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*From the Parliamentary Under Secretary of State*

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Marion Roe MP

15 SEP 1998

Thank you for your letters of 6 July and 12 August to Baroness Jay and Alan Milburn enclosing correspondence from Karin Pappenheim, Chief Executive of the Haemophilia Society about the special payment scheme for haemophiliacs infected with hepatitis C through NHS treatment. I am very sorry that our reply has been delayed.

As you will know, on 28 July Frank Dobson announced the Government's decision on this issue. He wrote at the same time to the Haemophilia Society, who have made strong representations on behalf of those affected. Many of their members had also written individually to set out their concerns. Correspondingly, Ministers have thought long and hard about the issues involved.

The Government's position is that compensation or other financial help to patients is only given when the NHS or individuals working in it have been at fault. The needs of people whose condition results from inadvertent harm are met from the benefits available to the population in general. After very careful thought, we have decided that haemophiliacs infected with hepatitis C should not be treated as an exception to that rule.

Frank Dobson has explained to the Haemophilia Society that we have found this a very difficult decision to make and that we have looked at a number of different approaches to the question of special payments, but that none of them seemed the right thing to do.

There is, as you know, a special payment scheme for those infected with HIV through NHS treatment, and one argument which has been put to us is that the position of those infected with hepatitis C is comparable. We take the view, however, that the circumstances of the people infected with HIV were different. The particular 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 anything like the same extent to hepatitis C.



The Haemophilia Society have been developing a project which aims to meet the advice and information needs of young people with haemophilia who have been infected with hepatitis C, and as Ms Pappenheim will know, I have offered support for this. We believe this approach is a forward looking one, which will help to improve health, education and employment prospects of these young people. I am sure that you will share our hopes for its success.

I recognise that the Haemophilia Society will be deeply disappointed. I hope they will accept that the most careful consideration was given to all the points raised with us.

Your sincerely

GRO-C

THE BARONESS HAYMAN