiry (the “**Inquiry**”) for Dr Pang Ah San (“**Dr Pang**”), and another doctor (“Dr A”), over a 9-day hearing between 9 September 2011 and 8 March 2012. The verdict was given on 23 July 2012.

Proceedings before the DC

2. The proceedings arose out of a complaint to the SMC dated 8 August 2008. At the time of the complaint, Dr Pang and Dr A were both practising at LP Surgery in Mount Alvernia Hospital as a General Surgeon and a Gastroenterologist respectively.
3. Dr Pang and Dr A each faced a charge of professional misconduct contrary to section 45(1)(d) of the Medical Registration Act (2004 Rev. Ed.)(Cap. 174).
4. The charges against both doctors arose from a surgery performed by both doctors on 7 July 2008 to insert a “loop” percutaneous endoscopic gastrostomy tube (the “**Loop PEG Tube**”). Both doctors were charged with providing treatment that was not generally accepted by the medical profession outside the context of a formal and approved clinical trial, in breach of Clause 4.1.4 of the SMC’s Ethical Code and Ethical Guidelines.
5. Both doctors contested the charges against them. Having heard all the parties, the DC convicted Dr Pang and acquitted Dr A.
6. Against Dr Pang, the DC found beyond a reasonable doubt that Dr Pang had given treatment that was not generally accepted by the profession outside the context of a formal and approved clinical trial:
 - (a) The insertion of the Loop PEG Tube required two stomas instead of the usual one stoma required for the insertion of a standard percutaneous endoscopic gastrostomy tube (the “**Standard PEG**”);

- (b) Although the method of inserting a Standard PEG and a Loop PEG Tube is similar, what is different in the two treatments is found in the device itself. The Loop PEG Tube has no bumper-bolster mechanism. The Standard PEG uses the bumper-bolster mechanism to ensure apposition of the stomach wall to the peritoneal surface of the abdominal wall.
 - (c) It is a general and accepted view is that apposition of the stomach wall and the peritoneal surface of the abdominal wall in the Standard PEG is important to seal off the site of the stomach tube penetration and expedites the formation of a mature tract around the tube.
 - (d) The evidence did not support both doctors' contention that the Loop PEG Tube was not dissimilar to the Standard PEG and was thus not novel. In fact, the evidence overwhelmingly pointed the other way.
 - (e) Dr Pang's irrational and contrived arguments that the Loop PEG Tube was not novel flew in the face of the fact that he had applied for and obtained a patent for his invention, which necessarily meant that there was novelty or an inventive step in his medical device;
 - (f) All the expert witnesses at the hearing agreed that they had never seen the Loop PEG Tube prior to their engagement as expert witnesses in this matter. They were also in agreement that apart from the self-serving articles written by Dr Pang, there were no other medical literatures available on the Loop PEG Tube. They were all in agreement, or at least not disputing, that even with the disadvantages of the Standard PEG, the generally accepted device to be used is the Standard PEG with the bolster and bumper mechanism.
7. Accordingly, the DC found that Dr Pang had intentionally and deliberately ignored his ethical obligations as enshrined in Clause 4.1.4 of the SMC's Ethical Code and Ethical Guidelines.
8. In acquitting Dr A, the DC noted that:
- (a) Dr A's involvement in the insertion of the Loop PEG Tube was limited to performing the gastroscopy aspect prior to the actual insertion of the Loop PEG Tube. The insertion of the Loop PEG Tube was carried out by Dr Pang;
 - (b) Dr A would have clearly known that the Loop PEG Tube was a novel device;
 - (c) The DC could not say beyond reasonable doubt that Dr A had provided treatment that was 'one and the same' as that provided by Dr Pang; and

- (d) The worst that could be said about Dr A's conduct was that she had allowed another doctor to carry out a treatment which was not generally accepted by the profession.
9. Dr Pang chose not to offer any submission in mitigation.
10. However, the DC took into account that the Standard PEG has been in use for a long time and is a modality of feeding patients. The Loop PEG Tube is a new device based on similar objectives but is of new and different design. The DC noted that when considering innovation in the profession it had to be mindful of conflicting public interests. Firstly, there is public interest in encouraging innovation. On the other hand, there is the equally important public interest in ensuring that no new (meaning not yet accepted) treatment or devices are used on patients unless they have been approved by the profession.
11. This is a case where Dr Pang, knowing that he has a new device that could be used in a treatment, went ahead to provide treatment not generally accepted by the profession, without any formal or approved clinical trial.
12. Taking into account the nature of the charge and its findings, the DC ordered that Dr Pang be fined \$10,000, censured and that he provides a written undertaking to the SMC that he will not be engaged in or offer any treatment plan or treatment which includes the insertion of the Loop PEG Tube or any variation thereof outside the context of a formal or approved clinical trial or unless he obtains approval to use the same on patients from the appropriate authorities. The DC also ordered that he pays 70% of the costs and expenses, of and incidental to, the Inquiry proceedings, including the costs of the SMC's solicitor and the Legal Assessor.
13. The DC ordered that the Grounds of Decision be published.

Appeal before the Court of 3 Judges

14. Dr Pang's appeal against the DC's decision was heard and dismissed by the Court of 3 Judges on 3 May 2013 with costs. The Court of 3 Judges affirmed the DC's decision in all aspects save for a slight variation to the undertaking to be provided by Dr Pang. Dr Pang is therefore to provide a written undertaking that *"he will not be engaged in or offer any treatment plan or treatment which includes the insertion of the Loop PEG Tube or any variation thereof outside the context of a formal or approved clinical trial or unless he obtains approval or an exemption to obtaining such approval to use the same on patients from the appropriate authorities"* (emphasis added).

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