## Mackenzie A (Andrew)

From:

Marshall J (Jan)

Sent:

12 May 2005 10:48

To:

Macleod AK (Andrew); Shearer S (Sylvia); Keel A (Aileen); Press Health; Holme C (Chris);

Grant J (Julie)(Press Office)

Cc:

Layden P (Patrick); Mackenzie A (Andrew)

Subject: RE: BBC Frontline Scotland Inquiry

## Andrew

The exec could decline to give a statement to the BBC on the grounds that, whilst not ruling out future cooperation, it is considering its position in relation to legal proceedings which have only this week been commenced. My suggestion had been that the exec refer the BBC to the statement made to the Health Committee as its public position on hep c matters. However I see that the BBC has already picked up on the statement and has asked follow up questions (below). Some of the questions (in red) relate directly to the call for a public inquiry and given the JR proceedings it would not be appropriate to comment further on that issue. It may be that the exec has no further comment to make on any of the other points raised particularly regarding fault of individual clinicians and the particular case of Bill Wright. However, it does appear from the final line of the email that yet further questions are on their way!

Jan

## Questions relating to his response to the Health Committee and our information:

1. The Minister mentions lessons were learnt - can he outline these lessons?

Does the Minister believe in light of the evidence (and minutes) we have supplied - evidence the internal report was not given - that he still "remains to be convinced of the usefulness of a public inquiry". We understood he stated his position might change if new evidence were to come to light.

- 1A In point 2 and 3. The Minister is aware through the earlier report and articles we have submitted etc. that NANB was of concern to many clinicians as early at the late 70s but does not believe there was a consensus of opinion. However, those clinicians were regarded as the experts in the field at the time. Is it not fair to presume their opinion was worth much in order to minimise the risk of infection. One patient we have spoken to was infected as late as 1986.
- 2. In number 4 is the Minister confident that in conjunction with the leaflets he mentions were given to patients of the hepatitis risk - that the doctors made this very plain in routine exams to their patients as well? None of the patients we have spoken to were ever informed of the risks and that had they known they would have chosen safer alternative treatments that were available at the time.
- 3. Did the internal report ever seek to interview patients that had contracted Hep C and study their medical records?
- 4. on point 6. Regarding NHS staff and fault of the SNBTS. We would certainly like to question how fault can not lie with a doctor when a patient is not informed that he has Hep C (and HIV) for nearly 6 years and in this time he has unprotected sex. Are you also aware that a mild sufferer of haemophilia was given Factor VIII in 1986 (case is Bill Wright and a patient of Prof Ludlum) when it had been stated they and people who had never been administered Factor VIII should be given this product due to the known risks.

On the matter of the SNBTS - I hope that given the release of the minutes there are new and further questions to be answered as to whether the heat treatment delay for Scottish Factor VIII was indeed much longer than 18 months. In this time and through this delay into further R&D people were infected whereas had they

resided in England they would not have been infected. Please note earlier evidence summary.

5. Relating to his answer on the distance since an inquiry. As far as it is difficult to handle such a vast and complex inquiry we have managed to track down ourselves many of the key players who are working and if they have retired are well able to respond on this matter. The longer an inquiry is delayed for those both dying and living on borrowed time due to their infection by the NHS seems unacceptable.

Why will the Minister answer is it an immediate response when there is a train crash for instance but when 100s of haemophiliacs are infected by the NHS with viruses is this not a matter of concern enough to justify a public inquiry? Many of those infected do not wish to lay blame but do seek some form of explanation and "compensation" for their loss of quality of life - this includes the families of the deceased. The Inquiry they seek is much wider and would include the infection of HIV.

As agreed I will submit questions relating to the points raised through our earlier submission. I will forward this very shortly

-----Original Message----- **From:** Macleod AK (Andrew) **Sent:** 11 May 2005 17:53

To: Marshall J (Jan); Shearer S (Sylvia); Keel A (Aileen); Press Health; Holme C (Chris); Grant J (Julie)

(Press Office)

Cc: Layden P (Patrick); Mackenzie A (Andrew) Subject: RE: BBC Frontline Scotland Inquiry

Jan – thank you for this

I am attracted to the course you suggest

Frontline have now posed a further detailed set of questions relating to the written evidence the Minister put forward last week to the Health Committee

I have to say my feeling is that all of these questions are directly or indirectly relevant to the matter of whether there should be a public inquiry which is now the subject of judicial review. My preference would be for the Executive to make no further public statement on these matters at this time

Would you support this from a legal perspective?

Alternatively we could offer comments on the substantive issues relating to knowledge of Hepatitis C; how and when this developed; the response of clinicians and SNBTS; and what patients were told. To my mind this would take us into territory which the court might well feel that it wished to look at, and could therefore be unwise at this stage

I would welcome your further comments

Andrew

----Original Message----From: Marshall J (Jan) Sent: 11 May 2005 10:02 To: Shearer S (Sylvia)

Cc: Macleod AK (Andrew); Layden P (Patrick); Mackenzie A (Andrew)

Subject: FW: BBC Frontline Scotland Inquiry

Importance: High

Sylvia

The BBC has asked for a statement from the SE about the matters raised in the

"headings.doc" (doc 1). That document lists a series of 7 headings with bullet points which are cross referred to paragraphs in the "evidencesummary.doc" (doc 2). Paras 1-26 of doc 2 refer to various publications about the state of knowledge regarding the risks of hep c infection and paras 29-55 refer to extracts from minutes of meetings with SNBTS etc (which were presumably recovered under FOI). You don't say whether the exec is inclined to give a statement to the BBC but assuming it is then the question for OSSE is what effect, if any, do the JR proceedings have on how the exec responds.

You will see that heading number 7 on doc 1 is directed specifically at the SE and amongst other things, raises points about the Exec's position regarding a public inquiry eg it asks for the Exec's reasons for declining an independent public inquiry in Scotland. As the question of whether there ought to be a public inquiry is the subject of the JR proceedings it would not be appropriate for the Exec to comment on the points directed at that topic.

As for the rest of the points in doc 1, they appear to be directed at the state of knowledge about hep c and practices in the NHS in the 1970s and 80s. The points raised are very detailed. I wondered whether one way of handling it would be to refer to statements already made to the Parliament - in advance of the Minister's appearance on 10 May did the dept not send the committee a background note covering some of the issues raised by the BBC?

Jan

----Original Message----From: Shearer S (Sylvia) Sent: 10 May 2005 16:35 To: Marshall J (Jan)

Subject: FW: BBC Frontline Scotland Inquiry

Importance: High

-----Original Message----From: Karen Brown-GW [mailto:karen.brown@\_\_GRO-C\_\_]
Sent: 07 May 2005 20:43

Sent: 07 May 2005 20:43

To: gdlj@| GRO-C Holme C (Chris); Press Health; lynne.kidd@| GRO-C |

Cc: Eleanor Bradford; Dorothy Parker Subject: BBC Frontline Scotland Inquiry

Importance: High

Dear Sir/Madam,

As per my e-mail yesterday, I am attaching the detailed concerns which the BBC programme Frontline Scotland would like to raise with the SNBTS, the HCDO and the Scotlish Executive. The programme is taking a fresh look with new and old evidence at the viral infection of haemophiliacs during the 1980s from blood products, namely Factor VIII.

In the main the concerns range from the known risks of infection through transfusion; donor slection; screening/testing precautions, the standard of transfusion facilities and the PFC in Edinburgh; the delay in heat treatment of the Scottish Factor VIII; and how patients were handled by the HCDO/doctors before and after infection.

The main areas we wish to discuss are in Headings.doc and the detail of this attached is in Evidence Summary.doc.

<<Evidencesummary.doc>> <<Headings.doc>>

As stated yesterday we are requesting an interview with a key spokesperson for the SNBTS and the HCDO for Scotland. We could interview from mid-week, over part of the weekend and at the beginning of the following week. For your information, we would not be able to do an interivew any later as the programme will be in edit by May 18th.

We request a statement from the Scottish Executive in response by the end of this working week.

I will be in touch shortly to arrange suitable times for interviews. If you require any further clarification I am contactable on the mobile below on Monday.

Yours sincerely,

Karen Brown

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