

→ Ms Skinner: for file



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From the Secretary of State for Health

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D M Hodgson

As you know we have been giving lengthy and very careful consideration to the Haemophilia Society's proposal that haemophiliacs who have been infected with hepatitis C through NHS treatment should receive special payments.

The Government has proceeded on the basis that compensation or other financial help to particular patients or groups of patients is only paid out where the NHS or individuals working in it have been at fault. The needs of people whose condition results from inadvertent harm is met from benefits available to the population in general. I am sorry to have to tell you that after considering all aspects of this matter we have decided that we should not make an exception to the general rule in the case of haemophiliacs infected with hepatitis C.

Your Society takes the view that haemophiliacs infected with hepatitis C are a special case because the infection comes on top of a pre-existing serious long term medical condition. However the same considerations apply to other individual patients and groups of patients, whether inadvertently infected with another illness or harmed as a result of another medical or surgical procedure who can only obtain compensation if there has been negligence.

You have also argued that as the Government provides financial help to haemophiliacs infected with HIV this scheme should be extended to cover people with hepatitis C.

However we take the view that the circumstances of the people infected with HIV were different. The stigma surrounding HIV at the time the decision was taken, the fact that it was generally considered a sexually transmitted disease and that haemophiliacs could have inadvertently infected their partners were all important considerations which do not apply to Hepatitis C.

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I know that you remain concerned that people, particularly young people suffering from haemophilia are fearful of the possibility of passing on Hepatitis C. You have been discussing with Health Department officials a project to try to meet their need for information and advice. This seems to me a very good way of trying to help directly to improve the health, education and employment prospects of the young people concerned. So if a workable scheme can be agreed I will support the project and help with the necessary funding.

I realise that, although this commitment will be welcome to you, as was my earlier decision to make recombinant Factor VIII available to children under 16 and to new patients, this response on special payments is not what your Society was looking for. This has been a difficult decision to make and we have looked at a number of alternative approaches but I'm sorry to say that none of them seemed the right thing to do.

GRO-C

FRANK DOBSON

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