

Witness Name: Andrew Michael March

Statement No: WITN1369014

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INFECTED BLOOD INQUIRY

EXHIBIT WITN1369042



My address
London

GRO-C

11th July 2017

Dear Andy,

It is looking increasingly likely that the contaminated blood scandal will be brought before the courts, as well as a possibility of criminal charges being investigated by the police. In light of this we wish to remind people of the reasons we have arrived at this point:

1: Failure to heed warnings.

The first known case of HIV infection in a British haemophiliac was in August 1983. According to FOI material held by the Scottish Executive, the government knew as early as March 1972 there were serious problems with contaminated blood with resulting hepatitis infections in this cohort. The first warning from the World Health Organisation was in 1974, with a further warning in 1975. Both were ignored, along with a key warning letter from Dr Garrott-Allen in 1975. Had these warnings been heeded and acted on, it is likely that HIV infections in British haemophiliacs would have been avoided.

2: Failure to Achieve Self-Sufficiency

Despite the warning from the WHO in 1974 not to import blood from areas with a high prevalence of Hepatitis, money allocated to achieve self-sufficiency on blood and blood products was 'diverted to other purposes', thus resulting in a shortage of safe blood products.

3: Deliberate Phasing out of Cryoprecipitate.

From around 1977, the UKHCDO made the deliberate decision to phase out the use of cryoprecipitate, a much safer treatment for haemophiliacs with clear advantages over concentrate, one of which was that it could be prepared very quickly, (from donations to finished product in only 24 hours). Even in 1983, when Dr Jane Desforges recommended cryoprecipitate rather than concentrate because of the risk of AIDS, no effort was made to revert back.

4: Wasting the Advantage from a 2-3 Year Time Lag

Infections in American haemophiliacs took place approximately 2 – 3 years before those in the UK, but a detailed study of haemophilia-associated AIDS cases had not been possible in the USA. Instead of using this time to do everything possible to ensure the safety of British haemophiliacs, the decision was made by the MRC to watch and monitor the spread of HIV into the UK: *"The underlying immunological and virological status of the high risk groups before they encountered the AIDS agent could thus be defined... ...It was thought that suspect blood products could provide valuable raw materials for work of this type."*

5: Identification of PUPS/Virgin Haemophiliacs

The UKHCDO directed haemophilia centres in the UK to identify patients who had never been treated with commercial product, in order that they could be used to test heat-treated products on. By default, these were babies, children and mild haemophiliacs. Many of these patients subsequently developed Hepatitis C and we suspect others also developed HIV. These trials appeared to extend to children who were residential students at a Hampshire school for disabled children.

6: Infectivity Trials on "Human Subjects"

Of particular note is the Colombo Trial of 1982-85, where Previously Untreated Patients (PUPs) were used in trials of heat-treated Factor VIII in the midst of the AIDS crisis. Having found an animal model using chimpanzees to be ineffective, it was decided by Professors Mannucci and Colombo to begin infectivity testing on human subjects, most of whom (87%) were children and babies. Sadly, hepatitis developed in 11 of the 13 "first-exposure, or "virgin" patients".

7: Use of the Official Secrets Act & Shredding Official Documents

It is well documented that official documents, such as those from the office of Lord David Owen, were shredded. We have anecdotal evidence from someone who was employed at the Department of Health through a Job Centre placement, that on arrival, they were immediately made to sign the Official Secrets Act, and set to work shredding vast amounts of government documents based on whether the documents contained a list of certain key words. This is a far cry from "inadvertently shredded by a junior Civil Servant".

8: Non-Consensual Testing & Withholding Test Results

TaintedBlood has heard many accounts from people who were tested for viruses without their consent, and that results were withheld from them by doctors, thus putting sexual partners at

unnecessary risk. We know of instances of minors being informed of their HIV status or Hepatitis C diagnosis without their parents being present. Some haemophiliacs were informed of the infections through the post, causing great distress. This non-consensual research amounts to breaches of the Nuremberg Code.

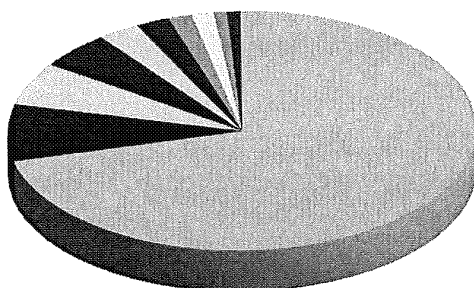
9: Use of Crown Immunity

The Department of Health, BPL and Health Authorities hid behind the aegis of Crown Immunity, avoiding prosecution in the English courts. This meant that the Medicines Act was not binding on them, and they were able to get away with circumnavigating the law on unethical trials, lack of consent, licensing issues, poor manufacturing standards, and liability for breaches as well as allowing a vital production plant to become dilapidated and unfit for the processing of medicinal products, which despite the fact it was clearly a condemned facility, they somehow avoided it being closed down.

10: Failure to Adopt a Precautionary Approach

The DHSS failed to take a precautionary approach regarding AIDS and the risk posed by contaminated blood products, yet at the very same time, they afforded significant concern to the hazards facing Health Care professionals; The Department of Health failed to fully adhere to the Council of Europe's Lisbon Recommendations to take all necessary steps and measures in respect of AIDS, particularly in relation the risk from large plasma pools. The Department of Health, NIBSC and the CSM took an unjustifiably optimistic attitude to the epidemic, failing to ban imported commercial Factor VIII made from pre-March 1983 source plasma which they had been warned was contaminated.

UK disasters and their death tolls



- Kings Cross Fire - Full Public Inquiry
- Paddington Rail Crash - Full Public Inquiry
- Marchioness Disaster - Full Public Inquiry
- 7/7 London Bombings - Large Police Investigation
- Grenfell Tower Fire - Full Public Inquiry
- Hillsborough - Full Public Inquiry
- Piper Alpha - Full Public Inquiry
- Herald of Free Enterprise - Full Public Inquiry
- Lockerbie Bombing - Full Criminal Inquiry

■ Contaminated Haemophilia Blood Products - No Inquiry or investigation

Here you can clearly see the reasons why we believe the contaminated blood community is entitled to an inquiry, independent of government, that examines the circumstances behind the infections of almost 5,000 people and the subsequent deaths of around 2,000 of the to date.

We believe that there are two reasons that explain why we have never been given a public inquiry:

1. If culpability were to be proven, as we are sure it would, this would involve government Ministers, bodies and departments at the very highest level. This is why we believe it is wrong for government itself to have any role in convening an inquiry or selecting the inquiry team – this must be done independently and with full victim involvement throughout.
2. We have evidence to show it was realised at a very early stage that to properly compensate victims the costs would be high, and the decision was made to just award *ex-gratia* payments. It appears that this decision has been adhered to for decades, resulting in thousands of families living with an income barely above the poverty line.

We are able to provide evidence of all these points and are happy to forward it (with references) to you, should you wish.

Yours sincerely,

Andrew March
TaintedBlood