

01/11/2000 08:55

Sent by: Vicki King/PH6

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cc:

Subject: EARL HOWE'S PQ: ADDITIONAL LINES ON vCJD/HCV COMPENSATION (REVISED)

Charles Lister 31/10/2000 19:20

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Subject: EARL HOWE'S PQ: ADDITIONAL LINES ON VCJD/HCV COMPENSATION (REVISED)

Sue

Thanks to comments from Alan Harvey, I've revised paras 5 & 6 of the attached lines to take. Could you substitute this for the version sent earlier.

Charles

Unstarred Question. HCV Compensation

COMPENSATION FOR HAEMOPHILIACS WITH HEPATITIS C: WHY IS THIS DIFFERENT FROM VARIANT CJD?

Lines to Take

- Variant CJD is a particularly distressing condition. It is incurable, inevitably fatal and devastating in its impact on sufferers and their families alike. Furthermore, many of its victims are young people with most of their adult lives before them.
- The Government is making £1 million available to fund care packages centrally and is strengthening the support that the national CJD Surveillance Unit is able to provide by recruiting additional staff and establishing a Managed Care Network to provide clinical and practical advice to those taking on responsibility for the care of patients with vCJD for the first time.
- In addition, the Government considers even though we are advised that we are unlikely to be legally liable that it is right to make payment to the victims and their families in recognition of their wholly exceptional situation and the fact that the Government is their last resort for help.
- This does not change the long-standing policy in this country that compensation or other financial help to patients is only paid when the NHS or individuals working in it are at fault. We are *not* talking about no-fault compensation but ex-gratia payments for a group of people who, because of exceptional circumstances, have endured and are enduring a particularly harrowing ordeal.
- I deeply regret that so many people with haemophilia were infected with hepatitis C through blood products in the early 1980s. Nothing I am saying today is intended to ignore or belittle the impact of this virus on the lives of those individuals. But the fact is that as soon as a technology became available to make blood products free from hepatitis C the NHS introduced it. There is therefore no legal liability to justify compensation for people with haemophilia and hepatitis C.

• Although many individuals' lives have been devastated by hepatitis C, we need to remember the entire range of circumstances that make variant CJD so exceptional. Total absence of effective treatment, certain and rapid decline into death, the personality changes, the horrifying nature of the disease, the fact that it so often affects the young, the degree of impact on families. This is the dreadful story that the relatives of patients have to grapple with, and which fundamentally sets variant CJD apart.

. . .

• There is, however, much that we can do to help hepatitis C sufferers through improved treatments and services.....