

Witness Name: **GRO-B**

Statement No.: WITN1991001

Exhibits: WITN1991002-WITN1991017

Dated: 17 December 2019

EXHIBIT WITN1991013

INFECTED BLOOD PUBLIC INQUIRY



DEPARTMENT OF
GASTROENTEROLOGY

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TEB/KLP GRO-B

20th January 1997
(clinic: 17th January 1997)

PRIVATE AND CONFIDENTIAL

Dr GRO-B

GRO-B

Dear GRO-B

Re: GRO-B

I saw GRO-B today with his wife. For obvious reasons they have done quite a bit of their own reading about his HCV status. I explained that we need to assess further his level of infectivity and the level of activity of the HCV RNA. I also explained that there are different genotypes of hepatitis C and I have requested some genotyping of this as well. Essentially about 70% of patients with anti-HCV would progress to chronic problems and 30% to cirrhosis. The idea is to try and catch people in the pre-cirrhotic stage and to offer them interferon therapy if this is appropriate. At the moment there are quite stringent indications for interferon therapy on the basis of RNA levels and genotype. Therefore, we are in a position at the moment that we have to assess the virology in more detail as well as the anatomy. In the first instance I have simply asked for some special blood tests and in due course will do an ultrasound and will probably need to proceed to a liver biopsy. For confidentiality GRO-B his blood tests have been sent under the pseudonym of GRO-B

I have also counselled the two of them in terms of their sexual relations. There is about a 5% risk of horizontal transmission between partners. They have had a full open relationship without barrier contraception since the transfusion in 1989 and there seems little point in insisting on barrier contraception now. My approach in these situations where there is a stable relationship is to simply explain the risks of transmission and let them make up as to what they want to do. I have also suggested to GRO-B's wife as to whether she wants to get tested because there is a 6% chance of vertical transmission from her to her child whom she breast fed for 9 months a few years back. Clearly if she is positive there is a chance that her child will also be infected.

continued....

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The only other issue that I mentioned to [GRO-B] is the issue of HIV infection. If blood transmitted the HCV virus it may easily have transmitted the HIV virus. I would think, however, that the blood transfusion service would have already checked this but [GRO-B] is going to clarify this with them.

As you can see these issues really are very messy and it is no wonder that there is a clamour of financial compensation from the Government. I will keep you fully informed of the progress.

Yours sincerely

Dr T E Bowling
Consultant Physician

(Dictated by Dr T E Bowling and Signed in his Absence)