

Witness Name: Professor Christine Ann Lee

Statement No: WITN06440043

Exhibits: WITN06440044 – WITN0644054

Dated: 10 June 2020

## INFECTED BLOOD INQUIRY

### WRITTEN STATEMENT OF PROFESSOR CHRISTINE ANN LEE

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 20 June 2019 in relation to the witness statement of Witness W1011, **GRO-B** **GRO-B**.

I, Professor Christine Ann Lee, will say as follows:

#### **Section 1: Introduction**

1. My name is Christine Ann Lee and my address is **GRO-C** **GRO-C** My date of birth is **GRO-C** 1943. I hold the following professional qualifications – MA (Oxon) 1969 BM BCh (1969) MD (London) 1989, DSc (Med) (1996), FRCP (1990), FRCPath (1994) and FRCOG (2010). A copy of my CV is exhibited (**WITN06440044**).
2. I have held the following positions as a haematologist for the following organisations and set out below my roles and responsibilities in each of these positions:

Dates	Position	Roles and responsibilities
September 1974 - June 1976	Registrar to Dr J Fielding, Department of Haematology, St Mary's	Laboratory and clinical; responsible in a district general hospital for the general haematology service. Six-

	Hospital	month on call for emergency out of hours haematology including blood transfusion.
November 1976 - December 1982 (part-time)	Senior Registrar to Professor PT Flute, Department of Haematology, St George's Hospital Medical School. This included appointments at St James Hospital, Balham, Royal Marsden Hospital Sutton and South London Blood Transfusion Centre.	This appointment was under government scheme HM (69)6, known as The Women Doctors' Retention Scheme, which enabled female doctors with family commitments to work part time. Provision of haematology service and preparation for Membership of Royal College of Pathologists qualifying examination, achieved June 1982. During this time I provided some care for the small number of patients with haemophilia who attended St George's Hospital.
January 1983 - October 1984	Research Senior Registrar to Dr PBA Kernoff and Dr HC Thomas, Royal Free Hospital	Action Research Fellowship to study non-A non-B hepatitis in haemophilic patients. This work contributed to the dissertation for MD University of London awarded in 1989, entitled "The Natural History, Prevention and Treatment of Viral Hepatitis in Haemophilic patients."
November 1984 - November 1987	Senior Lecturer in Haematology, Charing Cross and Westminster Medical School and Honorary Consultant Haematologist, Queen Mary University Hospital,	Single handed consultant haematologist responsible for the clinical and laboratory haematology service in the busy district general hospital, Queen Mary's University Hospital, Roehampton, part of Charing Cross and Westminster

	Roehampton, London	Medical School. I was also Senior Lecturer and provided regular teaching to undergraduate medical students.
September 1985 - November 1987	AIDS counsellor Richmond, Twickenham and Roehampton Health District	Responsibility for provision of HIV testing service using the newly developed test. Responsibility for providing education about HIV/AIDS to every secondary school within the borough of Richmond upon Thames.
April 1986 - November 1987	Honorary Consultant in Haematology Haemophilia Centre and Haemostasis Unit, Royal Free Hospital, 2 sessions (1 day) per week.	There was no clinical responsibility as I had no honorary clinical contract and these sessions were to prepare research for publication.
November 1987 - December 2005	Consultant Haematologist Haemophilia Centre and Haemostasis Unit, Royal Free Hospital, London.	Particular care for patients infected with HIV and hepatitis.  Together with the director, Dr Peter Kernoff, I provided comprehensive care for people with haemophilia – the largest haemophilia centre in the UK with a patient population equivalent to the whole of Scotland and Northern Ireland. There was also provision of care for patients within the Royal Free Hospital who developed bleeding or thrombotic problems. There was a large anticoagulant clinic.
April 1991 - April 1992	Acting Director Haemophilia Centre and	The Director was not able to work again for health reasons. Overnight I

	Haemostasis Unit, Royal Free Hospital, London	had to take responsibility for the whole Unit as acting Director.
April 1992 - December 2005	Director Haemophilia Centre and Haemostasis Unit, Royal Free Hospital, London	<p>As Director I was responsible for service delivery and management of a staff of 70 including physicians, nurses, physiotherapists, laboratory scientists and counsellors. Although I was an NHS employee, I also conducted research. Relevant to this enquiry, 4 of 18 MD or PhD theses I supervised were about hepatitis:</p> <p>(1) Dr Paul Telfer 1991-4 MD University of Oxford 'HCV infection in haemophilic patients';</p> <p>(2) Dr Helen Devereux 1992-6 PhD University of London 'The molecular biology of HCV infection in haemophilia';</p> <p>(3) Dr Thynn Thynn Yee 1998-2001 MD University of London 'The side effects of therapy for haemophilia';</p> <p>(4) Dr Esteban Herrero 1998-2001 PhD University of London 'The molecular basis of HIV and HCV interactions'.</p>
January 2006 - present	Emeritus Professor of Haemophilia, University College London	The title Professor of Haemophilia within University of London was an honorary title awarded in 1997 for my work in haemophilia. There was international peer review of my contribution. It was the first professorship in haemophilia in the

		UK.
April 2007 - April 2010	Honorary Consultant Haematology, Oxford Haemophilia and Thrombosis Centre	Responsibility for women with bleeding disorders.

3. Since May 2010, I have retired from clinical practice.
4. I hold and have held membership of the following committees or groups relevant to the terms of reference:
  - a. April 2001 – December 2005: Member of UK Haemophilia Centre Doctors Organisation
  - b. 1996-2003: Chair of International Haemophilia Training Centres Committee, World Federation Haemophilia
  - c. 1993-2005: Member of Medical Advisory Panel, Haemophilia Society of UK
  - d. 1996-2000: World Federation of Haemophilia Executive with special responsibility for WFH/WHO relationship.
5. I also gave evidence as an independent expert witness at the Tribunal of Inquiry into the Infection with HIV and Hepatitis C of Persons with Haemophilia and Related Matters, which was chaired by Her Honour Judge Alison Lindsay in Ireland. The resulting report was published in 2002 and is available online.
6. I was the Founding Editor in 1995 and Chief Editor until 2013 of the journal *Haemophilia*, published by Wiley Blackwell.

## **Section 2: Background information regarding** GRO-B

7. I make this statement on the basis of W1011's hospital records as disclosed to me by the Royal Free Hospital. I have not had access to GRO-B's records from the Hammersmith Hospital which may be relevant to the issues under consideration. I attach as Exhibits **WITN06440045** to **WITN0644054** extracts from GRO-B's medical records in so far as they are relevant to my statement.

8. [GRO-B] was diagnosed with Factor XI deficiency 3% in 1981 at University College Hospital, London ('UCLH') following a life threatening haemorrhage for which she received a transfusion of 12 units of whole blood. Factor XI deficiency is a rare inherited bleeding disorder caused by a shortage of Factor XI blood protein. It is particularly prevalent amongst the Jewish population.
9. On 29 December 1986 [GRO-B] was referred to the Royal Free Hospital by Dr Paula Bolton-Maggs, haematology registrar at UCLH, for advice on treatment as she wished to start a family (**WITN06440045**). The Royal Free Hospital had a large Jewish population and treatment of Factor XI deficiency was a large part of our work; Dr Peter Kernoff had a particular expertise in this area. Factor XI concentrate was heat treated hence there was no risk of transmission of HCV infection.
10. [GRO-B] was initially a patient of Dr Peter Kernoff who saw her on 14 April 1987 and 21 July 1987. The first time I became involved in [GRO-B]'s clinical care was in April 1989. I believe this may have been because Dr Kernoff was unavailable at the time [GRO-B] was receiving IVF treatment at the Hammersmith Hospital (as well as at the Royal Free) and there were frequent telephone discussions between the Hammersmith Hospital and our Centre regarding Factor XI treatment to cover egg collection. On 24 April 1989, I responded by telephone to Mr Amso, consultant gynaecologist, giving advice about covering egg collection with Factor XI concentrate (**WITN06440046**). I also received a call from Hammersmith Hospital on 15 May 1991 confirming that [GRO-B] was to have egg collection the following morning when I advised that Factor XI treatment be given (**WITN06440047**). Further calls were received by my colleagues from Hammersmith Hospital in November 1991 and February 1993.
11. At the beginning of April 1991, Dr Kernoff became unwell and I became overall acting director with responsibility for the Haemophilia Centre. The HCV antibody test only became universally available at the Centre in 1991.
12. The records show that a note was made by Dr Pasi on 21 September 1993 (**WITN0644047**). The handwriting is difficult to decipher but it appears that the Hammersmith Hospital were sending [GRO-B]'s blood samples to our Centre for analysis,

possibly for HCV infection. On 24 September 1993, the virology results confirmed that [GRO-B] was positive for HCV (**WITN06440048**).

13. It appears that [GRO-B] was then seen by my colleague, Dr Mickey Koh, Registrar in Haemophilia, in the Centre on 21 December 1995 (**WITN06440049**). I was not present at this consultation. I do not know whether any discussions were held in relation to [GRO-B]'s HCV diagnosis but from the letter dated 27 December 1995, it seems that [GRO-B] was advised by Dr Koh in relation to right knee problems. As a result of this, Dr Koh referred [GRO-B] to the combined orthopaedic/haemophilia clinic. It was my usual practice to attend these combined clinics with my orthopaedic colleague, Mr Goddard. [GRO-B] was seen in this clinic on 11 January 1996 and 14 March 1996 (**WITN06440050**).
14. I saw [GRO-B] in the Haemophilia Centre on 11 June 1996 (**WITN06440051**). I took a full history and noted that [GRO-B] had had a lifesaving 12 unit blood transfusion in 1981 following a colectomy. She had a family history of thrombosis and complained of menorrhagia. I believe I must have looked back through [GRO-B]'s notes and noted that she was HCV antibody positive with the most common genotype 1. Factor XI concentrate was heat treated and therefore not a risk for the transmission of HCV. Therefore it was thought that life-saving blood transfusions [GRO-B] was given in 1981 were the source of her HCV infection. These were single donor blood products from British blood donors. I discussed the HCV diagnosis with [GRO-B] and recommended that she needed to be seen in the joint liver clinic. I advised that blood be taken to assess her liver function and prothrombotic markers in view of the family history of thrombosis. I also arranged a referral to Mr Economides, consultant obstetrician for her menorrhagia (**WITN06440052**).
15. I next saw [GRO-B] on 30 July 1996 (**WITN06440053**). Her husband was present. We discussed her HCV diagnosis again and combination therapy. At this time we knew that Type 1 HCV was very resistant to successful therapy with interferon in contrast to Type 3 which was more easily cleared with interferon alone. At the Centre we were fortunate to have early access to state of the art combination treatment with ribavirin and interferon and we were the first haemophilia unit in the world to use it. This treatment was offered to [GRO-B]. The plan was that she would see my colleague, Dr Mistry (consultant

hepatologist), in the combined liver clinic to discuss this treatment further. There was also a discussion in relation to sexual transmission of the virus. I would have explained to [GRO-B] that heterosexual transmission of HCV was possible but rare according to a small study we had conducted. [GRO-B] said that she wanted to have her husband tested for HCV. The couple were planning to adopt children as IVF had been unsuccessful.

16. On 9 September 1996 [GRO-B] was seen in the Centre by Dr Sanjay Bhagani, a registrar in infectious diseases (**WITN06440054**). He was responsible for managing the treatment of patients with haemophilia with combination ribavirin and interferon therapy.
17. [GRO-B] commenced treatment for hepatitis C in November 1996 and responded well to this. She was cleared of her hepatitis C. Her treatment ended on 12 November 1997.

### **Section 3: Criticism by [GRO-B]**

**Response to Question 20 – At paragraph 15 of her statement, witness W1011 describes the way in which you told her that she had contracted HCV, which ‘added to [her] trauma’. Please comment on this.**

18. It has now been almost 24 years since the consultation in question and it is therefore very difficult to remember the exact discussions held. According to my note, when I saw [GRO-B] on 11 June 1996, she presented with a number of issues including a swollen right knee (for which she was receiving treatment), a family history of thrombosis and menorrhagia. I believe that I looked back through [GRO-B]'s previous notes in line with my usual practice and saw that she had tested positive for HCV. I discussed the diagnosis with [GRO-B]. I was saddened to read that [GRO-B] states that I delivered the diagnosis in a manner where it was very matter of fact as I always communicate with my patients in a sympathetic and honest manner. I appreciate that [GRO-B] was shocked by the diagnosis particularly as she did not have any symptoms of infection. I do not believe I would have said that the virus was potentially life threatening as at that time, we had new treatment available for the infection. It is quite possible that I told [GRO-B] that she had been carrying the virus for quite some time and that many patients had lived with HCV for long periods without being aware.



19. I am perplexed by the reference to a leaflet as at that time I do not believe we had any leaflets at the Centre in relation to HCV. Had a leaflet been given to [GRO-B], then I would have noted this in the records.
20. In relation to sexual transmission, the risks of this were discussed at the next consultation, on 30 June 1996, when [GRO-B]'s husband was present. I would have reassured both [GRO-B] and her husband that the risks of sexual transmission were very low, in light of a recent study that had been undertaken. I don't believe I would have mentioned or discussed transmission to future children.
21. It is important to note that [GRO-B]'s treatment with interferon and ribavirin was fully successful and that she was cured of her HCV infection.

### **Statement of Truth**

I believe the facts as stated in this witness statement are true. I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

Signed

GRO-C

Dated

June 10<sup>th</sup> 2020

### **Table of exhibits:**

Date	Notes/ Description	Exhibit number/page number
18.04.19	Professor CL's CV	WITN0644044
29.12.86	Referral letter from Dr Paula Bolton-Maggs (UCLH) to Royal Free Hospital.	WITN0644045
24.04.89	Clinical notes from Royal Free Hospital Haemophilia	WITN0644046

	Centre	
20.04.90 to 21.09.93	Clinical notes from Royal Free Hospital Haemophilia Centre	WITN0644047
24.09.93	Virology results	WITN0644048
27.12.95	Letter from Dr Koh	WITN0644049
11.01.96 & 14.03.96	Clinical notes from Royal Free Hospital Combined Orthopaedic/Haemophilia Clinic	WITN0644050
11.06.96	Clinical notes from Royal Free Hospital Haemophilia Centre and letter to GP	WITN0644051
11.06.96	Referral Professor Lee to Mr Economides	WITN0644052
30.07.96	Clinical notes from Royal Free Hospital Haemophilia Centre and letter to GP	WITN0644053
09.09.96	Clinical notes from Royal Free Hospital Haemophilia Centre	WITN0644054