Witness Name: Professor Helen Reeves

Statement No.: WITN3450001

Exhibits: WITN3450002 Dated: 13<sup>th</sup> June 2019

#### INFECTED BLOOD INQUIRY

### WRITTEN STATEMENT OF PROFESSOR HELEN REEVES

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 22 May 2019 and addressed to Dame Jackie Daniel, Chief Executive of The Newcastle upon Tyne Hospitals NHS Foundation Trust.

I, PROFESSOR HELEN REEVES, will say as follows: -

### **Section 1: Introduction**

- 1. My full name is Professor Helen Louise Reeves BM; BS; BMedSci; FRCP, PhD. My date of birth GRO-C 1967. My professional address is Freeman Hospital Newcastle upon Tyne. I am a Consultant in Gastroenterology and Professor of Liver Cancer. I am employed by Newcastle University and have an honorary clinical contract with The Newcastle upon Tyne Hospitals NHS Foundation Trust. I have been a Consultant with the Trust since 2004.
- 2. In my current role at The Newcastle upon Tyne Hospitals NHS Foundation Trust I am a Consultant Hepatologist. I have responsibility for the treatment of patients with liver disease and liver cancer. I also supervise and delegate work to junior medical staff. I liaise with other clinicians and with primary care in relation to patients. My responsibilities include reporting to statutory and other authorities and my duties can involve certification of death.

### Section 2: Response to Criticism of Ann Dorricott

- 3. I refer to the attached report (WITN3450002) which I prepared dated 8 April 2015 for Her Majesty's Senior Coroner for Newcastle upon Tyne. This is addressed "for the attention of Wendy Dunlop" who is one of the Coroner's Officers. The report sets out in detail my involvement in the care of Mr Michael Dorricott who was first referred to me in December 2014 from Cambridge. In my report I describe the treatment of Mr Dorricott, the medication prescribed and administered and I also refer to Mr Dorricott's medical history.
- 4. At the end of the report I state that with regard to the cause of death, I suggested this should be described as follows:-
  - 1a. Liver failure secondary to
  - lb. Hepatocellular carcinoma secondary to
  - 1c. Hepatitis C virus infection

As the Senior Coroner had directed that there be a post mortem examination, my position was that the final cause of death should be dependent upon the result of the post mortem examination and any tests undertaken. Of course the ultimate cause of death was to be certified by the Senior Coroner. It was on that basis that I did not consider that it was appropriate for me to include in the provisional cause of death reference to infection caused by tainted blood.

- 5. With respect to the comments which Mrs Dorricott passed on from her husband, this did not change the situation that the medical cause of death was to be certified by the Senior Coroner following the post mortem report and the Inquest hearing.
- 6. In her summation, the Senior Coroner made reference to the history of Mr Dorricott having been injected with Factor VIII blood products prior to him being referred to Newcastle. The Senior Coroner found that the medical cause of death was in the same terms as I described above. However, at Section II, the Senior Coroner included "haemophilia and its treatment" as significant factors. The Senior Coroner

entered a narrative conclusion which was that "Mr Michael Dorricott's death was the consequence of transfusion with infected Factor VIII blood products."

7. I would stress that the fact I did not include this in my provisional cause of death was not in any sense an effort to misdescribe the history but was on the basis of whether in my role and on the basis of information and my expertise, I was in a position to make reference to the issue of tainted blood.

# Section 3: Other Issues

8. I do not feel that I can assist the Inquiry with any other information. I would only add that I had every sympathy for Mr Dorricott with regard to his illness and for the consequences of the treatment he received. I endeavoured to deal with his illness and his decline in cooperation with our Palliative Care Team and with compassion towards him, his wife and daughters.

# **Statement of Truth**

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

Signed <sub>-</sub>	GRO-C	
Dated	13/06/2019	