Caroline,

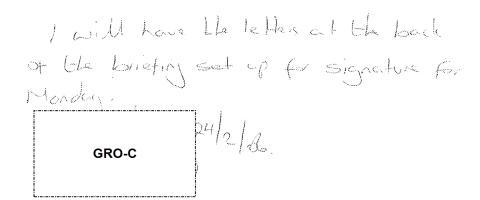
GRO-C

Sophie has asked if you could clear the attached media handling plan and quote by 09:30 Monday morning please. Sophie is duty press officer from midday Saturday to midday Sunday and is happy to discuss the media plan if you wish – her number is ______ or the duty press officer number -

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Professor Arie Zuckerman is the medical expert who has agreed to respond to any media enquires. Professor Zuckerman is a member of MSBTO (The UK Advisory Committee on the Microbiological Safety of Blood and Tissues and Organs) and was Director of WHO Reference Centre on Viral Disease and Viral Hepatitis (1974-2006). He has worked on DH expert committees since the 1970s.

He is familiar with the report and has commented on the briefing and Q&A.



produce a chronology of events and an analysis of the key issues. Some papers had been destroyed from Lord Owen's private office, which are not addressed in this review.

The review concludes that:

- Clinicians acted in the best interest of their patients in the light of the evidence available at the time.
- The more serious consequences of hepatitis C, only became apparent in 1989 and the development of reliable tests for its recognition in 1991.
- Attempts to devise a procedure to make the virus inactive, tests were developed and introduced as soon as practicable.
- Self sufficiency in blood products would <u>not</u> have prevented haemophiliacs from being infected with hepatitis C. Even if the UK had been self sufficient, the prevalence of hepatitis C in the donor population would have been enough to spread the virus throughout the pool.

There has been media attention recently around this issue as Lord Warner recently announced a Lords PQ which referred to the review and in particular the destruction of papers. His comments are attached at Annex B along with a DH position which was used at the time in response to media enquiries.

Risks and Considerations

There will be criticism from several haemophilia pressure groups who have campaigned for compensation and a public inquiry into why haemophilia patients received infected blood products. They argue that the Government and some clinicians knew about the risks, yet allowed infected products to be used in their treatment. Publication of this report is unlikely to satisfy these groups. They will continue to make demands for a public inquiry.

There may also be accusations that the report took so long to be published. The reason for this was having to check for accuracy of the report which took a significant amount of time. In 2004, officials commissioned independent consultants to analyse the papers and finalise the report. We have also consulted with colleagues in the devolved administrations, BPL, National Blood Service and some clinicians for factual accuracy.

We should also expect more claims in the media for compensation payments and a full public enquiry. At present the Skipton Fund administers ex-gratia payments to alleviate the suffering of people infected with hepatitis C but not to compensate for bereavement.

There could also be criticism that the review has not been an accurate representation of events because of the destruction of papers, as referred to in Lord Warner's debate in the House of Lords at Annex B.

Officials have provided briefing covering these points.

Handling

Given the likely criticisms that will arise, we have to balance the requirement to get this review out in to the public domain whilst preventing the story getting significant media attention.

A factual press notice has been drafted at Annex A which sets out the conclusions of the report and where it can be found on the DH website. I have included a short quote from you, which refers to the fact that self sufficiency was the aim pursued by the Government in the 1970s and 1980s and that no wrongful practices were carried out at this time.

If we do get interview bids, media centre are sourcing an expert on blood products that we can point journalists to. They will be able to provide the background to how blood products were used in the 1970s and how little was known about Hep C at that time. It would be preferable to keep the story as factual as possible to avoid the emotional debate that the haemophilia groups will try to start.

If the story generates to a level where it is difficult to avoid putting up a Department of Health Minister, we suggest that you accept national media bids. Media centre will provide a script to accompany the briefing from the policy team.

Summary

Do you agree to the following media handling arrangements:

- Media centre to put out the press notice (Annex A) on Monday morning.
- Journalists to be directed to medical expert in the first instance.
- For you to accept bids should the story escalate.
- A briefing note and Q&A from the blood policy team will-follow. المحالة على المحالة المح

Sophie Coppel COMMS GRO-C