

SUMMARY

DR. CHRISTOPHER PETER NORTH WATSON (CPSO# 21002)

1. Disposition

On November 6, 2017, the Inquiries, Complaints and Reports Committee (“the Committee”) required neurologist Dr. Watson to appear before a panel of the Committee to be cautioned with respect to inappropriate opioid prescribing, including a lack of narcotics contracts and a failure to follow guidelines, even when the Committee had previously advised him of the same.

The Committee also accepted an undertaking from Dr. Watson, dated October 17, 2017.

2. Introduction

The College received information from the Narcotics Monitoring System (“NMS”) raising concerns about Dr. Watson’s narcotics prescribing and subsequently the Committee approved the Registrar’s appointment of investigators to conduct a review of Dr. Watson’s practice.

3. Committee Process

As part of this investigation, the Registrar appointed a Medical Inspector (“MI”) to review a number of Dr. Watson’s patient charts, interview Dr. Watson, and submit a written report to the Committee.

A Panel of the Committee (consisting of physician and public members) constituted to consider cases that include narcotics prescribing issues met to review the relevant records and documents related to the investigation. The Committee always has before it applicable legislation and regulations, along with policies that the College has developed, which reflect the College’s professional expectations for physicians practising in Ontario. Current versions of

these documents are available on the College's website at www.cpso.on.ca, under the heading "Policies & Publications."

4. Committee's Analysis

The Committee considered the report of the MI, who concluded that Dr. Watson did not meet the standard of practice in more than half of the charts reviewed; he demonstrated a lack of knowledge, skill and judgement in his approach to narcotics prescribing for chronic, non-cancer pain; and his approach exposed or was likely to expose patients to a potential risk of harm in just over half of the charts reviewed.

The Committee also considered Dr. Watson's response to the MI's report, in which Dr. Watson indicated he does not have any major disagreement with the issues the MI raised. Dr. Watson noted that he had already referred more than half of the patients whose charts the MI reviewed to another physician. He described changes to his narcotics prescribing practice, and education he will take to improve his narcotics prescribing.

As a result of this investigation, the Committee had concerns about Dr. Watson's approach to narcotics prescribing, including the high dosages he often prescribed without sufficient oversight. The Committee also noted that Dr. Watson ignored or disputed recommendations from other physicians regarding tapering or trials of reduction of opioids for several patients.

The Committee noted that its concerns would be satisfied, in part, if an undertaking could be obtained from Dr. Watson to address the issues in question. Such an undertaking was obtained and will be posted on the public register while it remains in effect. The Committee was satisfied that the terms of the undertaking (which include supervision, professional education and reassessment) are important measures to ensure that Dr. Watson's ongoing and future narcotics prescribing is safe and effective for patients. The undertaking further sets out that Dr. Watson will not initiate a prescription for narcotic drugs, narcotic preparations or controlled

drugs, benzodiazepines and other targeted substances and all other monitored drugs to any patient to whom he does not already prescribe such drugs.

While the Committee acknowledged that Dr. Watson had upgraded his management around narcotics prescribing since notification of the investigation and he was following the guidelines to some extent, the Committee noted there was still a long list of changes Dr. Watson is only now beginning to implement. This suggested to the Committee that Dr. Watson's insight is limited, particularly since the Committee had already previously advised him in 2014 regarding the need to follow the (then) current *Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain*, and to have patients sign a narcotics contract.

Therefore, in addition to accepting Dr. Watson's undertaking, the Committee determined that it was also appropriate to require him to attend at the College to be cautioned as set out above.