

Witness Name: Dr Ruth Isherwood

Statement No.: WITN0766001

Exhibits: Nil

Dated:

## INFECTED BLOOD INQUIRY

### FIRST WRITTEN STATEMENT OF DR RUTH ISHERWOOD

I, Dr Ruth Isherwood, will say as follows: -

1. I graduated with a MBCHB from the University of Aberdeen in 1996. I worked at Strathcarron Hospice in 2007 as a Specialty Registrar before joining as a Consultant in 2008. In 2018, as now, I was a Consultant in Palliative Medicine.
2. In 2018 I was the named responsible Consultant on approximately 100 death certificates. All death certificates issued by a member of staff are discussed with a Consultant.
3. On 1st December 2017 Mr GRO-A was admitted to Strathcarron Hospice for end of life care. Mr GRO-A was known to have multi-focal hepatocellular carcinoma with a past medical history of Hepatitis C with associated cirrhosis.
4. We tried to identify the cause of the Hepatitis C. Mr GRO-A transfusion history was discussed with his family upon his admission as Mr GRO-A was too frail to discuss this matter himself. Mr GRO-A family felt that the Hepatitis C may have been as a result of a previous blood transfusion in 1983. Mr GRO-A family informed the Hospice that the Skipton Fund had also previously investigated his transfusion history. We tried to contact the Consultant in Gastrointestinal Medicine who had reviewed Mr GRO-A regarding his Hepatitis C, however that Consultant had retired. We sought information of Mr GRO-A transfusion history from clinic

letters and original hospital notes from his GP surgery. The notes pertaining to his initial assessment at the hospital in October 1983 record that a crossmatch of blood was requested.

5. Mr **GRO-A** passed away on 6th January 2018.
6. The first contact with the Procurator Fiscal and Medical Reviewers was made on 22 December 2017, prior to Mr **GRO-A** death, in anticipation of requiring their guidance. Our discussions with the Procurator Fiscal were with Viki Yuille and James (surname not known), the Senior Medical Reviewer. The Head of the South East Scottish Investigation Unit was also involved in discussions.
7. Following discussions with the Procurator Fiscal team it was agreed that we would require further discussions with the Medical Review Team, these discussions were held from 8th January to 10th January 2018, after Mr **GRO-A** death.
8. There were several discussions with Mr **GRO-A** family regarding the possibility of putting Hepatitis C due to blood transfusion on the death certificate. However there was no evidence of a blood transfusion ever being given to Mr **GRO-A**.
9. On 9 January 2018 Mr **GRO-A** family were advised that they could contact the Procurator Fiscal's office directly. The Procurator Fiscal was contacted by the patient's family who expressed their distress at the process.
10. The family were distressed at the prospect of a possible post-mortem examination, although he would likely be viewed by pathology. <sup>without the need for</sup> The family asked <sup>post-mortem</sup> the Procurator Fiscal not pursue this matter any further. The family requested that <sup>examined</sup> the death certificate was issued. 21 5/4/18
11. With advice from the Medical Reviewers and Procurator Fiscal, the death certificate was issued on 10th January 2018. Certified cause of death was recorded as:

- a. liver failure - 6 weeks
- b. Hepatocellular carcinoma - 4 years
- c. Hepatitis C - 32 years

**Statement of Truth**

I believe that the facts stated in this written statement are true.

Signed \_\_\_\_\_ 

GRO-C

Dated      5<sup>th</sup> April 2019