

SMALLER HAEMOPHILIA CENTRES

NOTTINGHAM COMPREHENSIVE CARE CENTRE

The Centre

1. The Comprehensive Care Centre¹ at Nottingham was designated as Centre number 44. In 1976 the Centre was confirmed as a 'DHSS designated treatment Centre.'²
2. The joint Directors of the Centre were Dr T E (Ted) Blecher and Dr E A (Alec) French from at least 1976-1986.³ By 1990, Dr Blecher was the sole Director.⁴ A witness to the Inquiry recalls that Dr French left in the late 1980s and was replaced by Dr Gerry Dolan.⁵
3. The Nottingham Centre was part of the University Hospital at Queens Medical Centre,⁶ which came under the Trent Regional Health Authority.⁷ On 26 June 1987, Dr French wrote to Sister Jane Kershaw at the Treloar Haemophilia Centre commenting on the facilities at the Centre:

"Thank you for your letter of the 12th June, which found its way to me. This is because we do not at present have a Sister or Staff Nurse here with specific responsibilities for haemophilic patients. My own view is that this is an unfortunate situation and the lack of such a person is due to a number of local factors, chief of which is that the Haematology Department's accommodation in this gigantic new teaching hospital was planned and built without benefit of any advice from any haematologists and there is no clinical area specifically identified as "The Haemophilia Centre" where a Haemophilia Sister could work. The nursing care of haemophiliacs is therefore divided between staffs of Adult and Paediatric Medical Wards, the outpatient clinics and the A&E Department. It works better than you might think but is obviously not ideal.

¹ PRSE0000579

² OXUH0003621_003

³ DHSC0046621_153 and see annual returns data referred to below

⁴ HCDO0002399

⁵ WITN0006001

⁶ ARCH0002974

⁷ OXUH0003621_003

Dr. Blecher and I are both keen to maintain the close liaison with Treloar concerning the patients which we share and we both appreciate very much the very full information which has reached us at regular intervals during the boys' stay with you.”⁸

Relationship with other Haemophilia Centres

4. The Centre formed part of the Sheffield Supraregion.⁹
5. As can be seen from the letter cited at paragraph 2 above, the Nottingham Centre shared care of patients from within its area who attended the Lord Mayor Treloar School.

Number of patients treated

6. In 1982, there were 38 haemophilia A patients, 5 haemophilia B patients and 3 von Willebrand's patients treated at the Centre.¹⁰
7. In 1983, there were 36 haemophilia A patients, 2 haemophilia B patients and 3 von Willebrand's patients treated at the Centre.¹¹
8. In 1984, there were 37 haemophilia A patients, 6 haemophilia B patients and 2 von Willebrand's patients treated at the Centre.¹²
9. In 1985, there were 41 haemophilia A patients, 4 haemophilia B patients and 4 von Willebrand's patients treated at the Centre.¹³

⁸ TREL0000005_086

⁹ CBLA0000699; HCDO0000138_012

¹⁰ HCDO0001656

¹¹ HCDO0001752

¹² HCDO0001846

¹³ HCDO0001941

Blood products usage

10. A witness to the Inquiry recalls being given a porcine blood product in 1975, and factor VIII concentrate from 1980.¹⁴
11. In 1981, Dr Blecher wrote to Dr Aronstam at Treloar Haemophilia Centre that home therapy for patients at Nottingham was provided using freeze dried factor VIII concentrate.¹⁵
12. In 1982, the Centre used 1229 bags (86,030 units) of cryoprecipitate at the hospital; 6,305 units of NHS factor VIII at the hospital and 121,000 units for home treatment; 23,361 units of Abbott Profilate at the hospital and 48,023 units for home treatment; 11,910 units of Armour Factorate at the hospital and 44,095 units for home treatment; 12,220 units of Cutters Koate at the hospital and 35,220 units for home treatment; and 9,710 units of Hyland Hemofil at the hospital, all for the treatment of haemophilia A patients. The Centre used 30 bags of cryoprecipitate and 720 units of NHS Factor VIII for treatment of von Willebrand's patients. The haemophilia B patients received NHS factor IX concentrate in hospital and for home treatment.¹⁶
13. In 1983, the Centre used 800 bags (56,000 units) of cryoprecipitate at the hospital; 19,290 units of NHS factor VIII at the hospital and 248,890 units for home treatment; 727 units of Alpha Profilate for home treatment; 3,150 units of Armour Factorate at the hospital and 26,080 units for home treatment; 29,605 units of Cutters Koate at the hospital and 29,920 units for home treatment, all for the treatment of haemophilia A patients. The Centre also used 28 bags (1,960 units) of cryoprecipitate for treatment of von Willebrand's patients at the hospital. The haemophilia B patients received NHS factor IX concentrate in hospital and for home treatment.¹⁷

¹⁴ WITN0006001

¹⁵ TREL0000184_008

¹⁶ HCDO0001656

¹⁷ HCDO0001752

14. In 1984, the Centre used 107,830 units of cryoprecipitate at the hospital; 24,230 units of NHS factor VIII at the hospital and 365,040 units for home treatment; 500 units of Armour Factorate at the hospital and 7,500 units for home treatment; 3,540 units of Cutters Koate at the hospital and 7,620 units for home treatment; and 30,298 units of Immuno Kryobulin for home treatment, all for the treatment of haemophilia A patients. The Centre also used 1,890 units of cryoprecipitate for treatment of von Willebrand's patients at the hospital. The haemophilia B patients received NHS factor IX concentrate in hospital and for home treatment, as well as 15 bottles of plasma.¹⁸
15. In 1985, the Centre used 1,905 units of cryoprecipitate at the hospital; 47,435 units of NHS factor VIII at the hospital and 460,810 units for home treatment; 1,080 units of Armour Factorate at the hospital and 41,805 units for home treatment; and 1,006 units of Immuno Kryobulin at the hospital and 3,018 units for home treatment, all for the treatment of haemophilia A patients. The Centre also used 50 units of cryoprecipitate for von Willebrand's patients at the hospital. The haemophilia B patients received NHS factor IX concentrate in hospital and for home treatment.¹⁹
16. In March 1985, Dr French requested heat-treated Factor VIII concentrate from BPL on a named-basis for seven patients.²⁰ In response, Mr Pettit (BPL) stated that Portsmouth had missed the deadline for providing patient lists for the heat treated product and that only 50-60% of the requested product could be issued for May and June 1985.²¹

Knowledge of risk of hepatitis

17. In November 1974, Doctors Blecher and French attended a UKHCDO meeting where Dr Biggs presented the results for 1973 of the Directors study of Jaundice and Factor VIII antibodies. Dr Craske also made a report on Jaundice following treatment with commercial Factor VIII.²²

¹⁸ HCDO0001846

¹⁹ HCDO0001941

²⁰ CBLA0002130

²¹ CBLA0002154

²² HCDO0001017

18. In January 1977, Doctors Blecher and French attended a UKHCDO meeting where Dr Craske presented a written report on 'Hepatitis in Haemophiliac Patients' and suggested a special study of patients with Factor VIII antibodies who may receive large doses of concentrate.²³
19. In April 1977, Dr French notified Dr Maycock at BPL that one of the patients at Portsmouth developed hepatitis after receiving a batch of Elstree factor VIII.²⁴ Dr Maycock responded that he had written to other centres to which the batches were sent to ask if their use had been associated with hepatitis or jaundice.²⁵
20. In October 1977, Dr French attended the 9th UKHCDO meeting, where Dr Kirk presented a report on behalf of Dr Craske, on hepatitis. There was a discussion surrounding whether patients who were HBsAg carriers should be included in the National Register due to patient confidentiality.²⁶
21. In 1978, a patient at the Centre who was treated with factor VIII concentrate was found to be suffering from hepatitis.²⁷ In November 1978, Doctors Blecher and French attended the 9th UKHCDO meeting, where Dr Craske presented a report on future plans surrounding hepatitis.²⁸
22. In 1979, a patient at the Centre who was treated with Factorate was found to be suffering from hepatitis.²⁹
23. In July 1980, Dr Belcher completed a hepatitis survey which reported that a patient at the Nottingham Centre had developed hepatitis following treatment with NHS factor VIII concentrate and Factorate.³⁰

²³ PRSE0002268

²⁴ CBLA0004154

²⁵ CBLA0008945

²⁶ PRSE0001002

²⁷ HCDO0000262_080

²⁸ HSOC0010549

²⁹ HCDO0000262_082

³⁰ HCDO0000257_099

24. In October 1981, Dr French attended the 12th UKHCDO meeting where Dr Craske presented a report on hepatitis.³¹
25. In October 1982, Dr Blecher wrote to Dr Aronstam at the Treloar Haemophilia Centre regarding a Nottingham patient who was a student at Treloar, who had tested HBA positive. He had received NHS (Lister) factor VIII concentrate and Profilate in the previous 6 months.³²
26. In April 1984, Dr French was informed of a unit of blood which was issued to Nottingham University Hospital in March 1982, from a donor who was discovered to have had hepatitis contact. The sender, Dr James, on calling the blood bank was told that the unit had already been used.³³
27. Later, in May 1984, another patient developed post-transfusion hepatitis B after receiving whole blood, cryoprecipitate and commercial Factor VIII at the Centre in November 1983.³⁴
28. In September 1984, Dr French attended the 15th UKHCDO meeting, where the Hepatitis Working Party reported on heat-treated Factor VIII, a vaccine trial and reports of cases of chronic hepatitis.³⁵
29. In October 1985, Dr French attended the 16th UKHCDO meeting, where Dr Craske presented his report on hepatitis and reminded Directors to report all cases of acute hepatitis, especially those which may be related to dry-heated materials.³⁶
30. In October 1986, Dr French attended the 18th UKHCDO meeting, where Dr Craske distributed a written report and noted that the early heat-treatment method had not been effective in reducing the incidence of hepatitis, but the results so far with 8Y and 9A were encouraging.³⁷

³¹ CBLA0001464

³² HCDO0000260_415

³³ NHBT0031834

³⁴ NHBT0111372

³⁵ PRSE0003659

³⁶ PRSE0001638

³⁷ PRSE0004317

31. In September 1987, Dr French attended the 19th UKHCDO meeting, where Dr Craske distributed copies of the Hepatitis Working Party's report and informed that clinical trials of Interferon in NANB hepatitis were in progress at Sheffield and the Royal Free Hospital.³⁸

Knowledge of risk of AIDS/HTLV-III

32. In October 1985, Dr French attended the 16th UKHCDO meeting, where Dr Craske presented his written report on AIDS which revealed that there seemed to be an upward curve of AIDS cases in the UK, despite most Centres switching to heat-treated materials.³⁹

33. In March 1986, Dr French attended the 17th UKHCDO meeting, where Dr Forbes reminded Directors that all AIDS forms should be completed and returned to Dr Rizza to ensure that the National records were as accurate as possible.⁴⁰

34. In October 1986, Dr French attended the 18th UKHCDO meeting, where Dr Forbes informed that the first report on HIV sero-positivity in UK haemophiliacs had been published. Also, Dr Rizza thanked Directors for sending information in for the HIV Antibody survey.⁴¹

35. In September 1987, Dr French attended the 19th UKHCDO meeting, where Dr Rizza discussed the issues considered by the AIDS Group and reported that the third National survey of anti-HIV amongst haemophiliacs was underway.⁴²

³⁸ PRSE0004377

³⁹ PRSE0001638

⁴⁰ PRSE0001688

⁴¹ PRSE0004317

⁴² HCDO0000485

36. In September 1988, Dr French attended the 20th UKHCDO meeting, where Dr Rizza reported on the work of the AIDS group, including Sir Richard Doll's examination of the rate of progression of illness following infection.⁴³
37. In October 1989, Dr French attended the 21st UKHCDO meeting, where a report from the AIDS group was presented and information on the prevalence of AIDS was shared.⁴⁴
38. It may be reasonable to assume that as Directors of the Nottingham Centre, Dr Blecher and Dr French would have received copies of the reports circulated for, and the minutes of, UKHCDO meetings that they did not attend.

Testing for AIDS/HTLV III

39. A witness to the Inquiry has described Dr French notifying her husband in June 1985 that he was HTLV-III positive and only had 3 years to live. She says he was tested without his knowledge or consent and given insufficient information to allow him to manage or understand the condition.⁴⁵
40. In October 1985, Doctors Blecher and French wrote to a GP informing that the DHSS had stipulated that the results of anti-HTLV III tests are to be kept confidential except with the express permission of the patient, and that the Nottingham Centre's approach was that precautions were taken *'even when a test is negative.'*⁴⁶
41. On 7 June 1985, Dr French wrote to Dr Aronstam at the Treloar Haemophilia Centre regarding two Nottingham patients who were students at Treloar:

"As you know, these two patients whom we share have been found to be positive for anti-HTLV III. After a certain amount of hesitation and discussion,

⁴³ BART0002329

⁴⁴ HCDO0000015_035

⁴⁵ WITN3000001

⁴⁶ ARCH0002974

Ted Blecher and I have decided that our patients of this sort who are either married or old enough to be sexually active ought to be informed that they are anti-HTLV III positive as well as counselled about precautions they should take.

We are doing this with the other eight or so patients which have been picked up in Nottingham but have not said anything to [the two students] because you are providing the major part of their care at present (and their anti-HTLV III was picked up at Treloar rather than at Nottingham in any case)."

42. Provisional UKHCDO data available to the Inquiry also suggests that 8 patients were infected with HIV at the Centre, all diagnosed in 1985.⁴⁷

43. On 24 July 1989, Dr French wrote to the District General Manager of the Nottingham Health Authority that a haemophilia patient infected with HIV had taken legal advice with a view to taking legal action.⁴⁸

Other information

44. In February 1991, at a meeting of the Executive Committee of the Haemophilia Society, it was noted that Dr French had applied for help with funding the upgrading of a designated haemophilia treatment area at the Queens Centre. The Grants Committee recommended that the Society 'pump prime' with a grant not exceeding £5,000 including any input from the local group.⁴⁹

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⁴⁷ INQY0000250, WITN3826020

⁴⁸ DHSC0045449_090

⁴⁹ HSOC0029615 p.6

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