Government resists calls to compensate hepatitis C victims

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BY NICHOLAS TIMMINS and MARTIN WHITFIELD

Health ministers yesterday resisted cross-party calls for compensation for haemophiliacs who have contracted hepatitis C from contaminated blood products, amid controversy over how many people may be infected by the virus.

Estimates of the number of people carring the virus ranged from 9,000 to more than 500,000. A pioneering study of current intravenous drug users found that 60 per cent had been affected.

The *Independent* revealed yesterday that 12 British men with haemophilia had died from hepatitis C within the past year. More than 2,000 are believed to have contracted the virus and the figure could be as high as 90 per cent of the 3,122 of haemophiliacs who received the anti-clotting agent Factor VIII before 1986.

Alf Morris, the former Labour Minister for the Disabled, said the principle was exactly the same as that which led to a £42m pay-out in 1990 to 1,200 haemophiliacs who became infected with HIV, the Aids virus, after being given contaminated Factor VIII. But Gerry Malone, the Minister for Health, said: "It would be wrong to embark on a system of compensation unless negligence has been proved by those who have been treated in some way or another. That is a principle by which we will stand." Those infected by HIV had been a special case, suffering social as well as clinical problems. "Some people were deprived of their employment, they were not able to obtain mortgages, insurance, things like that."

A further 3,000 non-haemophiliac patients could have received infection through blood transfusions before a screening test was introduced by the National Blood Authority in 1991. Hepatitis C was only identified positively in 1989.

The Haemophilia Society said it had no plans to seek compensation from the Government at the moment. "It is far too early to say what the needs of people of people with haemophilia and hepatitis C will be. Our priority is to ensure help and support for people who are unwell as a result of hepatitis C," it said.

Heapatitis C, a chronic liver condition, can take up to 20 years to develop and many of those infected show no symptoms for long periods. About 20 per cent are thought to go on to suffer from liver disease.

The British Liver Society warned that up to 500,000 people could be infected and called for government-funded research into the virus. "The treatment for hepatitis C is not particularly successful and we must have the funds urgently to develop proper treatment regimes," Alison Rogers, the society's director, said.

John Marshall, the Conservative MP for Hendon South, one of the leading campaigners for compensation, said what was at stake was a moral, not legal, issue. "The parallels with the HIV compensation are very strong indeed. What has happened in both is that a treatment designed to improve the quality of life has become a suspended sentence of death. That is not what people receive treatment from the NHS for. No one is arguing that the Government has been negligent, but it has to answer at the bar of public opinion, not the bar of law, and the former is more powerful."

Justice for those the NHS infects

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Yesterday's front-page report about haemophiliacs infected with hepatitis C after treatment with contaminated blood has produced a surprising reaction from the Haemophilia Society. To lay observers, there seems to be a strong analogy between this episode involving about 2,000 people, and the earlier case of 1,200 haemophiliacs infected with HIV in the course of treatment. In 1990, the Government agreed to pay them £42m in compensation.

In both instances, those requiring treatment with a blood product picked up a dangerous infection. But yesterday the Haemophilia Society said it had "no plans to seek compensation". Not enough was known, said the society, about how the disease progresses.

This cautious approach has a certain medical logic, since the two infections have very different consequences. Compared with HIV, hepatitis C's advance is far less inexorable. Of those infected, 20 per cent recover quickly, while the rest develop persistent infection lasting many years. About half the larger group will develop a chronic form resulting in inflammation of the liver. Only one in five of those — making 8 per cent of the initial total — will develop cirrhosis of the liver, which is not necessarily fatal. Whereas HIV tends to develop into Aids within 10 years, symptoms of liver disease can take 10 to 40 years to develop. That helps to explain why the Haemophilia Society is playing down the latest scourge to afflict its members. Most of those infected, it pointed out, have had the condition for several decades and remain well.

None the less, 12 men — only males suffer from haemophilia — are understood to have died from hepatitis C as a result of treatment before 1991; four have had liver transplants; and the society concedes that a "small proportion" of others have had severe problems. Their number is likely to increase as the infection takes its course. Furthermore, not only haemophilia sufferers are affected. An additional 3,000 adults and children who received transfusions before 1991 may also be at risk.

Hepatitis C is never likely to be as acute a threat for those who have used blood products as HIV has been, and it will not reach its peak for years. Yet when people fall seriously ill as a direct result of NHS treatment, natural justice dictates that some provision should be made to compensate them. That should apply to haemophiliacs and non-haemophiliacs alike. For the Government to rule out all compensation at this stage, as it did yesterday, is both insensitive and unfair.