

Witness Name: Peter Jones  
Statement No.: WITN0841001  
Exhibits: None.  
Dated:

## INFECTED BLOOD INQUIRY

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### WRITTEN STATEMENT OF PETER JONES

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 7 October 2019.

I, Peter Jones, will say as follows: -

#### Section 1: Introduction

1. My name is Peter Mercer Jones. My address is GRO-C  
GRO-C My date of birth is GRO-C 1937, making me 81 years of age.
2. My professional qualifications are MBBS, MD, FRCP, FRCPCH, DCH.
3. I was appointed to the post of Consultant Paediatrician in 1970/71 and worked thereafter at the Royal Victoria Infirmary, Newcastle upon Tyne. Initially my role included general child health but latterly became increasingly concerned with the management of haemophilia and related disorders in the Northern Region of the NHS. My personal record, which is in the Inquiry files, details my progress in this regard. I retired from the NHS in 2000, but continued to work for the charity World Federation of Haemophilia as an elected member of the Executive with responsibilities for Communications and Fundraising. Throughout my working life the management of haemophilia both in the UK and internationally has been of central interest and this is detailed in my personal record and is relevant to the Inquiry Terms of Reference.

## **Section 2: Responses to criticism of W1850**

4. My responses to the questions posed by the witness are made to the best of my ability without access to Mr Carruthers medical records. In addition, I retired from my NHS appointment within the timeframe covered by the allegations.

### *Question 4*

5. I would have spoken to Mr Carruthers prior to his dental extractions. Noting that his factor IX level was below that needed to secure haemostasis during and after surgery I would have explained the need to cover the procedure using a factor IX concentrate. I would also have covered, as a routine with all patients, the risks of blood-borne infection. This risk was already known by Mr Carruthers, and is noted in Paragraph 7 of the complainants statement. This routine continued to be followed beyond the introduction of heat treated concentrates from December 1984 onwards despite the probability that such heating largely eliminated the risk of viral transmission. Mr Carruthers would have had to give his informed consent both for the extractions and the haemostatic cover provided. At no time would I have suggested that we adopt a “wait and see” policy, to only give factor IX in the event of excessive bleeding. Such a policy could be extremely dangerous both because of overt haemorrhage and because of soft tissue bleeding leading to airways obstruction.

### *Question 5*

6. I strongly deny the suggestion that NHS costing had anything to do with the management of this case, or that it was “convenient” to give Mr Carruthers factor IX. It was essential to secure haemostasis during and after the dental extractions.

### *Question 6*

7. To the best of my recollection Mr Carruthers attended the Haemophilia Centre very infrequently. On the occasion referred to he had presented with non-specific symptoms requiring a full history and examination in order to reach a diagnosis on which to act. This inevitably required questions about his sexual health, especially relevant given his work for long periods abroad.

*Question 7*

8. I cannot comment with any accuracy here without access to the medical records. All our patients were told of their test results personally as a matter of urgency. They were also told of the relevance of the results, and of any treatment options. In addition the Centre staff ran open meetings and seminars in conjunction with the Haemophilia Society to bring everyone concerned up-to-date with the latest knowledge about viral infection and its management.

*Question 8*

9. I have already covered this allegation under Question 4. Mr Carruthers would have had to give his informed consent to the dental extractions and any treatments to provide haemostatic cover, including the prescription of heat treated Factor IX from December 1984 onwards. Given the references to "factor IX" within the questions, I suspect that there may be confusion here by the witness regarding the terminology used. When referring to treatment options "Factor IX" is a generic term covering, in this case, the use of either NHS or commercial concentrates. In addition, the term covers the prescription of heat treated products when they became available

*Questions 9 and 10*

10. I am unable to answer these allegations with any accuracy without access to the medical records. I cannot recall any difficulty in accessing treatment as it became available. With regard to the suggestion that follow up within the Haemophilia Centre caused Mr Carruthers concerns about his care, to my knowledge he never voiced these to the staff involved. The co-director of the Centre had expert knowledge of liver disease and ran a "liver clinic" within the Centre. He also worked closely with colleagues on the team responsible for liver disease at the Freeman Hospital.

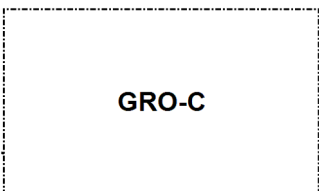

*Question 11*

11. As already detailed, Mr Carruthers required cover with factor IX during and after his dental extractions. His treatment with NHS factor IX concentrate was the safest option available to provide this cover. I strongly refute the suggestions that he was treated without proper consent. As to the repeated allegation of questioning "about misbehaving whilst on a work trip" I have responded to this under Question 6. In

addition, to my knowledge, Mr Carruthers never commented or made any contemporaneous complaint about this questioning to me or to any member of the Haemophilia Centre staff.

**Statement of Truth**

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

Signed  \_\_\_\_\_  
Dated  30/0/19