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Blood products victims 'failed by official delays'

By Rebecca Smith
Medical Editor

HAEMOPHILIACS became infected with hepatitis and HIV through contaminated blood products while the Government procrastinated, an inquiry into the "catastrophe" has claimed.

It concluded that imported blood products continued to be used despite concerns they

could be contaminated. Procrastination by officials during the Seventies and Eighties meant that many people became needlessly infected with the viruses.

The fiasco, which saw 4,670 people infected with hepatitis C and one quarter of those also infected with HIV, was the "worst treatment disaster in the history of the NHS", according to Lord Morris of

Manchester, who organised the inquiry.

Of those infected, 1,757 have since died.

Blood products were imported from America where donors were paid, so they often came from prisoners and drug addicts, which increased the likelihood of contamination.

The companies which processed the blood also made a

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profit. Lord Archer of Sandwell, the chairman of the inquiry, said commercial priorities

must never again override the interests of public health.

The inquiry recommended that those affected should receive compensation equal to that given in a similar case in Ireland, thought to be around £350,000, and should receive free care.

The report concluded: "The procrastination in achieving national self-sufficiency to avoid the use of high-risk

blood products from overseas had disastrous consequences. Had self-sufficiency been achieved earlier the scale of the catastrophe would have been significantly reduced."

However Lord Archer said: "It is a bit late and a bit pointless to say 'who is to blame?' What is important now is to try to remedy the condition of people who have suffered."

Dr Charles Hay, the chair-

man of the UK Haemophilia Centre Doctors' Organisation, said that it was a misconception that the hepatitis C risk would have been lower if patients were given British products instead of American. He added that if self-sufficiency had been achieved then a larger proportion of haemophiliacs would have been exposed to blood from donors who developed vCJD. He said:

"The patients were managed according to the best information available at the time."

The Department of Health said: "Steps to safeguard blood products against HIV and hepatitis C have been in place since 1985. In addition, every reasonable step to minimise risks from blood transfusion has been taken."

Editorial Comment: Page 21

Pay EU hospitals to treat British patients, say Lords

By Nick Allen

PATIENTS should be given greater rights to travel abroad for operations and have them paid for by the NHS, according to a House of Lords committee.

In a report on cross-border health care, the Lords backed European plans to formalise the system under which EU citizens can travel to other member states for treatment.

They said that the NHS should pay fees directly to foreign hospitals, rather than requiring the patient to pay first and make a claim for reimbursement.

A patient's right to receive health care in other EU states was established in 2006 when the European Court of Justice ruled that Yvonne Watts, from Bedford, should be reimbursed by the NHS for £3,600 she spent on a hip replacement operation in France.

The ruling applies to patients facing "undue delays" for operations in Britain.

In a draft directive clarifying the new rights, published last July, the EU health commissioner, Androulla Vassiliou, said: "It will allow excessive demand in one country to be met by excessive capacity in

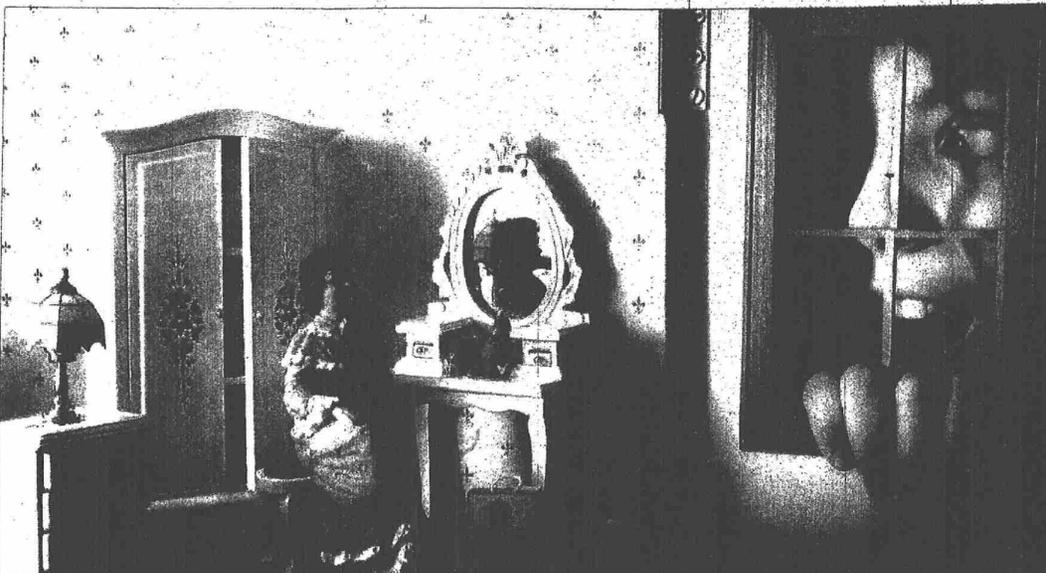
another country." Reporting on the directive, the House of Lords EU committee said it was "essential" that clear rules be established for cross-border health care and that a legal framework replaced the current, ad hoc arrangements.

While warning of the "unpredictable impact" of the directive, the Lords raised concerns that less well-off patients would miss out on cross-border health care if they had to pay for treatment and claim reimbursement later. Instead, British health care providers should arrange to pay the fees directly as part of the process of authorising treatment, they suggested.

More should also be done to ensure that British hospitals could refuse to accept a patient from another country if it would increase waiting times for local patients, the committee said.

The committee's chairman, Baroness Howarth of Breckland, added: "We don't know yet what impact the directive will have on the numbers of patients wanting to travel to and from the UK for treatment. It is important the directive's impact is carefully monitored."

Through the looking glass Doll's house wonderland



Nine-year-old Emilia Torsello resembles Alice in Wonderland as she takes in the delights of the Doll's House and Miniature Fair in Plymouth at the weekend

Favourite tunes could slow progress of Alzheimer's

PATIENTS with Alzheimer's disease could slow its course by listening to their favourite songs, a study suggests.

Researchers found that certain tunes from a patient's past evoked vivid

of memory caused by the disease.

Making a "soundtrack of someone's life" could help to build a resistance to the disease, said Professor Petr Janata of the University of California, Berkeley, who

brain activity of 13 students as they listened to 30 favourite songs, his team found that the section of the brain associated with music was also linked to our most vivid memories.

seems to be most immune to the effects of Alzheimer's disease.

"One of the long-term goals is to use this research to help develop music-based therapy," said Prof Janata in the study, published in the

journal *Cerebral Cortex*. "Providing patients with MP3 players and customised playlists could prove to be a quality-of-life improvement strategy that would be both effective and economical."

Diabetes rise faster in Britain than US

By Rebecca Smith

NEW cases of diabetes have risen by 74 per cent in six years: a faster increase than in America, according to a study.

In the 10 years to 2005, 42,642 Britons were diagnosed with either Type 1 diabetes, which affects young people of a healthy weight, or Type 2 diabetes, which normally develops at a later age in those who are overweight or obese.

While new cases of Type 1 diabetes remained constant, there was a 69 per cent increase in the number of Britons with Type 2, the study by the Spanish Centre for Pharmacoepidemiological Research in Madrid found.

Researchers, writing online in the *Journal of Epidemiology and Community Health*, said that number of Britons with Type 2 diabetes rose by 74 per cent between 1997 and 2003.

"Our results suggest that, although the incidence of diabetes remains lower in the UK than in the USA or Canada, it appears to be increasing at a faster pace, said Elvira Masso González, the lead author.

Douglas Smallwood, the chief executive of the charity Diabetes UK, said: "This research is a sad indictment of the state of the UK's health."

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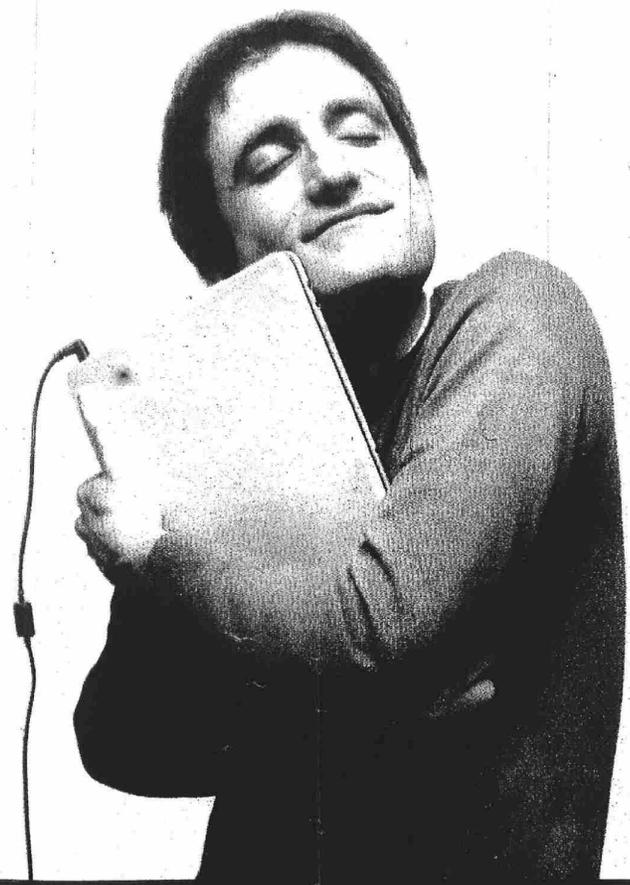
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