

PEH/mm/clifton

26 May 2000

Miss Lorraine Clifton
Chief Executive
Ealing Hospital NHS Trust
Uxbridge Road
Southall
Middlesex

✓ → file

Dear Miss Clifton

In 1995 the Department of Health announced an HCV lookback programme, to identify recipients of blood believed to be infected with hepatitis C before the introduction of routine screening of all blood donations for hepatitis C infection in September 1991. The lookback programme was set out in the CMO letter PL CMO(95)1. The NHS Executive issued HSG(95)23 in April 1995, which was sent to all General Managers and Chief Executives of Trusts.

The HCV lookback procedure clearly made significant demand on resources. At the North London Blood Centre, all units of blood and blood components issued to hospitals between 1981 and 1991, and subsequently identified as related to donors who had tested anti-HCV positive, were traced. Each hospital was provided with a composite list of relevant blood components, and individual forms for each component. The bulk of the information was provided to Consultant Haematologists in charge of blood transfusion laboratories in April 1995. Since then, a number of additional donations have been added, as further HCV positive blood donors have been identified. To date, 26 such forms have been forwarded to Dr. Hegde, Consultant Haematologist, and none have been returned, despite reminders.

The purpose of the HCV lookback exercise was to identify recipients of blood who may have been infected with hepatitis C before the availability of screening tests. Such recipients could be notified of the situation, offered testing, and appropriate intervention if indicated. Although the majority of recipients from the period in question are dead, the lookback exercise has identified some individuals who are alive and infected with hepatitis C, who have been given the opportunity of further medical assessment and consideration of treatment. Unfortunately, as no forms have been returned from Ealing Hospital there may be living recipients who have been denied

the opportunity to make decisions about testing and the possibility of medical intervention if necessary. The Department of Health has now asked me to bring the matter to your attention, in an effort to ensure that, as far as possible, no living recipients will be disadvantaged by the failure of your Trust to complete the exercise.

Yours sincerely

GRO-C; Dr A Robinson

Copy: Dr. Sue Atkinson, Regional Director of Public Health, London
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