

RECEIVED 10 FEB 2005



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09/02/05

Dear Martin,

Assisted Conception

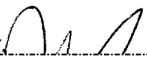
Thank you for your letter dated 31 January.

Having taken up this post fairly recently, I am still familiarising myself with the various aspects of the job, including the detailed terms under which the Macfarlane Trust was established and set up. I hope you will therefore forgive the slight delay in replying.

As I understand the situation, the Trust was set up by the Government to provide assistance for people with haemophilia who, because of receiving infected blood products through the NHS in the UK (registrants), subsequently found that they have contracted HIV or Aids. The Trust's aim is to provide them, their spouses, and other dependants, with financial assistance, in recognition of their status and to help them deal with the additional financial burdens, which they incur due to their HIV status.

The Government has also recognised that the provision of NHS fertility services has been uneven, and in 2001, it commissioned the National Institute for Clinical Excellence to produce a clinical guideline. The guideline was published in February last year, and it can be accessed on www.nice.org.uk. In welcoming the guideline, the Secretary of State said that the Department would be looking to primary care trusts that provide no IVF treatment to meet a minimum national level of provision of one cycle of IVF by April 2005, and to make progress to full implementation of the guideline in the longer term. He also advised that the priority is to help those in greatest need - which must mean couples with no children living with them. We recognise that the NHS already makes a number of treatments other than IVF available.

I do not therefore feel that providing additional assistance for registrants of the Macfarlane Trust, to undertake treatment programmes for assisted conception, would be appropriate.

Yours sincerely, 

GRO-C

William G Connon