

Witness Name: Professor Christine Ann Lee

Statement No: WITN0644187

Exhibits: WITN0644188

Dated: 4 April 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF PROFESSOR CHRISTINE ANN LEE IN RESPONSE TO WITNESS W1673

I provide this statement in response to a Rule 13 notification dated 24 August 2022.

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) DSc (Med) (1996) FRCP (1990) FRCPATH (1994) FRCOG (2010). A copy of my CV is exhibited at **WITN0644001_001**.
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 Hospital	Laboratory and clinical; responsible in a district general hospital for the general haematology service. Six-month on call for emergency out of hours haematology including blood transfusion.
November 1976 - December 1982	Senior Registrar to Professor PT Flute, Department of Haematology, St	This appointment was under government scheme HM (69)6, known as The Women Doctors' Retention Scheme, which enabled female doctors with family

(part-time)	George's Hospital Medical School. This included appointments at St James Hospital, Balham, Royal Marsden Hospital Sutton and South London Blood Transfusion Centre.	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 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, Roehampton, London	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 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 patient contact and these sessions were to prepare research for publication.
November	Consultant	Particular care for patients infected with

1987 December 2005	- Haematologist Haemophilia Centre and Haemostasis Unit, Royal Free Hospital, London.	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 Haemostasis Unit, Royal Free Hospital, London	The Director was not able to work again for health reasons. Overnight I 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	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: (1) Dr Paul Telfer 1991-4 MD University of Oxford 'HCV infection in haemophilic patients'; (2) Dr Helen Devereux 1992-6 PhD University of London 'The molecular biology of HCV infection in haemophilia'; (3) Dr Thynn Thynn Yee 1998-2001 MD University of London 'The side effects of therapy for haemophilia'; (4) Dr Esteban Herrero 1998-2001 PhD University of London 'The molecular basis of HIV and HCV interactions'.
January 2006	Emeritus Professor of	The title Professor of Haemophilia within

- present	Haemophilia, University College London	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 gave oral evidence to this Inquiry on 20 November 2020 and provided a comprehensive written statement beforehand. This statement addresses specific criticisms made by witness W1673 in relation to my treatment of her at the Royal Free Hospital. I have had the opportunity of reviewing witness W1673's records from the Royal Free and refer to them below where appropriate.

Section 2: Background information regarding witness W1673

7. Witness W1673 was a carrier of haemophilia A, who most likely became infected with HIV after receiving plasma derived FVIII concentrate in Turkey in January 1984. This was as a result of post-operative bleeding following a partial thyroidectomy. On

30.01.84, witness W1673 was referred to the Royal Free Hospital Haemophilia Centre ('the Centre'). She was initially seen by Dr [GRO-B].

8. I first saw witness W1673 on 19.04.89 at the Centre with her baby boy who was born on [GRO-B]88. The baby was referred to us because of a low platelet count and for testing of FVIII level in view of W1673's carrier status. Both witness W1673 and her baby were unfortunately found to be HIV positive. Blood samples had been taken by Dr [GRO-B] in 1984 in line with usual practice. The sample on 01.02.84 was negative but the one on 16.04.84 was positive. The date of seroconversion was obtained by testing stored samples, which was routine practice for all our haemophilia patients. The HIV test was not available until 1985 so it was not known in 1984 that witness W1673 had tested positive. Although by 1989, witness W1673 had been infected with HIV for 5 years, she had no symptoms or signs of HIV disease at this point in time.
9. Witness W1673 was not seen at the Centre for a period of 5 years between 16.04.84 and 26.04.89 when she was resident in Turkey. I was not working at the Centre from November 1984 to November 1987. W1673 only became resident in the UK from February 1990.
10. I continued to review witness W1673 periodically in the Centre from 26.02.90 until our last interaction on 13.11.01. We discussed the therapy available for HIV and available trials but witness W1673 was not interested as she was asymptomatic for a number of years. We also talked about her son who was being treated at [GRO-B] he sadly died from HIV related encephalopathy on [GRO-B]94. Witness W1673 tested positive for HCV on 26 [GRO-B]90 although she subsequently cleared the infection naturally and her PCR was negative on 06.05.98. In October 1999, I referred witness W1673 to Professor [GRO-B] for assessment in the joint HIV/haemophilia clinic as her viral load was increasing. She commenced anti HIV therapy in December 1999 and responded well to treatment.

Section 3: Criticism by witness W1673

Paragraph 17 – Witness W1673 states that I delivered the results of her blood tests confirming that she was positive for the HIV infection in a professional manner without showing any compassion and without any effort to comfort her with the shocking news.

11. I always tried to share difficult information with patients in a sympathetic way and deny that I would have done so with witness W1673 without showing compassion and

without any effort to comfort her. I recognise that the news of her HIV positive status would have come as a shock to witness W1673.

Paragraph 18 – Witness W1673 states that she was not given any information about the risk of infection from the blood treatment she received and that she should have been told about the risk of HIV infection as soon as it came to our knowledge.

12. Witness W1673 acquired her infections as a result of blood products given to her whilst she was receiving treatment in Turkey and therefore prior to her being treated at the Royal Free.

13. Witness W1673 first tested positive for HIV on 16.04.84 but the test for HIV was not available until 1985; she was not seen at the Centre between 16.04.84 and 19.04.89 as she was living in Turkey. When she returned to the Centre on 19.04.89, she was informed of her HIV infection and that she had sero-converted in early 1984.

Paragraph 19 – Witness W1673 states that the only information she was given was after her treatment in January/February 1984 that she could develop a mild form of non A non B hepatitis but that she was not given any advice prior to this.

14. The records confirm that on 14.02.84 witness W1673 was warned by Dr [GRO-B] of the high possibility that she may develop NANB hepatitis (as it was known at the time). I first became involved in witness W1673's care in April 1989 hence I was not involved in advising her prior to this.

Paragraph 25 – Witness W1673 states that she does not know if her blood has been used for research. She refers to a discussion we had about frozen blood samples.

15. We did not use any of witness W1673's blood samples for research. Frozen blood samples were routinely stored for all patients. This was in order to provide material for testing if a test became available for NANB hepatitis which was finally identified as HCV in 1989 with a test being made available in 1991.

Paragraph 42 – Witness W1673 states that no counselling or psychological support has ever been offered or made available to her.

16. Counselling was provided by [GRO-B] family therapist, to all patients who had become infected. The records show that witness W1673 had a number of counselling

sessions with Ms GRO-B on 21.05.91 (when I was also present), 06.05.98 (I was again present), 25.03.03, 24.03.04, 29.03.05, 03.05.05 and 11.12.07.

17. My role would have entailed explaining the nature of the infections and available treatment options as well as dealing with any presenting problems. I would most certainly have done this at the first appointment with witness W1673 on 19.04.89 and at subsequent review appointments. On 15.09.92, we had a long discussion about witness W1673's health and the future. Witness W1673 indicated to me that she coped by not thinking about it. At the review appointment on 03.10.94, witness W1673 told me about her son's passing. We spent a long time talking about his illness and her experiences. I did my best to be supportive throughout the time that witness W1673 was under my care.

Other issues

18. At paragraphs 50 to 54, witness W1673 summarises my interactions with the Macfarlane Trust. I attach as Exhibit WITN0644188 copies of my correspondence which is self-explanatory. Unfortunately, as witness W1673 had acquired her infections as a result of treatment received in Turkey, she was not eligible for compensation.

Statement of Truth

I believe the facts 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: *April 4th 2023*