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The Rt Hon William Waldegrave MP
Secretary of State for Health

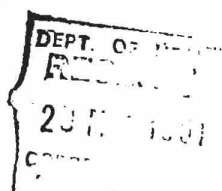
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OUR REF:
YOUR REF: GLR/PA/38000/1

DATE: 16.05.91

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Dear Mr Waldegrave

In October 1986, I was consulted by a haemophiliac who wanted to know whether he could sue the Department of Health as a result of his infection with HIV through contaminated Factor VIII concentrate provided as part of his treatment under the NHS. The need for compensation was desperate, particularly in order to avoid the victims having to face death with the added fears for the financial security of their wives and children which, because of the infection, could no longer be provided through life insurance.

Whilst it was clear that there would be significant legal hurdles, it was felt at the time that there would be a general consensus in the country as a whole to support the payment of compensation in such tragic circumstances

At the outset, I requested from your predecessor an out of court settlement. This was not forthcoming. I, and other solicitors, then proceeded to found the HIV/Haemophilia Litigation Group and its Steering Committee and legal action was launched. Whilst one of your first tasks on appointment to office was to announce a settlement of this case, now being put into effect, it has been a matter of extreme regret that, despite constant and substantial public and political pressure to so do, and leading to two instances of wholly inadequate financial arrangements, it has taken four and a half years, and not until a fixed court trial date was rapidly closing in, that this has come about. In the interim, I and my colleagues have had to reserve the greater proportion of our working lives to a burdensome workload of investigation and preparation for a complex and difficult case whilst the clients have gradually become more and more ill and, in some cases, died without ever knowing the outcome and how their families were to be supported.



This brings me to the purpose of this letter. I am now instructed on behalf of several other patients who have been infected with the AIDS virus through National Health Service treatment. Apart from the fact that they are not haemophiliacs, and contracted the virus not through the by-products of blood, but through the transfusion of whole blood itself, their circumstances are the same.

This letter is being sent to you on behalf of a number of solicitors acting for such victims and who have formed the Transfusion Aids Solicitors Group. This includes Mr Brian Donald of J & A Hastie & Co of Edinburgh, who has previously been in correspondence with your office in this matter. We associate ourselves fully with the content of that correspondence.

Requests have also been made by myself of one of your predecessors for the previous payment to haemophiliacs to be extended to the whole-blood victims, only to be refused. He was also urged to do the same in Parliament. Wholly illogical arguments (such as that these victims did not have a hereditary disease) have been put forward to explain why this small group of patients were being treated in this different way.

I had hoped that with the final settlement of the case of my haemophiliac clients, the the comparatively small additional cost of extending compensation to the transfusion victims would be considered a fair and proper burden on public funds. A former junior minister in your Department had, after all, indicated to Parliament on the 7th March 1990 that the door had not been closed for these victims and indeed pledged to the House to consider the matter with his Ministry colleagues.

It was, therefore, with some dismay that I read an article in the Observer containing a quote from a representative of your Department with the familiar arguments against payment. This matter may have not been put before yourself for detailed and reasoned consideration and it is for this reason that I write this letter.

I ask you now to consider urgently a request to extend the payments being made to haemophiliacs, including the payments made in 1990 under the McFarland (Special Payments) Trust, to all patients who have become infected with HIV through blood transfusions and their families. I would advise you that the Canadian Minister for Health did not attempt to draw the artificial distinction that your predecessors have drawn, extending their compensation payments equally to both groups of victims.

In view of the fact that this matter has been recently raised in parliament and is the subject of an Early Day Motion tabled by Mr Sam Galbraith MP and attendant media

Interest, we are copying this letter to the press and to
serious MPs who have previously expressed interest in the
issue.

Time is pressing on. My clients levels of immunity to
infection continue to drop as time goes by. For most of them
bad news only follows bad news. For once, let me give them
some good news.

Yours sincerely

GRO-C

Graham Ross