

NORTHERN REGIONAL HAEMOPHILIA SERVICE  
NEWCASTLE HAEMOPHILIA CENTRE

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Ref: PJ/LM

21st November, 1984

Mr. S. Steven,  
Editor,  
The Mail on Sunday  
Carmelite House,  
LONDON.  
EC4Y 0JA

Dear Mr. Steven,

Thank you for your letter of 16th November. Naturally I have kept abreast of developments with regard to both AIDS and to other diseases that might be transmitted by blood product transfusion; that is my job.

Before replying to your specific questions could I make two things very clear. Firstly, I have no wish to continue any argument with you or the Mail on Sunday. Despite your spirited defence and the first paragraph of the Press Council's adjudication against you, you will see from our previous correspondence that I have never complained about the press taking an interest in health and objective reporting of disease and its causes. Indeed, like many of my colleagues I am always ready to help the responsible press in any way I can, and I think that that has been well demonstrated in the past 3 days since it became known that one of my patients sadly died from AIDS at his home in Scotland.

Secondly, in your evidence to the Press Council you suggested that it was in the interests of doctors to conceal facts from their patients. In my case nothing could be further from the truth. Could I suggest that you look at the January 1975 files of the Yorkshire Post and the issue for Tuesday 13th June 1978? You will find there articles by Angus King which subsequently won him the campaigning reporter of the year award. I think that you will agree that they show that some of us were campaigning for self-sufficiency in blood products long before the Mail on Sunday campaign. You might also be interested in a letter published in the British Medical Journal of 21st June 1980 concerning the supply and demand for factor VIII in the United Kingdom and if you would like some bedside reading perhaps the second edition of 'Living with Haemophilia' (MTP Press Lancaster 1984) would appeal to you; the first edition was published as long ago as 1974.

I am drawing your attention to this evidence, not because I am particularly proud to have participated in its dissemination, but because I think that the press has a very real role to play in helping us to ensure that our patients get the best possible treatment.

In answering your specific questions I have to say that I consider that you were ill served by your medical correspondent. If you look at my original complaint (letter to the Press Council 6th May 1983) only can the first point now be challenged and this only in the light of evidence which has accrued since your article was written. I would suggest to you that it is one thing to report that WAR HAS BEEN DECLARED and quite another to report that WAR HAS

Cont'd . . .



BEEN DECLARED before it is!

I still think that to use a banner headline containing the words 'Killer Blood' on the front page of a national newspaper produces great and unjustified fear amongst people who are dependent on blood transfusion. The haemophilic population is still reliant for some of its treatment on imported plasma and will be so for at least the next two years until the Elstree plant is working to capacity. It may be that heat treatment of the products will remove the risk of AIDS and if you seriously want to help in the campaign to achieve this you might consider reporting the evidence from CDC in Atlanta and the recommendations of the National Hemophilia Foundation. However, what is really important is the evidence that thankfully it looks as though AIDS is of relatively low infectivity - there have been no cases of health care workers without other risk factors being infected and the numbers of cases of haemophiliacs contracting AIDS is still relatively small, both in America and in this country. Although these people are used to risk (after all we have been through the hepatitis scare) and are aware that the major cause of disability and death in haemophilia is still bleeding, they are only human and can still be frightened by what the Press Council referred to as extravagant and alarmist terms.

It is only within the past few weeks that the HTLV3/LAV virus has been shown to be almost certainly that responsible for AIDS and we still do not have a specific test for it, having to rely on the antibody test which simply tells us that a patient or a donor has been exposed to the virus. The real evidence for AIDS being transmitted via blood transfusion comes as you so rightly say from the tragic Australian story but even more convincingly from the evidence collected by CDC of over 80 cases in the United States who have contracted AIDS with no other risk factors other than a blood transfusion and the subsequent contact tracing which linked AIDS donors to the recipients. This evidence has been particularly vital because it has enabled doctors at CDC to establish with some precision the incubation period for AIDS.

I hope you understand why I have answered you at some length. I had hoped to have time to draft a short article for consideration for publication in the Mail on Sunday this week highlighting the urgent need for self-sufficiency, particularly with heat treated factor VIII products. The risks from ordinary blood transfusion in this country remain extremely low and it is terribly important that people do not muddle this with the problems of haemophilia care. If you think that any purpose would be served by such an article please let me know and I will have it to you as soon as I possibly can.

Best wishes.

GRO-C

PETER JONES, MD, FRCP, DCH  
Director