

Witness Name: Dr Allan John Morris

Statement No.: WITN3362001

Exhibits: WITN3362002

Dated: 10 November 2021

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DR ALLAN JOHN MORRIS

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 14 June 2019.

I, Dr Allan John Morris will say as follows: -

Section 1: Introduction

1. Dr Allan John Morris, Gastroenterology Department, Glasgow Royal Infirmary, 84 Castle Street, Glasgow G4 0SF

Date of Birth GRO-C61

MBChB FRCP UK

2. Consultant Gastroenterologist, Glasgow Royal Infirmary, Glasgow 11/1995 - current appointment.
3. Previously I assisted Lord Penrose with his Inquiry into Hepatitis C, in particular, I addressed topic C5 and C6 within the terms of reference of the Inquiry including the information given to patients and their family along with information on the treatment and its impact on patients and their families (PRSE0003464).

Section 2: Responses to criticism of Mrs Eileen Patricia Dyson

- 4. In paragraphs 15 to 18 of her statement, Mrs Dyson states that the manner in which she was told of her Hepatitis C diagnosis was improper and unprofessional. She states that you were evasive when asked questions about how she might find out if her blood transfusions were infected with Hepatitis C. Mrs Dyson further states that you, your colleagues, did not offer her any support following her diagnosis and that no advice was given regarding cross infection to any member of her family. Please comment on this.**
- 5. At paragraph 17 of her statement, Mrs Dyson states that she should have been told earlier about her diagnosis. Please comment on this.**

In response to the issues raised in paragraph 15 of the Witness Statement, I would like to confirm that I was not a Consultant in Gastroenterology at Glasgow Royal Infirmary in January 1994 I was Senior Registrar in General Medicine and Gastroenterology, at Glasgow Royal Infirmary, from 1992-95 with the exception of periods when I was in Birmingham and the USA receiving dedicated training. I was appointed as a Consultant in November 1995 to present. Unfortunately, some of the Medical Records relevant to the clinic consultations especially between November 1993 January 1994 are no longer available. However, I do not believe I was the doctor identified by Mrs Dyson to have been involved in her care in 1993/1994.

The previous Glasgow Royal infirmary and Monklands hospital case records relating to the period 1993 to 1994 have been destroyed. I have now received copy of this hospital correspondence sent as clinical courtesy copy from Glasgow Royal Infirmary to Wishaw Hospital Lanarkshire during this time (WITN3362002) . This clearly shows that Mrs Dyson's consultant at that time was Professor Robin Russell (deceased) and the junior doctor who saw her with her husband was Dr D K George. Dr George saw her at the clinic consultation she describes in December 1993 where Mrs Dyson was informed about the diagnosis of Hepatitis C.

In Autumn 1994, whilst a Senior Registrar in Gastroenterology at Glasgow Royal Infirmary, I did spend a period of 3 months in the Liver Transplant Unit in Birmingham with Dr David Mutimer for specific training in the management of patients infected with Hepatitis C. In particular I received training in the Assessment and Management of

Haemophiliac patients infected with Hepatitis C as it was planned that I should commence a specific dedicated Hepatitis C Clinic at Glasgow Royal Infirmary, the location of the Regional Haemophilia Centre, on my return from a period of further training in USA in 1995 in advanced endoscopy techniques. It is very unlikely that I had met Mrs Dyson at all during the period covered in her witness statement paragraphs 15-18. Mrs Dyson was cared for by Dr George, Registrar and Professor Robin Russell, Consultant. The unit in 1993 functioned as two separate parts in geographically distinct areas of the Royal Infirmary. Dr George being the Registrar for Professor Russell then it was highly likely that I was attached to Dr J F MacKenzie as Senior Registrar. I cannot say absolutely that I did not meet Mrs Dyson but I would not have had any significant input to her care including any conversations/detail regarding her hepatitis C. The likelihood of my meeting Mrs Dyson in 1993/94 are very low indeed.

A significant part of the Training and Management that I received was about clear communication in an open and supportive environment with the patient and family of an individual infected with the Hepatitis C virus.

In November 1995, I initiated a dedicated Hepatitis C clinic at Glasgow Royal Infirmary. In the initial phase only patients with inherited bleeding disorders were appointed to my clinic. In early 1996, we appointed a Clinical Nurse Specialist who was also trained on the clinical, social and emotional issues faced by patients who had unfortunately become Hepatitis C infected.

We developed patient specific pathways and protocols and a major emphasis at that time was on accurate verbal and written communication delivered in a supportive environment. We developed our own information sheets and were able to guide patients to websites where we felt the information available was likely to be accurate and helpful although limited in scope. In addition, we formed direct links with Dr Roger Wong, Consultant Psychologist and when we identified patients who had ongoing psychological issues a direct referral was made. At all times we recognised the emotional, psychological and social impact of the diagnosis of Hepatitis C.

From the time of my appointment at Glasgow Royal Infirmary in 1995, I was aware of the Scottish National Blood Transfusion look back exercise identifying individuals infected with Hepatitis C through blood transfusion and blood products. We were specifically excluded from dealing with these patients at Glasgow Royal Infirmary as

the Scottish National Blood Transfusion had a policy to refer those patients directly to my colleague, Dr Peter Mills at Gartnavel General Hospital in Glasgow.

At the time of diagnosis at the Hepatitis C Clinic, which I established, patients were always invited to bring a family member with them to the clinic and if they opted to do so were given the option of having that family member present with them during consultation. Many patients with Hepatitis C declined initially to inform their family of the diagnosis but we always encouraged them to share this information and explain the rationale for doing so. If a patient requested that we speak with a family member individually then it was my policy to arrange this.

On review of our Hepatitis C database, I can see that I did receive an initial referral letter regarding Mrs Dyson on 3rd October 1997 to my consultant clinic and met with her for the first time on 14th November 1997. She was last seen in my Outpatient Clinic in January 2000.

I am unable to comment on the content of conversations that allegedly have occurred and the experience that Mrs Dyson feels that she endured in the early phase of the diagnosis and treatment of her Hepatitis C at Glasgow Royal Infirmary.

I do not recognise the accuracy of the actions alleged by Mrs Dyson on my behalf during her care, especially as the medical record clearly shows it was another consultant involved in her care and my consultant appointment does not match the timing of allegations made of my care.

Section 3: Other Issues

1. With the permission of the Inquiry, a search has been made of the General Practitioner Medical Record, Wishaw hospital clinical letters containing discharge summaries and clinical records but in addition the Scottish National Hepatitis C database to establish statement of fact.
2. Whilst I regret the distress Mrs Dyson may have experienced and she has my sympathy, I wish the Inquiry to be aware of the personal distress and reputational damage that I perceive I have experienced as a result of inaccurate allegations made and published without verification. I wish to request the record be amended to record these inaccuracies.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed _____

GRO-C

Dated _____

10/11/21.

Table of exhibits:

Date	Notes/ Description	Exhibit number
	Report prepared by Dr Morris on Hepatitis C for the Penrose Public Inquiry	PRSE0003464
	Lanarkshire Health Board Records (Monklands Hospital)	WITN3362002