

Witness Name: Dr Alistair Shepherd
Statement No.: WITN3934002
Exhibits: WITN3934003-18
Dated: 25.05.2020

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DR ALISTAIR SHEPHERD

I provide this supplemental statement in further response to a request under Rule 9 of the Inquiry Rules 2006 dated 03 December 2019, having now had the opportunity to consider relevant records and documents.

I, Dr Alistair Shepherd, will say as follows: -

1. I have previously set out details of my career and involvement in relevant committees and societies.

Section 2: Responses to criticism of W0222

2. Since making my initial statement in response to the Rule 9 request I have been able to review the records held by NHSBT with the consent of the witness to whose criticisms I have been asked to respond.
3. At paragraph 12 the witness refers to a letter from NBS. I have already explained that this was a standard letter which had been centrally drafted.
4. The letter is dated 13 January 1997 (**WITN3934003**) and thanks the witness for attending to donate blood. It refers to the fact that as the witness will know, donations undergo a number of screening tests for infections which may be transmitted in the

blood, one of which is an infection of the liver caused by viruses, some of which can be transmitted in the blood. It explains that the witness's sample had been found to contain evidence of past infection with the Hepatitis C virus and that it is possible to become a carrier of this virus without ever having suffered from any illness at all and that even though people who carry this virus can be perfectly well themselves, this finding makes them unsuitable to be donors in the future.

5. The letter continues by explaining that it would be in the recipient's best interests if their family doctor were to be informed of these findings in order to receive a complete laboratory record of the test results. It encloses a form which the recipient is asked to complete to provide the name and address of their general practitioner and sign to give consent to us contacting their doctor.
6. The letter goes on to emphasise that this test result has nothing whatsoever to do with the human immunodeficiency virus which is associated with AIDS and that the sample had also been tested for AIDS and found to be negative. I have tried to explain in my initial statement why this paragraph was included, because of widespread concerns about AIDS at that time.
7. The letter encloses a special factsheet about Hepatitis C produced by the British Liver Trust, which the letter advises, answered the most commonly asked questions and also listed the precautions to be taken to try and prevent transmission to others. It concludes by noting that the abnormal test result does mean that the recipient will no longer be able to donate blood or plasma so that with regret their name has been withdrawn and it takes the opportunity to thank the donor for their interest in the service.
8. I have made a hand-written note at the top of that letter: "Coming to see AJS (me) Mon 20/1/97."
9. The documents I have seen include **(WITN3934004)** a signed copy of the form consenting to a consultant from NBS contacting the GP in order to pass on results of tests carried out in connection with the recent donation of blood/plasma. The form is signed by the witness and dated 20 January 1997.
10. The documents include a hand-written note **(WITN3934005)** made by me, most likely at the time of the meeting with the witness on 20 January 1997. The note records information relating to other family members, an ectopic pregnancy in 1979 for which

the witness had been transfused; notes a previous blood donation 8 years ago in Salford and notes the witness's present and previous addresses.

11. Following the meeting with the witness, on 22 January 1997 (**WITN3934006**), I wrote to the witness's GP at some length explaining that she had donated blood for the first in a number of years and that routine screening for antibodies to Hepatitis C virus had been found to be positive. I enclosed the public health laboratory test results. I noted previous donations including an attempt 3 years previously which had not produced any samples so that testing (at a time after the screening test for hepatitis C had been introduced) had not been carried out. I noted that she had been advised not to make any further donations and that her name would be retired from the list of active donors. It was noted that the only significant risk factors in her past history which might point to possible exposure for blood borne infection were a blood transfusion 17 years previously for ectopic pregnancy and possible occupational exposure as a healthcare assistant. I note that she had been accompanied by **GRO-C** and that our standard policy is to refer donors found to be positive for markers of hepatitis B or C to specialists in gastroenterology or liver disease.
12. The letter to the GP also encloses a copy of information for GPs published by the British Liver Trust and a list of specialists in the north west to assist in referral. It refers also to other family members that the witness was concerned could have become infected and who should, for peace of mind, also undergo screening. It notes that I had explained that the risks of transmission through normal household contact would be minimal, although there was a possibility if there had ever been sharing of a toothbrush or razor. I advised that the witness was understandably anxious, that I hoped that a referral could be arranged reasonably soon and that it would be appropriate to arrange for a repeat hepatitis C antibody test and for baseline LFTs to be performed. I concluded that we would very much appreciate some clinical feedback following referral to the specialist and enclosed a freepost envelope for use in replying.
13. On 22 January (**WITN3934007**) I also wrote to the GP of **GRO-C** **GRO-C**. **GRO-C** had provided the relevant details and consent to this when they attended on 20 January. The letter to **GRO-C**'s GP also enclosed the GP information and list of recommended specialists and a copy of the consent to contact them (**WITN3934008**). A freepost envelope was included to assist the GP in responding.
14. Also on 22 January (**WITN3934009**), I wrote to Dr Shwe, a consultant haematologist at the blood centre in Manchester explaining the position and noting that the witness

would have to be included in the Hepatitis C look back exercise in relation to her previous donation and I asked that Dr Shwe try to trace the donation on the blood service system, PULSE.

15. On 24 January (**WITN3934010**), I wrote to the witness thanking her for letting me know the name and address of her family doctor and confirming that I had passed on the test results and I that thought it might be sensible for her to see her doctor in a few days' time so that he could provide her with up to date information. I said that if she had any further queries she should not hesitate to get in touch with me. I advised again that it would not be appropriate to make any further donations and thanked her again for being a blood donor.
16. On 24 January (**WITN3934011**) I also wrote to GRO-A
17. The documents include a letter (**WITN3934012**) from Dr Love of 5 February noting that they had not been able to trace the witness's earlier donation records and asking if she had donated under a different name; and a letter of 11 February (**WITN3934013**) referring to a telephone call with me in which I had given another address which had also not led to the earlier donation being traced and asking again if she had donated under a different name.
18. There is a handwritten note (**WITN3934014**) dated 12 February advising me that the witness had called to update me with her situation. It referred to testing of others and advised that she had an appointment with a gastroenterologist on 10 March. I wrote to her on 18 February (**WITN3934015**) thanking her for that information and asking if she had changed her name since donating, enclosing an envelope for her reply.
19. The witness's GP sent me by compliment slip of 17 March (**WITN3934016**), a copy of a letter from a gastroenterologist at Hope Hospital noting that he had seen her and concluded she was suffering from hepatitis C carriage. The letter outlined what further steps were to be taken. On 26 March (**WITN3934017**) I wrote to thank him for providing the report.
20. Other documents include a memo (**WITN3934018**) by me to Dr Love of 12 March noting that the witness had contacted me and given further details of the previous donation and the relevant donor surveillance forms and a spreadsheet which records information partly under a coding system which is not relevant here.

Section 3: Other Issues

21. I am afraid that review of the documents has not assisted my memory and I still cannot specifically recall the events recorded above. In accordance with our practice, I tried to do what we could to make sure that appropriate referrals were made and be available to answer any queries in so far as that was possible. I remain very sorry that my discussion was not helpful to this witness and that it caused her such distress. That was certainly not what I intended and I hope she may feel able now to accept my sincere and heartfelt apology.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed _____ **GRO-C**

Dated 25/5/2020

Table of exhibits:

Date	Notes/ Description	Exhibit number
13/1/ 1997	Letter Dr Shepherd to witness W0222	WITN3934003
20/1/1997	Form of consent signed by witness W0222 to contact GP	WITN3934004
20/1/1997	Handwritten note of Dr Shepherd	WITN3934005
22/1/1997	Letter of Dr Shepherd to witness W0222's GP	WITN3934006
22/1/1997	Letter of Dr Shepherd to GP of witness W0222's GRO-C	WITN3934007

22/1/1997	Letter of Dr Shepherd to GP of witness W0222's; GRO-C	WITN3934007
20/1/1997	Signed consent by GRO-C to contact GP	WITN3934008
22/1/1997	Letter of Dr Shepherd to Dr Shwe, Manchester BTC re look back	WITN3934009
24/1/1997	Further letter of Dr Shepherd to witness W0222	WITN3934010
24/1/1997	Letter of Dr Shepherd to GRO-C of witness W0222	WITN3934011
5/2/1997	Letter of Dr Love to Dr Shepherd re inability to trace earlier donation	WITN3934012
11/2/1997	Further letter of Dr Love to Dr Shepherd asking if donation under different name	WITN3934013
12/2/1997	Handwritten note of telephone call from witness W0222	WITN3934014
18/2/1997	Further letter of Dr Shepherd to witness W0222	WITN3934015
17/3/1997	Compliment slip for GP of witness W0222 providing copy gastroenterology report to Dr Shepherd	WITN3934016
26/3/1997	Letter of Dr Shepherd to GP of witness W0222	WITN3934017
12/3/1997	Memo of Dr Shepherd to Dr Love	WITN3934018