

Witness Name: Susan Douglas  
Statement No.: WITN4120001  
Exhibits: Nil  
Dated: 28 October 2021

## **INFECTED BLOOD INQUIRY**

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### **WRITTEN STATEMENT OF SUSAN DOUGLAS**

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 20 May 2021.

I, Susan Douglas, will say as follows: -

#### **Section 1: Introduction & Professional History**

##### **1) Please set out your name, date of birth and professional qualifications.**

1. My name is Susan Douglas. My date of birth is GRO-C 1957. I live at an address that is known to the Inquiry.

##### **2) Please set out the positions you have held as a professional, the organisations in which you held these positions and your role and responsibilities in these positions.**

2. I am a newspaper journalist, starting as a medical reporter and at the top of my career, working as a national newspaper editor and then media group publisher. I now work as an entrepreneur in the media sector.
3. Relevant to this Inquiry, I was the new medical correspondent of the just launched Mail on Sunday in 1983. I went on to hold senior posts at the paper

until my appointment as assistant editor in charge of all features coverage, on the sister paper, The Daily Mail in 1988 and deputy editor of the Sunday Times in 1991. In 1995 I became editor of the Sunday Express, leading a team of over 200 journalists and staff with an annual budget of more than £2 million and later president of new business at magazine publisher Conde Nast, responsible for their online strategy and contract publishing and with a turnover of over £2.7 million. My last senior executive post in the media was in 2017 as publisher of the UK's largest national newspaper group, Trinity Mirror. I have had many board level consultancies and a number of media start-ups, including my current one Semantyx, with Oxford University Artificial Intelligence.

4. I was born in London and I was educated at Tiffin Girls' School in Kingston-upon-Thames. I subsequently graduated with a first-class Honours degree in Physiology and Biochemistry from Southampton University.

**3) Please set out your membership, past or present, of any committees, associations, parties, societies or groups relevant to the Inquiry's Terms of Reference, which can be found on the Inquiry's website at [www.infectedbloodinquiry.org.uk](http://www.infectedbloodinquiry.org.uk)**

5. I have no relevant membership or association linked to this Inquiry, other than my ongoing relationship with the medical department of Oxford University, where I was a trustee for four years from 2013.

**4) Please confirm whether you have provided any evidence to, or been involved in, any other inquiries, investigations or criminal or civil litigation in relation to human immunodeficiency virus ('HIV') and/or hepatitis B virus ('HBV') and/or hepatitis C virus ('HCV') infections and/or variant Creutzfeldt-Jakob disease ('vCJD') in blood and blood products. If you have, please provide details of your involvement and copies of any statements which you provided.**

6. I have not provided any evidence to, neither have I been involved in, any other inquiries, investigations or criminal or civil litigation in relation to the Inquiry's Terms of Reference.
7. I am giving this statement because I was the medical correspondent to the Mail on Sunday, in 1983, and author of a number of articles about the risk of contaminated blood products. My first report started a campaign by papers in the UK, principally the Mail group, suggesting action be taken by appropriate authorities to prevent a potential medical catastrophe. This early media coverage acted as a whistle blower to alert the public to concerns that were brewing in the medical world.
8. I destroyed all my reporter's notebooks a few years ago. I am referring primarily to published and archived documents and my memory of a very important period in my career.

## **Section 2: Background – Medical Correspondent, The Mail on Sunday**

**5) Please outline your role, function and responsibilities as Medical Correspondent for The Mail on Sunday. Please explain how you came to be appointed as Medical Correspondent, as well as any medical background you may have.**

9. I have a medical background, having read physiology and biochemistry as an undergraduate. I also have an enduring interest in medicine through my media career, starting as a specialist correspondent with the Mail on Sunday. Personally, I have many scientist and doctor friends, a number of journalist colleagues with medical expertise and latterly, through my appointment as a trustee of Oxford Medicine, enduring friendships with key workers at the university and associated John Radcliffe Hospital.
10. Friendships from my earliest medical reporter days persisted through my career, and one of my best friends, Lorraine Fraser, also a medical journalist, endures to this day. She was the original source of my 'Hospitals Using Killer

Blood' story. I began working for *MIMS*, a doctors' magazine, published by Haymarket Publishing, in 1979.

11. In 1982 the Daily Mail's owners started the Mail on Sunday which was a big, multi-million-pound launch. Its aim was to report on the important stories of the day to ordinary people. When the Mail on Sunday was established, I was employed as the medical correspondent. I had been working as a freelance writer at sister paper, the Daily Mail, and my qualifications had been noticed by the new team on The Mail on Sunday. This was in late 1982, when I was aged 26. I was young, excited about the huge opportunity I had been given and felt that I had a lot to prove.

### **Section 3: "Hospitals using killer blood" article, 01 May 1983**

**6) On 01 May 1983 I authored a front-page article in The Mail on Sunday titled "Hospitals using killer blood" and I have been shown a document marked as PRSE0000199). I have been asked;**

- (a) How I was first made aware of the concerns surrounding AIDS at that time;**
- (b) My understanding at that time of the risks associated with AIDS transmission by blood transfusion/from blood products;**
- (c) What research I undertook in the process of writing this article;**
- (d) Who the experts were, who I consulted (paragraph 3 of the article) that led to the claim that "two men in hospital in London and Cardiff are suspected to be suffering from [AIDS] after routine transfusions for haemophilia".**

12. AIDS was already of huge international concern by 1983 and theories and ideas, not all of them even plausible, were circulating about the origins, the dangers, the transmission and, most of all, progress on the research effort around isolating the virus and its means of transmission. I knew a lot of people in the medical world who were discussing AIDS.

13. AIDS was labelled the 'gay plague', due to the fact that it was affecting the gay community disproportionately at the time. My old friend, Lorraine Fraser, and I met over drinks one evening when she told me that she had a story that she

was reluctant to do for her magazine read by doctors because it needed wider circulation to prompt action if some of the fears being expressed in the medical world were indeed true.

14. Lorraine had been reading reports in medical journals and specialist publications like The Lancet regarding concerns about HIV transmission through blood. At the time it wasn't obvious to us why predominantly gay men were getting HIV/AIDS.

15. Lorraine and I theorised that if HIV/AIDS was transmitted via blood, then obviously blood collected from donors to help other people, could contain this disease. Reports that this might be a problem were already beginning to gather momentum in the medical world but had received little attention in the public domain. We agreed it would be a good idea to air the story to a wider audience to prevent delays that might lead to further disease spread.

16. This was not just two young reporters with grandiose ideas, but the basis of why we ever went into journalism. For me, just as it was almost 40 years ago, I feel it is my job and my duty to highlight and share important stories I discover. In this case, attempting to unscramble facts in the ill-understood and gathering worries and fear surrounding the supply of life-saving blood and blood products. A journalist seeks to be the messenger of facts and information that affect their readers' lives. This in turn underpins a basic human right for people to know what is going on and make decisions based on the widest possible understanding of the facts. So that became my mission.

17. Today I hope my account of events leading up to my newspaper report, of the mistakes, denials and cover-up of events leading to the death of more than 4000 people, might make us all a little wiser and a little less likely to repeat history. Of course we didn't know what history now tells us, but Lorraine and I wanted to spotlight the alarming possibilities we had begun to see.

18. Thereafter, Lorraine gave me the papers she had collected from The Lancet and I began working on the report. I would phone her occasionally for information or advice but, on the whole, I worked on it alone.

19. Lorraine gave me the details of a person, our whistleblower, a man, she had met at a medical conference in London in late 1982 or very early 1983. This male, I believe was the head of haematology at Cardiff Hospital at the time and had attended the conference.
20. The attendees at this conference were medical professionals and medical journalists with an interest in haematology and AIDS.
21. The head of haematology at Cardiff Hospital, who was possibly my contact and first source and whose name I simply cannot recall, had apparently presented a paper at the conference and given a presentation on the links between AIDS and transmission via blood.
22. I presented the possibility of the story to the Mail on Sunday news desk on a Tuesday, the start of the working week for a Sunday paper. The news desk convened on Tuesdays to determine what stories might be priorities for a forthcoming edition. The news editor returned, excited that the editor, the ultimate boss and the person in charge of which stories to publish each week, had requested more details on a story he believed the paper should pursue with haste. I was asked to see our contact at Cardiff hospital as soon as possible.
23. Thereafter, I arranged a meeting with the Head of Haematology at Cardiff Hospital to discuss the fears he had voiced within the medical profession. I called our contact and sought to explore the subject of contaminated blood usage on the grounds that I too, as a medical professional, was concerned. I did not immediately tell him I was working for a national newspaper. Though I had mentioned I was gathering information with a view to alerting a wider audience to the problems we both agreed warranted urgent attention and yet, seemed to be receiving none. My medical knowledge allowed me to converse on a professional level and once he and I had discussed and confirmed many of the fears and concerns, I left, telling him I would be in touch.

24. Once I had engaged the interest of my paper, I phoned our contact to inform him that I was a journalist and that I intended to publish the matters we had discussed, arguing that they warranted public attention to force action. I knew he would be concerned about the possible risks of the alarm bells and panic we might trigger- with consequences both to his own position for confiding confidential information, though I did not cite him as a source or betray an identifiable victim, but also we might trigger panic and the risk of putting patients off treatment in case it was "toxic", when in fact they were being presented with no alternative. Our source was rattled, but I tried to assure him I would act responsibly and that it was the right thing to do. To this day I believe it was and I hope he does too. At no point did my source ask me not to write the story. I have nothing but admiration and respect for him talking to me and later standing by me.
25. I remember asking the whistle blower who else he suggested that I should talk to. He gave me the name of the doctor who was caring for the two haemophiliac patients who were suspected as being infected with HIV (as referred to in this article). A journalist always protects their sources and so I never published their names or gave details to anyone beyond my editor and our newspaper lawyers.
26. I wasn't directly involved in the frontpage headline. This job was for the Chief Sub-Editor and had to be approved by the Editor. I was however content to go along with it. Even if I had disagreed with it, I wouldn't have had any say on the final headline. Did I think it was alarmist, possibly even sensationalist? Yes. But I believed, even then, that it was warranted to get a reaction. A tempered version on page 13 would never have caused the alarm bells we needed to get the risks addressed. Alarmism was a way to save lives.
27. My journalistic ethics are very important to me. Standing by them has often caused me trouble and as is evident in this enquiry, my own professionalism, even competence, was called into question with my "irresponsible and alarmist" reporting over this very important story. In 1983, with far less confidence and professional experience, I was vulnerable. But then, as now, I

believed my reporting of the risk of potentially infected blood to patients, who were unaware of any risk, was totally justified.

28. It is not surprising that the various authorities, ill-prepared for the outcry my report created, were angry. Neither is it surprising they sought to “shoot the messenger”. And cover up the facts we published. Even though many politicians, doctors, administrators and managers knew every word I wrote was true, they had done little to solve the problem and could present worried patients with no alternative choices. I knew I would be in the firing line. But as a newspaper we had explored alternative sources of “clean blood”. We knew there were choices. And most importantly, I believed, as my editor did, that it was our duty to tell the truth and allow people to make their own decisions, properly informed. If that led to political action being taken immediately, good. Sadly, this is not what happened.

29. To demonstrate my ethical guiding spirit, against my own better interest, I can cite another example, when I was the Assistant Editor to the Daily Mail, and I was asked to produce a leader page feature about Nelson Mandela’s imminent release from Robben Island in South Africa, triggering a seismic change in the future of South African, African, and indeed, world politics. The theme of the piece was to be that Mandela might be a people’s hero but, just like an IRA terrorist, someone with a culpable track record justifying his imprisonment. I had worked in South Africa as a journalist in the run-up to his release, been a member of the outlawed ANC and been a friend of Winnie Mandela and their family, so this was not a view I shared. Risking my senior and important job at the paper, I refused to be involved, while accepting that piece might reflect the views of some of our readers. I left and wondered what my principled fate might be. The piece ran, I had registered my objection but respected that others might take a different view. I retained my job.

30. I tell this story only to illustrate that I try to understand the views of others I might disagree with. For me, journalism about making people think twice. And it is about transparency and honesty. And proper fact gathering. Whatever the risk- personal or otherwise.



31. Prior to the publication of this watershed article, I would have had to phone someone at the Department of Health to check the facts. I recall having dinner with Norman Fowler (who was then the Secretary of State for Health) at a public restaurant shortly before publishing the article. This was not unusual, and it was considered an 'off the record' meeting. Any good specialist- health, crime, finance- was expected to cultivate sources and contacts, especially ministers, and usually this has been on an off the record basis. I respect those relationships and they are vital in an open and free press. I was 'in' with a number of ministers within the cabinet at the time. We would socialise, compare stories, network and have genuine two-way conversations. These relationships are also an important part of democracy.

- 7) Regarding the same article PRSE0000199, specifically about the part stating “two men in hospital in London and Cardiff are suspected to be suffering from the disease [AIDS] after routine transfusions for haemophilia” and that also within a subsequent article on 25 November 1984 (shown to me as a document marked PJON0000001\_101), and that I reported that these two suspected cases had been confirmed as having AIDS. Relating to these references, I have been asked to explain;**
- (a) Who informed me of these suspected cases in Cardiff and London;**
  - (b) If this was before or after publication of the article; and**
  - (c) How this contact had materialised.**

32. I believe that I have answered these questions above under paragraphs 12-31.

- 8) On 06 May 1983 Dr Peter Jones (“Dr Jones”), Director of the Newcastle Haemophilia Centre at the Royal Victoria Infirmary, submitted a formal complaint to The Press Council (PJON0000001\_100). With reference to this document, I have been asked to explain;**
- (a) When and how I was first made of this complaint;**

33. I would have been called in as soon as it arrived.

**(b) My reaction to Dr Jones' complaint, including whether I considered there to be any justification to this complaint at the time, identifying any such aspect;**

34. I was initially worried about the complaint and we might know now, with hindsight, that I had the story completely right. But when an official complaint arrives, we should always take it seriously. And I was worried. I was definitely concerned about Dr Jones' assertion that this would cause panic amongst the haemophiliac community and that they were stopping using factor VIII products. But I also considered it important that doctors advised their patients of the best course of action and appraised them of risk, just as we do now, accepting for example that antibiotics are not always tolerated without side-effects or that vaccines such as the Covid vaccines may have a limited protective effect with time or with certain variants. These are important things for the public to discuss without causing fear or rejection.

35. I was 100% confident that I had got the facts right because I had done a great deal of research and talked to many experts, on and off the record. I knew that there was a risk that haemophiliacs may be concerned about using factor VIII when writing the story, but I also knew that this issue had to be flagged. People have a right to know about risk- and benefit- and they are not babies who should be protected from some of the uglier truths in life. People should trust their doctors to be honest and open with them. We should not sleepwalk through ignorance into a tragedy that we could, if we woke up to the dangers, avoid. And I felt satisfied that there were governments and companies providing alternatives to the infected blood we were using. But we had to make haste to explore choices.

36. I asked medical professionals and experts, as well as Norman Fowler, what the alternatives were. I was told that the Blood Products Laboratory ("BPL") at Elstree needed to be made self-sufficient but this was still a long way off. But our reports certainly caused that to be expedited. I was also told that Swiss

blood was comparatively 'clean' and could be imported the very next day for use. There was also possible filtering being researched. Heat treatment scientific filters were already available. Why were we not using any of these, at least in trials? Why did we continue to give patients blood we knew was infected when we also knew there were alternatives?

37. It would have been irresponsible of me to write that story without flagging the other options. I was hoping to force the government to address this issue and to consider the alternatives.

38. At the time, I understood that Swiss blood was believed to be heat-treated and consequently 'clean'. It was also known to be more expensive. I established from my enquiries with haematologists that Swiss blood was immediately available and could have been imported the very next day.

39. I remember being nervous about reporting that Swiss blood was 'clean' because so little was known about HIV at the time. I would not have published this without 'copper-bottoming' it by speaking to haematologists. I was told that using Swiss blood was our 'best bet'.

**(c) My reaction now to Dr Jones' complaint that it was untrue that, at the time the article was written, the two men mentioned were suspected of having AIDS;**

40. He was lying.

**(d) My response now to Dr Jones' contention that my article was "sensational and highly exaggerated";**

41. Sensational is subjective, but the story wasn't exaggerated at all. Its presentation was deliberately sensationalist, to wake people up. I knew that there were other people who disagreed with Dr Jones.

42. I remember being scared about the implications of Dr Jones' complaint as I thought that my head was on the block. I felt that no one was supporting me, for example I had neither the NUJ, the journalists' union, nor the Press Council backing me. In hindsight, I think it is possible that if I was at another newspaper I would have been fired.

**9) Dr Jones, in his complaint to The Press Council dated 06 May 1983 (PJON0000001\_100), submitted that the article was "neither objective nor accurate". How do you respond to this assertion?**

43. It was very objective and it was wholly accurate.

44. I found the tone of Dr Jones' complaint unreasonable. I remember thinking that he was arrogant and came across as such.

45. I thought that this article could encourage people to ask questions, which I believe Dr Jones should have encouraged. It has echoes of the power of the establishment vs the people.

**10) I have been asked by the Inquiry, to what extent I was aware of the "chain reaction" that Dr Jones refers to in PJON0000001\_100 with regard to further reporting of this issue in others newspapers and other broadcasting. If cognisant of this, I have been asked to comment on the impact this article had with regard to causing worry amongst the haemophilia community, as suggested by Dr Jones. In relation to this, and it is suggested that it may help me to answer the question; I have been asked to look at document PJON0000001\_104, a letter from George Woodhouse, then Managing Editor of The Mail on Sunday, dated 18 May 1983, in response to Dr Jones' complaint.**

46. It would naturally lead to a chain reaction; this was the whole point of what we were doing. I intended the article to cause a reaction.

47. It was right to cause concern amongst the haemophilia community and this should have forced the government to act. There were immediate solutions; import Swiss blood, investigate filtering, and they could have expedited the BPL Elstree infrastructure developments.

**11) I have been asked about the extent of my involvement in drafting this letter (PJON0000001\_104).**

48. Yes, I was involved. From memory it wasn't the paper's managing editor who I interacted with, but I worked on it with the Editor, Mr Steven and he would have instructed George Woodhouse to respond.

49. It is important to relate that the Editor took our story seriously as symbolic of what the paper- indeed good journalism - was all about. Accountability, transparency and openness were our guiding lights. Seeking to inform people of things their "betters" in government and authority thought they need not know. I have always believed in my career that journalism is central to letting people know things others want to hide. About the Davids against the Goliaths. Its role is to highlight hypocrisy, arrogance and power abuse. And without these efforts, we as a society and as human beings, are the less.

50. I think it is most likely that Mr Steven and I wrote this letter. This was then given to Woodhouse to send. As the managing editor, he dealt with all business issues and legal complaints.

**12) I have been shown Dr Jones' reply to George Woodhouse's letter dated 18 May 1983. Dr Jones responded by letter on 10 June 1983 (PJON0000001\_108). Within this 4 page letter, beginning at the foot of page 3, Dr Jones wrote "I do not accept that reporting things before they happen constitutes responsible journalism, continue to stress that the whole article was built on tenuous evidence, and continue to charge you with sensational, disturbing and dishonest journalism which has caused unnecessary misery to many people." I have been asked to respond to this particular statement by Dr Jones.**

51. As a journalist, you simply cannot report on things before they happen. No-one knows things for certain before they happen, but events and facts can be reported and we are all free to draw our own conclusions. Further, the time that has lapsed since our reports has proved all the facts he cited as being based on tenuous evidence, dishonest reporting.

52. Yes, the facts - facts I had gleaned from other doctors I talked to - were disturbing. Did these facts, that resulted in so much pain and death cause unnecessary misery? My argument now is that any misery and disturbance was completely justified. If only action had been taken, if only Dr Jones' vigour against me had been used to champion his patients' interests...

53. I was informed by my medical sources, prior to publication, that the two cases referred to in this article, one in London and one in Cardiff, both had AIDS.

**13) Also, within this letter (PJON0000001\_108), Dr Jones (page 3 para 8) referred to my "appalling ineptitude" as a medical reporter. I have been asked to respond to this statement.**

54. I would respond by asking on what basis did Dr Jones reach this judgement about my abilities or suitability to do my job? My fact checking was solid, as has been borne out.

55. I might ask why he used such personal vilification instead of addressing the central points. Did he believe the blood we in the UK used was clean? Did he think his colleagues' fears that were circulating at the time were all unfounded? Did he think other doctors were lying about haemophiliac patients becoming infected with AIDS?

#### **Section 4: "Action to ban danger blood" article, 08 May 1983**

**14) I have been shown an article that I authored that appeared on the front page of The Mail on Sunday on 8 May 1983, titled "Action to ban danger blood"**

**(document PJON0000001\_101. The article continues on page 2) I have been asked to outline the circumstances surrounding this article, including;**

**(a) My recollections of incumbent Junior Health Minister Geoffrey Finsberg's comments/statement provided to me;**

56. I am sure I would have spoken to Mr Finsberg, but as I cannot remember the circumstances and can no longer refer to any notes I would have kept, I can only say that with such attention to every word written about contaminated blood use, the newspaper would have double/triple checked my sources, facts, quotes and references.

**(b) The details of any meetings that I may have had with Mr Geoffrey Finsberg;**

57. I don't remember the details.

**(c) My understanding at that time of the Department of Health's desire to 'make Britain totally self-sufficient in blood products';**

58. My understanding of self-sufficiency was based on off-the-record meetings and dinners with Norman Fowler. I would have asked the Department of Health for an official comment.

**(d) How I obtained the comments of Dr Anthony Pinching, immunologist at St Mary's Hospital, in the course of producing this article, along with the details of any meeting/contacts that I had with Dr Pinching;**

59. I am unable to recall the details of my meeting with Dr Anthony Pinching. I must have phoned him and spoken to him, probably seen him. Because this was such an important story, there were few stones unturned and people prominent in the field became my new contacts, informants, helpers, sometimes even friends. With regard to all the statements and official comments quoted in my articles, I would have always spoken to them again before publication and fact-

checked the details of any article with them. This would also have been subsequently checked by a lawyer from the legal team on duty at the paper. As I stated previously the story would have been factually rechecked and 'copper bottomed' not least because it had become such a key issue for us.

60. As always, with any contact or statement, this would have been fact-checked, not only by me, but by the backbench (subs and ultimately the Editor) as well as the legal team so as to ensure we were confident that everything published was factually correct and as true as we could make it.

**15) I have been asked my opinion as to the effect that my article "Hospitals using killer blood" (PRSE0000199) had in initiating the 'emergency action/a response' by the Government/Department of Health /Haemophilia Society?**

61. We wanted this to happen. 'We' in this case, refers to the people I spoke to who thought there was something wrong and believed that patients weren't being best served and were being put at risk. We were acting on behalf of the reader as well as validating the newspaper's stance.

**16) Regarding my quote within the article that Geoffrey Finsberg had said that 'a ban on the blood extracts, imported from America, is being considered.' I have been asked;**

**(a) If Mr Finsberg informed me of this directly, or if not, where this information came from;**

62. There are hard and fast rules about this. I would have spoken to him. If I wrote this categorically, it means that he did say that. Furthermore, I have no memory of him calling me to dispute it or asking the newspaper to correct any misunderstanding.

**(b) My opinion as to why a ban on US blood imports did not materialise?**

63. This question is hard: there was no transparency. Was cost a real issue? Did health officials weigh up cost v benefit? Was it a priority against other health priorities, not least the bigger evil of AIDS rampaging through the gay



community? Did the accountants understand the enormity of delaying a ban? Did people really care enough that a few haemophiliacs died of AIDS? These were all questions we posed against the wall of silence and the barrage of attack. Certainly, alternatives were not really explored and maybe ministers thought fast-tracking our own self-sufficiency in clean blood from our own Elstree labs was the answer.

**17)With regard to Mr Finsberg's comments implying the expedition of the BPL building project so that it would be operational at an earlier date; I have been asked about my knowledge of any outcome of this?**

64.Later developments mattered and in many ways some ministers did act. Elstree was put on the fast track. Later MPs cared enough to fight for haemophiliacs who had no voice. My efforts tailed off, and that is with some personal regret, because I was promoted and pursuing my own career dream, getting married, having children. But I did talk to victims' families occasionally and kept in touch with those fighting the battle for support and recognition.

**18)Within the same article, my attention has been drawn to a line 'doctors in Britain, as well as patients, are demanding even tougher action following The Mail on Sunday's revelations'. I have been asked to quantify who these doctors and patients were.**

65.I did keep in touch with patients affiliated to the Haemophilia Society. I received calls from Haemophilia Society members who thanked me for what I did and how my reports had helped them.

66.The article created interest and sadly, but of course, some fear amongst patients. That led them to talk to me and I spoke to them openly. The Haemophilia Society knew they could talk to me about their concerns. There was no email then but I remember a big mail bag being delivered full of letters in response to these articles. And for years, I would get calls and return them, keeping in touch with those championing the cause and seeking the inquiry we now have.

67. In terms of doctors, I spoke to a number of sources who wanted tougher action to reduce the risk of infected blood. Dr Anthony Pinching was just one of those I spoke to who was pushing for an immediate alternative.

**19) Again, from the same article my attention has been drawn to a quote attributed to Dr Anthony Pinching (Immunologist at St Mary's Hospital) who I reported had said 'I wouldn't dream of giving a patient American blood products.' I have been asked;**

- (a) If I spoke to Dr Pinching personally, if not from where did this quote derive;**
- (b) If I spoke to other doctors/medical professionals that shared Dr Pinching's view to a greater or lesser extent;**

68. I remember that quote from Dr Pinching. I remember thinking 'yes!' when he gave that quote on the phone, as it was just what I was looking for. All the time I was gathering quotes from doctors and opinions. With all quotes, as a journalist one has to be really accurate.

69. As a result of Dr Jones' complaint and the Press Council's reaction, everything would have been triple-checked by the internal team.

**Section 5: "The scandal of [GRO-A]'s death" article, 02 October 1983**

**20) I have been shown another document, again a Mail on Sunday report, authored by me and published on 2 October 1983, titled "The scandal of [GRO-A] [GRO-A]'s death" (document HSOC0016112). I have been asked to explain;**

- (a) How I first became aware of [GRO-A]'s death;**

70. One of my sources would have contacted me. I no longer have all the details, sadly.

- (b) how I learnt that he was given Factor VIII contaminated by the blood of an AIDS-infected donor;**

71. I was still talking to lots of doctors, including Dr Pinching, because they cared and understood why I was publishing articles on this issue. There was a distinction between networks of 'open doors' and of 'closed doors'.

72. At some stage whilst speaking to these doctors I would have received news that a patient had died. It is possible that I asked and they told me, but it is equally possible that I had to set about finding out who it was myself.

73. I believe [GRO-A]'s doctor told me about him being infected with contaminated factor VIII, although I cannot be certain.

**21) Within this same article, I am directed to the description of AIDS as “an illness which destroys the body’s capacity to counter even the simplest ailment. So, it is technically correct to say that Mr [GRO-A] died of renal failure. But that is like saying a bullet kills a man, not the person who pulls the trigger.” I have been asked to explain this statement, including any knowledge that I may have as to how haemophiliac deaths from AIDS were recorded and reported.**

74. I remember Stewart Steven, my Editor, who was an extraordinary and inspiring newspaper editor, often came up with erudite words and expressions and because this story, an early and important campaign in the paper’s pioneering history, really caught his imagination, he would often work with me on aspects of its continued presence in the paper.

75. There were frequent leader references to the story and its “cover-up”. These leader pieces stated the opinion of the paper and are distinct from reports that are simply factual reportage in the mix of important stories of the day.

76. On the matter of Mr [GRO-A]'s death certificate, this is a medical matter which is easily explained as with current Covid deaths being reported as death from respiratory failure or even when a patient's death is listed as Covid, an underlying cancer, for example, might have been the cause of death within

days of the overlying Covid being fatal. Death, as I understand it, is sometimes a complex combination of contributory malfunction that finally causes irreversible cessation of all bodily functions. So, if Mr. GRO-A's doctor reported his death as being due to AIDS, a specific renal failure listing is completely in keeping with his diagnosis.

77. Under 'why there must be action' was the Editor Mr Steven's 'voice'; a paper's opinion or brand values as stated above. I would have been with him when he wrote that editorial comment. This reflected the paper's stance and was not reported as fact by me (as a reporter). An important journalistic distinction.

**22) Within the same article, my attention has been brought to a passage whereby Bill Payne, chairman of the Bristol branch of the Haemophilia Society, is said to have attacked 'sensational Press reports' about the crisis. I have been asked how I respond to this criticism.**

78. That was the same as Dr Jones' complaint.

79. The sensationalist nature of what we were doing was about triggering a reaction from government. We thought this was justified in causing alarm amongst haemophiliacs. We thought the balance between alarming haemophiliacs and them stopping taking factor VIII was justified. Their doctors and carers, the very people who were my story sources, should and were in a position to advise their patients, in their best interests. And the alarmed haemophiliacs should not have been left alone to sort out what to do with limited choices. Neither should they have been fobbed off with lies and silence.

**23) I have also been asked to comment on my understanding of stigma associated with haemophiliacs at that time. My attention being drawn to a quote attributed to Bill Payne within the same article; 'Any single male haemophiliac between the ages 16 and 60 is worried that he is likely to suffer a homosexual stigma'.**

80. This was the case at that time. I remember Margaret Thatcher emphasising that AIDS had nothing to do with being gay. It was a virus that did not discriminate.

**24) Within the same article, my attention was drawn to a quote by Bill Payne that “Mothers with haemophiliac babies and children are terrified to use Factor VIII now and the hospitals are being inundated with sufferers returning Factor VIII en masse. It’s all wrong. The chances of anyone suffering AIDS are so slim it’s untrue.” I have been asked to respond to this statement, including;**

**(a) Whether I was aware of any response or backlash from the haemophilia community to my articles around this time, along with any examples that I may recall.**

81. I was aware of the backlash. Several members of the Haemophilia Society had contacted me and were very worried. I don’t remember anyone being accusatory about me causing panic. Rather, they were seeking help and looking to open doors, so that solutions could be found.

82. I don’t recall any individual haemophiliacs writing to me and being critical. The overwhelming response was of concern and in support. My critics were from the establishment, for example the Press Council and, ironically, haemophiliac groups.

**(b) The assertion that the risk of getting AIDS ‘was so slim it’s untrue’;**

83. The chance wasn’t so slim, as has tragically has been proven.

84. I thought that the risk was not low, if you are subjected to a virus that could be within the blood products that you received. The risk, in fact, was significant because of how often haemophiliacs required blood products. Even if there was a risk, however small, surely one should look at and consider the alternatives.

**25) Within the same article my attention was drawn to a quote attributed to the then-Health Minister, Kenneth Clarke; “We will make every effort to find a risk-free source of blood. If we find such a country we will certainly stop imports from America where AIDS is prevalent.” I have been asked;**

**(a) To confirm the origin of Kenneth Clarke’s statement; did you request a comment on this issue, was this a parliamentary/ministerial statement or was it said elsewhere?**

85. Kenneth Clarke would have spoken to me to provide that statement. I would never misquote someone, not least a politician. It is not possible that this would have been a ministerial or parliamentary statement.

**(b) My reaction to this comment/statement;**

86. I question this now. Did Ken Clarke do everything in his power to find a risk-free source of blood? Why did nobody explore the Swiss offer? Or any other source and perhaps even boast about it in the media? Or what about triggering our own brilliant scientific resource that rose so splendidly to the Covid challenge. Why didn’t we task our own scientists to treat or filter blood and blood products we were using in the full knowledge of the dangers?

**(c) To respond to this statement with what I now know, including whether I believe this response to be proportionate;**

87. Nothing transpired from this as far as I am aware.

**26) Within the same article I wrote that “many experts believe that a risk-free source of blood already existed in Switzerland. This has already been offered to Britain by the Swiss Red Cross in Berne but officialdom in Britain has so far turned them down.” I have been asked to explain;**

**(a) Who the ‘experts’ were that formed the basis of this claim;**

88. I remember speaking to a number of people with expertise in haematology. I probably would have spoken to the same person in the first article who informed about Swiss blood.

**(b) How and when I was first made aware of the so-called 'risk-free' blood in Switzerland;**

89. As stated in paragraph 89 above.

**(c) To whom I was referring with the word 'officialdom';**

90. In this case, I believe 'officialdom' was in reference to the Department of Health.

**(d) Why to my knowledge was the offer of blood from the Swiss Red Cross rejected;**

91. It is my suspicion that the offer of Swiss blood was rejected because of the cost, although I don't know this for sure. It would also have required a massive effort, bureaucratically and logistically to change the process of importing and distributing blood and/or blood products. It is also possible the Swiss source was not deemed completely clean at the time. But which scientists were the experts on blood contamination and AIDS virus viability in filtered or treated blood back in 1983? Our knowledge was in its infancy. But it should not have stopped us from seeking solutions.

**27) Within this article, my attention has been drawn to a 'comment/editorial' section/box, titled 'Why there must be action'. Within this, it is written that 'The suppression of the facts of [GRO-A]'s death and the lack of an inquest point towards a conspiracy of silence.' I have been asked;**

**(a) to explain this statement, including how I would define a 'conspiracy of silence in this instance';**

92. The perpetrators of this 'conspiracy of silence' were the establishment, from government ministers right to the Haemophilia Society and through to the bodies looking after the interests of patients and haemophiliacs. They were not prepared to talk about it and instead responded, quite aggressively, by calling me sensationalist, or by failing to act or respond to these obvious and serious concerns.

93. By recording [GRO-A]'s cause of death as 'renal failure' on his death certification, this in my view amounts to a cover-up. Factually it may have been correct but it neatly side-stepped his doctor's understanding of his infection with AIDS. They evidently didn't want to open a can of worms. There are lots of manifestations of HIV that finally kill you. Thus, if doctors knew that he had HIV and it was contracted via infected blood products, then disingenuously recording this as just renal failure essentially amounts to a cover-up. I do however accept that there is a possibility that [GRO-A]'s family did not want HIV or AIDS recorded on his death certificate and requested that it was not recorded and that this was acceded to. Though this would not be the right thing to do to my mind, to an official record.

94. I didn't feel at the time when this was happening that there was any degree of openness or candour. The medical community was divided between those who wanted to act and those who didn't. It was almost like those who didn't want to act were simply lying to themselves. It was as if they knew there was an issue but they didn't have a solution, so they therefore refused to accept it.

**(b) Who I believed the co-conspirators to have been;**

95. Co-conspirators were people who were incentivised to perpetuate the silence and cover up- doctors and officials who didn't want to rock the boat, and kept their own jobs and status safe by not so doing. Or other co-conspirators were fearful of repercussions if they stood up.



**28) Within this same 'comment' section, I have been directed towards an extract 'It may be that in withholding information, Mr GRO-A's family, the Haemophilia Society and the doctors who treated him were all acting with the most honourable intentions, in trying to avoid panic among Britain's 4,500 haemophiliacs'. It is clear that within this piece that my belief was that this was not the best way of dealing with the issue of imported contaminated blood products. I have been asked why I consider that they would have been mistaken to believe this;**

96. I think the wording of the comment piece is careful and responsible. To be clear, there was no available alternative to the contaminated blood haemophiliacs were being offered in 1983. To suggest stopping their treatment, which kept sufferers alive, would have been irresponsible. Haemophiliacs had no choice in 1983, and no choice for many years to follow. That is why our comment piece was clear "keep taking this treatment". But it was also clear we believed this unacceptable. To soldier on, knowingly providing vulnerable people with a potentially fatal cure was at best mistaken.

97. I consider that those in authority and responsible for the supply of blood products in the UK should have been more accountable. Somehow, they needed their silence to be questioned, needed their inactivity to be jolted and for their cover up to be exposed. I believed, risky as it proved to be, that was my job. Only when everyone knew about the risks might we force the provision of alternative, safer treatments, without the deadly side-effects we now know existed.

98. I would persist in my conviction that honesty and transparency underpin an open society, for which we rightly pride ourselves. Had there been no alternative treatments for haemophiliacs I would, even now, have sought that open debate. But, and this is vital, we believed there were alternatives. And we should have been searching for them and providing them as a matter of urgency.

99. Sadly, to force admission of mistakes - in this case inactivity and silence - is a thankless and often impossible task. Decisions made in 1983, and possibly even earlier, were mistakes. Over 4,000 people lost their lives because of these mistakes. The point of open discussion, and wide access to the facts, is to learn from those mistakes; ideally soon after they have been exposed as wrongful. And only by admitting those mistakes can we seek alternatives and, with humility and experience, find solutions. I consider that our whistle blowing resulted not in the quest for solutions, but rather resulted in a retreat into the culture of blame.

100. Of course, haemophiliacs panicked. Their choice was not "safe blood products" or "contaminated" ones. Their choice was "contaminated ones" or risk death from unstemmed bleeding. Was it wrong to expose this dilemma? Should we have stayed silent forever or should we have demanded a different choice?

101. I don't think anyone's action was deliberately evil, perhaps it was more about an easier course to do nothing, or to blame another party rather than admit mistakes. Certainly, those in authority and able to explore solutions seemed to be protecting their own interests rather than the people they should have been representing.

**29)Also within this 'comment' box, I wrote that 'In [the previous] May, I pointed out the dangers of imported blood from a country with an AIDS epidemic. And I was viciously attacked for panic-mongering. 'Must another innocent man die before action is taken?' I have been asked to explain/ describe the comment that I was 'viciously attacked for panic-mongering'.**

102. I was viciously attacked by Dr Peter Jones, the Press Council and by some within the Haemophilia Society leadership. This led to something of a witch hunt which the Press Council's ruling added to. At first, but not later when their own reporters had studiously checked, other newspapers and media organisations were able to pour scorn on my report and as a lone and discredited voice of dissent, I was somewhat powerless to precipitate action.

A wary media was thus not able to act in concert to push for the resolution of immediate problems. Because of this effective silencing, any media crescendo we might have hoped for demanding action, was muted. Later others did join the campaign we doggedly maintained to source our own clean blood supplies and expedite UK self-sufficiency. But this unified media support was delayed while officials branded my reports irresponsible. Of course, we now know my report was an accurate reflection of fears within the medical community and the consequences of stalling inquiry and explorations of alternatives for haemophiliacs, resulted in unnecessary deaths.

**30) Within this comment piece I wrote 'while Britain continues to accept American blood supplies, our advice to all haemophiliacs is: Continue to take your Factor VIII treatment. The risk of bleeding without treatment is infinitely greater than the risk from AIDS.' I have been asked to explain;**

**(a) Why I sought to advise haemophiliacs as to whether they should continue to take factor VIII blood products in spite of the risks identified in my article;**

103. Please be clear that while I accept comment items attributed to me, there is a clear distinction between words I wrote in news reports or features and the newspaper's leaders (comment pieces) where the Editor would outline the paper's stance. Nonetheless, I would have been consulted and largely agreed with the sentiment. It was in 1983 true that there was no alternative to haemophiliacs taking factor VIII.

**(b) Whether I believed at the time or in hindsight that this was true, or explain how my view may have subsequently altered;**

104. My job as a reporter was to give people insight into the extent of medical understanding, questions, fears and possible solutions- 'the facts' as I was able to report them- and to allow readers to come to their own decisions and conclusions. If the medical advice was for haemophiliacs to continue taking

factor VIII, then the paper's view was to support that. That did not stop our role of being the messenger of all the varied concerns at the time.

105. I believed it to be true that haemophiliacs had no choice but to continue their treatment and my view has not altered; at the time, there was no choice. The government chose not to seek alternative blood product sources and did not pursue the offer to import alternative supplies from Switzerland. Unsurprisingly, the paper's opinion and advice, was to source alternative supplies of factor VIII that would reduce the risk of infection.

**(c) Whether this advice was influenced by comments made by individuals and/or organisations/institutions;**

106. This advice was a balance of the range of expert opinions. The reporter, in this case me, was entitled to her own opinion, but reporters do not express opinions in their news reports.

**31) Within the 'comment' section I encouraged haemophiliacs to urge their friends and families to write to their MPs on the basis that 'Whitehall will continue to do little or nothing until it knows that the public's anger has been aroused.' I have been asked to explain, to best of my knowledge, whether there was any significant public response to this request, and whether this had any material impact on Government policy.**

107. Yes. We received many calls and letters. I personally spoke to individual families and to their haemophilia societies, to people pushing for action and to members of parliament. Over the years, I continued to take an interest and discuss progress - and the lack of it - with pressure groups, individual parents and families. Colleagues and friends continued to build bridges between MPs, journalists and victims. Some of my journalist friends have picked up the cudgels and Lorraine Fraser went on to win a number of press awards for her coverage. That early encouragement to seek change did in the end bear fruit.

108. I am sure that questions were asked in and out of Parliament by MPs, advisors and ministers. Some I knew of, many I did not.

**Dr Jones' complaint to The Press Council**

**32)In response to this article, (document HSOC0016112), Dr Jones wrote a complaint to The Press Council on 05 October 1983 (I have been shown document PJON0000001\_126). My focus has been drawn to Dr Jones' comment that the article 'repeats most of the misconceptions used in May. Once again there is a misleading headline "Victims of AIDS because a blood donor was infected".' I have been asked to respond to Dr Jones' assertion that the headline was misleading and in so doing, to explain the basis for the headline. I have also been asked to indicate when, and how, I was first made aware of this complaint.**

109. As previously stated, the headline was not written by me. It was written by the Chief Sub-editor and approved by the Editor. However, I do agree with the headline in that it warranted a degree of sensationalism and impact otherwise nothing would have been done.

110. The headline '.....because a blood donor was infected' was true.

111. I would have been made aware of the complaint as soon as it came in.

112. I was just as concerned by this complaint as with previous letters written by Dr Jones.

**33)I have been asked to comment on Dr Jones' personal criticism of me at the end of the first paragraph when he states that 'Susan Douglas uses her lack of knowledge in an attempt to mount a campaign against the importation of blood, which is vital for the treatment of haemophiliacs'.**

113. I strongly dispute this assertion. I had a lot of knowledge and I spent a number of months talking to a range of medical experts in this field.

**34)I have been asked for comment about another assertion made by Dr Jones within this complaint whereby he states that there is 'no proof that this particular death [ GRO-A ] was connected with the importation of blood from America and there is no proof that the use of other sources of blood would reduce risk.'**

114. I had obtained contrary evidence from different medical sources, closer to the patient. Further, as Dr Jones, with his own uncontested expertise, knew, blood was the proven means of transmission of AIDS and there was serious concern within his profession about possible infection via untested or untreated blood. Various sources were already, as early as 1983, claiming safe blood supplies. The substantiation of those claims is a matter of public record.

**35)I have been shown document PJON0000001\_135, a letter from The Press Council to Dr Jones dated 29 November 1983, within which it is stated that George Woodhouse, Managing Editor of The Mail on Sunday, was 'dealing with threatened legal action involving the Haemophilia Society about the story headlined "The Scandal of [ GRO-A ]'s death". I have been asked if I knew/know what the grounds for this legal action were.**

115. No, although I am sure it would have been explained to me at the time.

**36)I have been shown document PJON0000001\_148, a letter from the Press Council to Dr Jones dated 09 April 1984. In this letter it is confirmed that an agreement was reached between The Haemophilia Society and The Mail on Sunday. I have been asked to provide in as much detail as I am are able, the terms of this agreement, including my understanding of how an agreement was reached.**

116. I remember there was an agreement, I don't remember the terms of the agreement. There is a clear delineation between the editorial and management

functions of any newspaper. The editorial should be free of any administrative functions and would only have contact with lawyers and managers in the case of an article being contested or challenged. Having said that, all articles are checked by lawyers and any issues discussed in person. Ongoing and protracted legal issues would not normally be discussed with individual reporters and would be more about a paper's overall stance and management.

**37)I have been asked to refer to PJON0000001\_153. It is apparent from this document, that Dr Jones ultimately decided not to pursue a complaint via The Press Council against The Mail on Sunday regarding “The scandal of GRO-A’s death” article following the end of the threatened legal action from The Haemophilia Society. I have been asked to explain whether I was made aware of this fact, and any other recollections surrounding this issue that may be relevant.**

117. I remember a degree of relief that this man who seemed to have a personal vendetta against me and the paper had decided on the balance of evidence (i.e. the factual basis of what we reported) that he was giving in. He was right to raise the concerns of haemophiliacs but he offered no solution. Those fears that he voiced, I completely understood. But to attack me for inaccuracy and sensationalism was unjustified. His claim that I was being deceptive or inaccurate in my reporting was baseless.

**38)In response to Dr Jones’ complaint, George Woodhouse, Managing Editor of The Mail on Sunday, responded to The Press Council on 12 January 1984 (I have been shown document PJON0000001\_138). Within this response is a statement from the editor, Mr Stewart Steven, in which he wrote that ‘I can also understand that Mr Jones and fellow workers should feel that it is in their interest to keep from their patients the very genuine concern felt by researchers about the risk of AIDS being contracted from infusion of blood products. The fact is that anyone who has ever been in a hospital knows that the medical profession has a vested interest in keeping their patients in absolute ignorance. Doctors and other workers in the field of medicine may well believe that this is justified. We do not.’ I have been asked;**

**(a) to confirm whether I was involved in the drafting and submission of this response to Dr Jones' complaint;**

118. I was possibly involved but Stewart Steven had a view (as would any editor) and he duly expressed his view. He would have checked with me before be submitted it to ensure it was factually correct.

**(b) my own view from my experience as a medical correspondent, on Mr Steven's contention that 'the medical profession has a vested interest in keeping their patients in absolute ignorance;**

119. I accepted Mr Steven's point of view and it was a fair comment. It did not reflect the view of the whole medical community but it was often, in my experience, a widely held judgement that doctors always knew best and were often beyond reproof.

**(c) if I believe that 'keeping their patients in absolute ignorance' extended to being treated without consent, whether that be informed consent (of patient or parent if the patient was a child), whereby all known risks were explained, or otherwise?**

120. I think it is important to be open and honest in every circumstance to allow patients to make their own informed decision. This was not done at all in this context, back then.

**Section 6: The Press Council's judgement on "Hospitals using killer blood" article, 18 March 1984**

**39)I have been shown a document identified as PJON0000001\_145. This is The Press Council's adjudication on Dr Jones' complaint against The Mail on Sunday concerning my article titled "Hospitals using killer blood" published on 18 March 1984. Within the judgement, The Press Council ruled that The**



**Mail on Sunday was 'justified in reporting the risk that patients might contract AIDS from transfusions of blood imported from America, but used extravagant and alarmist terms not justified by the evidence.' The judgement added that the headline was 'unacceptably sensational' and that the 'story generally should not have been treated in such unqualified terms'. The complaint against The Mail on Sunday was upheld.' Regarding my response to this ruling, I have been asked;**

**(a) my reaction to this judgement at the time**

121. I was surprised and found the "alarmist terms" caveat of judgement inconsistent with the claims of factual corroboration.

**(b) whether I agree(d) in any way with The Press Council's judgement that my article was written in 'extravagant and alarmist terms not justified by the evidence';**

122. The article was deliberately extravagant and alarmist. This was completely justified.

**(c) whether I agree(d) in any way with of The Press Council's judgement that the headline was 'unacceptably sensational';**

123. I disagreed then and I still do. Any sensationalism was entirely justified. Google, Oxford Language definition: adj, "causing great public interest and excitement".

**(d) whether I agree(d) in any way with The Press Council's assertion that the 'story generally should not have been treated in such unqualified terms';**

124. I disagreed then and I still do; the terms were qualified.

**(e) whether I believe(d) in any way that The Press Council's judgement was reasoned and fair given all the facts and circumstances;**

125. No, I did not and do not believe that the judgement was reasoned and fair.

**(f) about the reaction of my colleagues and senior management more broadly to this ruling;**

126. Their reaction was one of dismay. The paper was striving to be pioneering and on the side of the reader. Something as significant and important as this, with the Press Council's ruling, was seen to be censorious and against the better interests of the reader.

**(g) how at the time I was impacted by this judgment personally and professionally;**

127. I was threatened by the terms that Dr Jones had used, specifically that I was irresponsible, sensationalist and inaccurate. All of this would normally be terminal for a journalist's career but the paper continued to believe that it was an important and above all a justified and accurate story. They continued to invest time and energy in mounting a campaign on behalf of those affected. In my darkest days this gave me faith that it would all work out in the end. The management backed me because they believed in the story.

**(h) how at the time of this judgment was the wider press/media approach to the issue of contaminated blood supplies and patients being infected with AIDS impacted;**

128. The ruling did initially have the effect of silencing the other publications as they were wary of getting involved for fear of the Press Council's response.

129. My peer group and the paper's competition tried hard to disprove my story but ultimately, they had to join the crescendo of voices saying that this was a cover-up and something needed to be done.

130. Professionally the ruling was potentially very damaging, certainly in the short term. Most journalists pursue their careers across many newspapers and swap between newspapers from time to time, so I was labelled for a period as being 'high risk', with limited hopes of promotion. In the long term, because what I had written was borne out and because I had the unwavering support of my newspaper, it ultimately helped my career.

131. The time and energy investment that I put into that story plus the level of validation by medical experts and other contacts I had gathered and impressed, convinced the paper that I was right and the management team duly supported me. It was an important indicator of what the newspaper stood for. From the earliest days of the Mail on Sunday, its guiding principles were to support the underdog - the Davids against the Goliaths of the unchallenged establishment.

132. The wider media poured a lot of scorn on the story. But soon other reporters and commentators, doing their own research and due diligence, realised it was true and others began to follow. It soon became unstoppable.

133. The purpose of highlighting such a story was always to obtain wider knowledge of the issue at hand and to encourage open debate and understanding. However, the Press Council's ruling led to the suppression of inquiry. In hindsight, it is shocking a few disgruntled people in positions of authority could bridle the press so easily.

134. For context, the Press Council was largely regarded as a faceless body that was made up of some influential but nameless people plus a small selected cohort of retired media management.

**40)My attention has been drawn to The Press Council's ruling and specifically the following statement (PJON0000001\_14 page 3, 1<sup>st</sup> paragraph, 3<sup>rd</sup> line): 'They [newspapers] should avoid presenting stories dealing with medical matters in ways which cause unnecessary alarm, distress or suffering.' I have been asked what I thought then about this statement and if I still hold the same opinion.**

135. I would respond by asking; Why is medicine the exception?
136. Why can't we report on anything that we are not "experts" in?
137. Why should patients be kept in the dark?

**Request(s) for The Press Council to reconsider its judgement**

**41)I have been shown subsequent correspondence marked PJON0000001\_161 dated 21 November 1984 written by Dr Jones to Stewart Steven, then Editor of The Mail on Sunday. Dr Jones (5<sup>th</sup> paragraph) stated that he considered Mr Steven had been 'ill served by his paper's [The Mail on Sunday] medical correspondent'. Please respond to this claim by Dr Jones.**

138. It is a very personal attack. I had the complete support of the Editor, Mr Steven throughout.

**42)Also, continuing with the same paragraph, I have been asked to look at another contention by Dr Jones, who submitted that only the first point of his original complaint (to The Press Council, dated 06 May 1983, PJON0000001\_100) could then be challenged and only in the light of evidence which had accrued since the May 1 1983 article was written. (The first point being that it had not been proven that AIDS was caused by 'a virus' and that such a virus even existed. 'Virus' appeared in the banner above the headline but not within the actual article.) I have been asked for my response to the claim that it had not been known that AIDS was caused by a virus until sometime after my article of May 1 1983.**

139. The story accurately reflected the facts at the time.
140. There was ample detailed evidence in specialist medical publications, research papers and discussion within the medical community. Further, at medical conferences, attended by my sources and shared with me, growing

scientific evidence that suggested a newly identified virus, HIV, was the likely cause of AIDS and that the route of transmission was through blood.

**43)I have been shown a document marked PJON0000001\_177, a letter dated 26 November 1984, from David Watters, Co-ordinator of The Haemophilia Society, to The Press Council seeking assurances that the original ruling would be upheld. I have been asked if I was aware of this request and if I was, to explain my, role (if any) in responding to this matter as medical correspondent of The Mail on Sunday.**

141. Yes, I was aware of it. I did not respond to this personally.

142. By this time, the paper was campaigning on this issue. I was still undertaking the reportage with my contacts. The paper saw an injustice and chose to make the issue into a campaign they were determined to win on behalf of patients, and the doctors and medical researchers and workers who had sometimes bravely stood against a tide of suppression and silence.

**44)In paragraph (2) of the same document PJON0000001\_177, it is stated that you confirmed in your article of 25 November 1984 that your original article about the matter on 1 May 1983 was 'alarmist'. I have been asked to comment on this assertion and to explain my position at that time and if that remains to be the case.**

143. I accept that it was sensationalist and alarmist, but this was needed to make the government act and to get people to wake up to the issue.

**45)Looking at the same document (PJON0000001\_177), I have been asked for a response to David Watters' assertion in paragraph (3); 'While Ms Douglas has been most anxious to justify the claims made in her article of 1 May 1983 she was not prepared to look at the effects likely to follow her report and for this she deserves the heaviest possible censure.'**

144. As a caring young person with a burning desire to “make a difference” in the world, I found David Watters’ assertions offensive and unjustified. I had considered a career in medicine but after gaining a place to do so, after my first degree, I ventured into medical journalism instead. I have the highest ethical standards and considered that my ability to engage people’s trust, together with an aptitude to translate scientific, often complicated, ideas into understandable stories was an asset I should use to common good. I put the patients’ interest first in my reporting of this story. Throughout, this remained my priority.

**46)I have also been directed towards David Watters’ rejection of my assertion that The Haemophilia Society were party to ‘conspiracies of silence’, and that he further claimed that The Mail on Sunday launched a ‘totally unwarranted and personal attack on Dr Peter Jones’. I have been asked to respond to these two statements, to include whether I agree that The Mail on Sunday sought to specifically target Dr Peter Jones following his complaint(s) to The Press Council.**

145. As far as I know, Dr Jones was never attacked in print. On the contrary, the personal attack he perpetrated against me could have been deleterious to my career, though my motivation was always to try to help those ill-served by the medical profession.

146. The Haemophilia Society were party to the ‘conspiracies of silence’. They were rightly concerned that haemophiliacs would refuse to take factor VIII products and of course worried about their patients risking AIDS infection, so they were stuck between a rock and a hard place because the government did not act in response to the latter risk.

147. It is debateable whether the Haemophilia Society acted in the best interests of haemophiliacs. They should have been able to reassure haemophiliacs that something was being done. But their lack of action in the face of risk, might not have been deemed dutiful or helpful.

**47) I have been shown copy of a press cutting marked PJON0000001\_170. It is an article in The Mail on Sunday dated 09 December 1984, titled "Press Council refuses to withdraw", in which it reported that The Press Council had refused to withdraw its adjudication against The Mail on Sunday following a request for reconsideration by the Editor. I have been asked to explain;**

**(a) The circumstances surrounding this request by the Editor Stewart Steven, including whether I played any role in the submission of this request;**

148. The newspaper rightly persisted in their fight for choice of treatment - and for support - for haemophiliacs. The Editor felt strongly about the lack of reaction when we had persisted to secure one. It became a campaign for the still young newspaper and one we were all determined to win.

**(b) My understanding of the motive(s) behind this request, for example if the facts had changed since the article's original publication, or the Press Council adjudication;**

149. It was becoming more and more evident that there was a link between AIDS and blood, therefore the inaction of government and the suppression of the press became even more culpable. The inactivity of government encouraged the Mail on Sunday to continue to fight for it. This made the Press Council's refusal to withdraw its ruling even more disappointing.

**(c) Whether I was/am aware if there were any further requests made for The Press Council to reconsider its judgment made by the Editor of The Mail on Sunday;**

150. I am not sure if any further formal requests were made but I am sure there would have been more dialogue.

**(d) If I knew the reason why The Press Council upheld its original judgement;**

151. No.

**(e) My view of The Press Council's decision to uphold its original judgement;**

152. It was shocking and surprising. I fail to see how they could not see that the alarmist nature of the article was justified and this has since been vindicated. If their purpose is to protect good and accurate reporting, then they should have withdrawn their original ruling.

**"Press Council thinks again on AIDS alert", 25 October 1987**

**48)I have been shown copy of another press clipping marked PJON0000001\_021, published in The Mail on Sunday on 25 October 1987 titled "Press Council thinks again on AIDS alert". I can see that Lorraine Fraser is the author of this article and the by-line states that she was the medical correspondent for The Mail on Sunday when this article was published. I have been asked to confirm when I was replaced as medical correspondent for The Mail on Sunday and what the circumstances were i.e. if I remained at the newspaper in a different position or capacity?**

153. As previously stated, Lorraine Fraser, who authored this article as the then-medical correspondent, is a close friend and former colleague. She was not appointed straight away after my own promotion to run the features department of the paper, but was in place there soon after and remained a very capable and respected specialist once I had left to take up another promotion to the sister paper, the Daily Mail.

**49)I have been asked to outline my recollections of The Press Council's decision to reconsider its judgement, to include an explanation, if possible, why The Press Council chose to review this judgement over three and a half years after making its ruling.**



154. By this time, I was at a different newspaper and this felt like an echo of the past. From a personal perspective it was important, but by this time it was too late. As might be expected, I followed events from afar, and I would receive calls or letters from some members of the Haemophilia Society.

155. I would have discussed this with Lorraine Fraser but cannot recall specifically what was said.

**50)I have been asked if I was aware, whether it was in response to any pressure from The Mail on Sunday and/or other sources, or in response to new information coming to light concerning the risks of infected blood?**

156. I am unsure if the Press Council's change of heart came about because of new information or more lobbying. I can however say with some confidence that their members would be aware of the mounting evidence that proved my story and of the increasing pressure to act to help haemophiliacs, who by now were becoming infected in significant numbers.

**51)I have been shown a copy of a letter dated 12 November 1987 and marked PJON0000001\_018. It appears to have been sent by the Director of The Press Council, Kenneth Morgan, to Dr Jones. Within this letter, Mr Morgan wrote that there were 'repeated requests' to the Press Council for it to reconsider its original adjudication. Mr Morgan invited Dr Jones, the Editor of The Mail on Sunday and The Haemophilia Society to a meeting to make submissions and supply any material to inform The Press Council's complaints committee when reconsidering their adjudication. I have been asked to indicate whether I was aware of this meeting and, if so, whether I offered any submissions or material to make my case regarding the "Hospitals using killer blood" article.**

157. I was not previously aware of this letter or the meeting and I did not make any submissions.

**52)I have been asked if I was aware if The Press Council's complaint committee withdrew or altered its original ruling against The Mail on Sunday in respect**

of my “Hospital using killer blood” article when it convened on 09 November 1987, or indeed to indicate if there was no alteration to the original adjudication?

158. No.

**Section 7: “Those guilty of muffling the alarm”, Daily Mail comment 22 November 1984**

53) I have been shown a copy of a Daily Mail editorial ‘Comment’ dated 22 November 1984, titled “Those guilty of muffling the alarm”, a document marked HSOC0015999. I have been asked whether I was consulted on this editorial article, and if so whether I had any input into its contents.

159. This was the Daily Mail which I did not join until 1987 and therefore outside of my brief. I had no involvement.

54) I have been asked to comment on the passage within HSOC0015999, at just over half way down the column where it is written ‘Those who raised the alarm knew what they were doing. It was those who sought to muffle the alarm who were grievously at fault.’

160. This was the opinion of the paper, a sister paper of the Mail on Sunday. I was not involved in this personally.

**Section 8: “AIDS, this scandalous cover up” article, 25 November 1984**

55) I have been asked to look at a copy of my article that was published on 25 November 1984, in The Mail on Sunday titled “AIDS: This scandalous cover-up” (marked as DHSC0000352); In particular, I have been asked to address the line (halfway down the 2<sup>nd</sup> column) ‘Nobody wanted to alarm people. Yet, alarm is precisely what was and still is needed’ and a few lines below, I wrote ‘The truth is my story was alarming. I intended it to be.’ I have been asked to

**explain my view as to why there had been so much concern about alarming people and primarily who were raising these concerns and why.**

161. I would argue strongly that the events I reported were alarming. Anything that creates a climate of fear needs to be carefully weighed. The truth however is clear. There was much to fear from the revelations I made. The number of deaths resulting from our adherence to the administration of contaminated blood was reprehensible, and without question something that was to be feared... and hopefully when I first reported it, avoided.

162. I believe that I have answered the question regarding concern about alarming people.

**56)I have been asked about my reference to ‘a battle against the Establishment...’ (3<sup>rd</sup> column, 4 lines down) and who I believe constituted ‘the Establishment’ in this statement.**

163. This line has echoes of Stewart Steven’s leader article. The paper’s stance is to tackle the establishment on behalf of the little man. That was the mission statement of the Mail on Sunday. We did this story on behalf of David against Goliath.

164. The establishment in this context meant; anonymous Government, faceless Department of Health executives, senior medics. For my part, I was frustrated that senior figures attacking me, supposedly protecting patients and their families, were failing to address the problems I sought to make public. It was almost as though they didn’t need to talk to a mere journalist. I was struck then and now that journalists, who try to be messengers of facts and information, are often caught in the firing line of blame and failed responsibility.

**57)I have been asked If I hold Dr Jones and The Press Council responsible for “the Establishment’s” failure to act sooner by heeding the warnings highlighted in my articles about the risks of importing AIDS-infected blood from America.**

165. Yes, but not exclusively. There appeared to be a collective view that the annoying, ill-informed Press were to be silenced while the experts got their house in order - except they didn't. I found some of the so-called establishment, we perhaps a little clumsily decried, in fact rather bravely put their heads above the parapet and took the risk of the same alienation and disapproval I faced. Some doctors did speak out, some helped me. But the climate was to hunker down and do nothing. For example, I understand the whistle blower who spoke to me in 1983 was threatened with the sack if he spoke out about the risks of infected blood.

**58) I have been asked if I believe that if original article of 01 May 1983 been taken more seriously by the 'medical establishment' that the risks could have been reduced and the consequences mitigated by being responded to sooner.**

166. Yes. The actions of Dr Jones, the Press Council and the establishment halted the momentum that I had built up through these 'alarmist' articles. Any pressure built up by my article in May 1983 was suppressed by Dr Jones' complaint and the Press Council's ruling.

167. There was fear within the medical community, which remained divided on the issue. Those who were willing to discuss it and keep an 'open door' were made wary and afraid of their bosses (senior doctors) who disagreed with them.

168. The Head of Haematology at Cardiff Hospital who had spoken to me in 1983 said: 'I can't keep talking to you, I will lose my job'. I was aware of lots of doctors who didn't want to speak out for fear of losing their jobs.

169. The media was bridled and the very community that was supposed to respond to this was suppressed by the senior people from within it.

170. If the establishment, ministers, researchers, doctors, patients and their families had been allowed to talk about this openly and honestly, then there

might have been swifter corrective actions, more alternative treatments, safer blood and fewer deaths.

**59)I have been asked to comment on the fact as I believed it to be at the time of writing this article, that the UK and the world's media were effectively silenced by Dr Jones' complaint to The Press Council regarding my "Hospitals using killer blood" article 'started a chain reaction not only in this country but abroad' and that media around the world had effectively been 'silenced', having been led to believe that The Mail on Sunday had got the facts wrong, after the Press Council upheld the complaint. In particular I have been asked how the media were 'silenced' and also what I know about the impact this 'silencing' had on countries outside of the UK, as I had suggested in the November 25 1984 article.**

171. Yes; that is right. I was aware of the media in countries outside the UK was also being suppressed.

172. I note in the bottom of **DHSC0000352** at the last paragraph under the heading 'Timetable of the warning that was ignored' that the Department of Health and Social Security announced 'that Britain's main blood laboratory will heat treat Factor VIII specimens from next year. Imports of American Factor VIII should end by December 1986.' We now know this was too late, and had the medical community responded sooner to the warnings heeded in my articles, rather than acted to suppress them, this could have prevented numerous deaths.

173. People knew about the risks. A solution could have been discussed and pressure mounted, for someone to act. Instead we endured months, if not years, of nothing and a complete lack of positive response.

**60)I have been asked to explain on what basis I believed that Dr Jones 'made it his personal campaign to silence' me and The Mail on Sunday and whether I still believe this to be the case.**

174. I know that he knew what the problems were, but perhaps he didn't know what the solution was.

175. Perhaps he didn't like his authority and reputation being questioned.

176. Perhaps he wanted to be celebrated for introducing factor VIII to haemophiliacs in an affordable way that improved the quality of haemophiliacs' lives. This may have impacted on his perceived legacy.

177. I do not have any idea if Dr Jones still feels the same.

**61) Within the article, I wrote that Dr Jones' 'expert advice certainly convinced The Press Council experts always know best...' I have been asked to explain what I meant by this 'experts always know best' comment and whether I believed this attitude to be indicative of a wider culture prevailing at the time, that 'experts' were always believed.**

178. It is my view that experts become experts by questioning knowledge and endlessly searching for new interpretations and answers. The respect they earn from this acquisition of greater knowledge is gratifying but sometimes addictive. So, sadly, when they become experts, they often dislike being challenged about their wisdom and authority.

179. I suspect that Dr Jones was uncomfortable with his expertise being questioned, especially by a journalist. As a result of this, patients weren't allowed to make up their own minds about treatment through proper information and truthful data from him or anyone else knowledgeable.

**62) I have been asked to explain the passage in my article; 'Within hours of this newspaper [01 May 1983 "Hospitals using killer blood"] dropping through letterboxes the medical establishment had locked its doors.' (halfway down 1<sup>st</sup> column).**

180. One section of the medical establishment did 'lock its doors'. The problem was that the other section of the medical establishment who kept their doors open were suddenly very wary, threatened, whether explicitly or implicitly, meaning that they refused to be critical and speak out for fear of losing their reputations or even their jobs.

**63) I have been asked if I believe that Dr Jones' efforts to 'suppress' my reporting of the risk of AIDS infected blood being imported from America constituted an attempt to cover-up what was happening in the UK, with regard to imported blood products?**

181. Yes. There are two schools of thought; when you make a mistake and I think Dr Jones knew that he had, you either say 'mea culpa' and admit to the mistake or you refuse to accept it. Dr Jones' refusal to accept his mistake led him to cover it up.

#### **Dr Jones defamation legal proceedings**

**64) I have been shown a document marked PJON0000001\_187, a copy of a letter dated 15 March 1985, from Hempsons Solicitors, apparently representing Dr Jones, to the Editor of The Mail on Sunday, intimating that they had advised Dr Jones that my "AIDS, This scandalous cover up" article was 'clearly defamatory'. In relation to this letter and the matter in hand, I have been asked to comment;**

**(a) Whether I was cognisant of this letter, or the existence of it and if so how I was first made aware of it;**

182. Yes, I knew about it. I can't remember how I first made aware of it.

**(b) My response to this letter at the time (if indeed I was aware of it;**

183. I was saddened but also unsurprised.

**(c) My reaction to this letter now;**

184. I was not defamatory towards him. The paper didn't choose to single him out for blame. We always maintained it was a concerted decision to keep medical matters and decisions under wraps.

**65)In the same letter (PJON0000001\_187), my attention is drawn to the passage 'For private reasons, our client [Dr Jones] has decided not to issue proceedings in this instance. If, however he is further defamed in your newspaper, we shall refer to the matters set out above in the subsequent proceedings'. I have been asked;**

**(a) if I knew or know why Dr Jones decided not to pursue legal proceedings;**

185. That letter was a threat. I assume that his lawyers said to him that he didn't stand a chance. I think he was being obsessive and couldn't let go.

**(b) If I believed the article in question to be defamatory;**

186. No. I did not and do not now.

**(c) If I knew whether any further claims for defamation were issued against The Mail on Sunday by Dr Jones;**

187. I am not aware of any further claims for defamation.

**66)I have been asked in relation to matters pertaining to this letter to comment on Hempsons Solicitors assertion that my article "AIDS, this scandalous cover up" accused Dr Jones 'of deliberately conspiring to prevent the further publication of facts which he knew to be true, by relying upon his acknowledged expertise.' In response to this I would say;**

188. The essence of what Hempsons outlines in this letter, is that I accused Dr Jones of deliberately concealing the truth and that he was partly responsible



for avoidable deaths from AIDS of at least two haemophiliacs. It's true that I considered his obstinacy and personal reputation defence as obstructive in the search for solutions for haemophiliacs presented with the risk of infection from contaminated blood.

189. His actions didn't cause their deaths. But his reaction to my story certainly allowed other patients to become infected. Had he been more open to investigate alternative treatments and perhaps even create a team of experts reporting into him, the situation might have been addressed immediately, with new solutions being investigated and offered as a matter of urgency.

190. However, his conspiracy of silence and attempts to silence me and others within the media meant that others died of AIDS later. These were people who had not yet contracted the disease. Technically, of course he didn't kill those two patients referred to in the articles, but he was negligent about others, which some might say made him partly responsible for the subsequent deaths of others.

**Section 9: "Tragedy of AIDS warnings that went unheeded", 18 October 1987**

**67)I have been shown a document marked HSOC0008442, containing copies of press cuttings, one of which is an editorial 'Opinion' piece from The Mail on Sunday dated 18 October and titled "Tragedy of AIDS warnings that went unheeded". I have been asked if I was involved in the drafting of this article and if I was, to explain; The circumstances and timing of this article, to include whether it related to The Mail on Sunday making a further request of the Press Council to withdraw the ruling on your May 1983 article. I have been asked;**

**(a) if I agree with the contention within this editorial article that "To warn and alarm is one of the first functions of a campaigning newspaper"?**

191. I was not involved in the drafting of this editorial, but yes, I agree with this contention.

**(b) if I believe that the manner of ‘informing’ should be balanced against the risk of alarming, in this case haemophiliacs to such a degree that they may refuse to take Factor VIII products, thereby increasing risk of harm in another way and is this why I advised haemophiliacs to continue to use blood products in my article dated 02 October 1983 (HSOC0016112);**

192. Yes.

**(c) if I agree with the editorial article in the criticism of The Press Council’s ruling in 1984 that still stood at the time of the publication of this Comment piece in which it is asserted; “It is a standing reproach to the Council, and an insult to the victims.”**

193. Yes, with the caveat that I question what the Press Council’s purpose and mission was.

**68)I have been directed to the other copy of a press cutting within HSOC0008442; a Daily Mail article published on 19 October 1987 titled “Every cause for alarm”. I have been asked;**

**(a) if I had any input or role in the production of this article;**

194. I had no input or involvement in this article.

**(b) for comment on The Daily Mail editorial article’s contention that The Press Council’s ‘subsequent silence is more shameful than its original attempt to ‘muffle the alarm’?**

195. The Daily Mail in my time there felt compelled to stand against the Press Council. Tabloid newspapers in particular would have fought passionately against the bridling of the press by the Press Council because it was becoming an unpleasant straight jacket rather than helping to monitor any genuine excesses of the media.

## **Dr Jones' complaint to The Press Council**

**69) I have been shown a document marked PJON0000001\_017, a letter dated 13 November 1987, from Hempsons Solicitors, to the Editor of The Mail on Sunday Stewart Steven, regarding the article of 18 October 1987 titled "Tragedy of AIDS warnings that went unheeded". I have been asked;**

**(a) to indicate whether I was aware of this letter complaining that the 18 October 1987 article was factually inaccurate and based on false assumptions and if I was, to explain;**

196. I was not aware of this letter. By this stage I was at a different newspaper.

**(b) whether I believed that this 'Opinion' piece 'singles out Dr Jones', as contended by Hempsons Solicitors;**

197. See above - I was no longer directly involved.

**(c) if I believe that this article did in fact allege a 'personal failure by Dr Jones' which 'harmed his own patients', and whether I agreed that this was the case;**

198. I can comment on my personal feelings about Dr Jones and the paper's campaign when I was employed there as medical correspondent. But perhaps my own feelings are not especially relevant, once I had left an active role in the unfolding story?

**(d) whether I agreed with any of the submissions made by Hempsons Solicitors as to why the article is 'factually inaccurate and rests upon false assumptions';**

199. No, I did not agree with the submissions made by Hempsons. I have previously explained the rigour of my reporting.

**70)I have been shown document PJON0000001\_050, a copy of a letter of complaint dated 5 February 1988, from Hempsons Solicitors to The Press Council on behalf of Dr Jones. on 5 February 1988, as well as a copy of a letter marked PJON0000001\_051 that was sent by Hempsons on the same day to the Editor of The Mail on Sunday, Stewart Steven and a document marked PJON0000001\_058, a response to the complaint by Managing Editor of The Mail on Sunday, Jim Anderson, dated 18 February 1988. I have been asked about the extent of any involvement that I may have had if any, in responding to this complaint by Dr Jones.**

**200. I may have known about this but I cannot recall. I was not with the Mail on Sunday then and so I will not have had any input in their response.**

**71)I have been shown a document marked PJON0000001\_062, a copy of a further letter from Jim Anderson to Hempsons Solicitors dated 07 April 1988 rejecting the arguments made by Dr Jones against the “Tragedy of AIDS warnings that went unheeded” article. Jim Anderson argued that, had The Mail on Sunday’s alarmist warnings been heeded, ‘it could have been so different’. I have been asked if I agree or disagree with this.**

**201. Yes, of course. I had not seen the letter before but I absolutely agree with it.**

**72)I have been shown a document marked PJON0000001\_084, a Press Council document apparently dealing with the questions raised in Dr Jones’ complaint to them. The document contains responses by The Mail on Sunday editor Stewart Steven to Dr Jones’ complaint to The Press Council. I have been asked to comment, specifically on the following;**

**(a) ‘... Dr Jones was one of those people who contributed to the aura of secrecy surrounding AIDS and haemophiliacs a few years ago’;**

**(b) 'As long as doctors and health workers were quietly expressing their anxieties in the corridors of Whitehall, nothing, or next to nothing, was being done. The moment that newspapers started expressing alarm on this subject, action began to be taken';**

**(c) '... the Press Council was largely responsible for all these problems. It and it alone had issued that disgraceful, crass and ignorant ruling of March 19, 1984...';**

**(d) regarding Mr Steven's contention that, rather than being 'motivated by malice towards Dr Jones' and publishing 'an unwarranted, unfair and misconceived attack upon him', Dr Jones was 'unreasonably obsessed by this newspaper and its journalism.' I have been asked which of these points of view I believe to be true, from my experience as medical correspondent for The Mail on Sunday?**

202. I had nothing to do with this and have not seen this document before.

203. I have read this document and agree with it wholeheartedly.

204. I would comment on paragraph 10 that the Press Council was not solely responsible but complicit. I don't think the Press Council was alone in this; they, in muzzling me, made other media outlets wary of further criticisms and repercussions for criticising the medical profession. In my view, it was a concert of people taking the view that they needed to cover this up because there weren't any other solutions.

**73) Within this response, Mr Steven contended that The Mail on Sunday were "not interested in attacking [Dr Jones]. We are only interested in drawing attention, time and time again, to the fact that this is a country where there is an unacceptable level of secrecy in all matters including those involving the medical profession". I have been asked for my own views on this statement based on my experiences as a journalist and the medical correspondent for The Mail on Sunday, who first reported on this 'story'.**

205. I agree entirely with this statement.

**74)In the same document (PJON0000001\_084), Mr Steven recalled a visit from Dr Jones to his office. Mr Steven wrote that he 'could not understand the purpose of the visit until a week or so later [he] discovered that a book which [Dr Jones] had written on haemophilia was about to published.' Mr Steven believes that Dr Jones 'believed that [The Mail on Sunday] would take every opportunity to attack him and that this book would give us just such a chance.' Mr Steven added his view that this incident indicated Dr Jones' 'state of mind'. I have been asked.**

**(a) if I attended this meeting, if not if I was aware or not aware of this meeting taking place;**

**(b) if I was previously (before being shown PJON0000001\_084) aware of the discussions of this meeting and both its purpose and outcome;**

**(c) whether I agree with Mr Steven's opinion that Dr Jones attended this meeting because of concerns about The Mail on Sunday personally criticising him; and**

**(d) whether I was/am aware of, or attended, any other meetings between Dr Jones and staff at The Mail on Sunday, or anywhere else.**

206. I wasn't aware of this and didn't attend this meeting. I am not aware of its purpose and outcome.

207. I never met Dr Jones.

#### **The Press Council's ruling on Dr Jones' complaint**

**75)I have been shown a document marked PJON0000001\_090, a copy of a press cutting with 'Mail on Sunday 18/12 hand written, which I am informed is from**

**the Mail on Sunday 18 December 1988. The piece reports that The Press Council upheld Dr Jones' complaint against The Mail on Sunday for its article titled "Tragedy of AIDS warnings that went unheeded". The full adjudication is reproduced in this cutting. In relation to this document, I have been asked to give my response to the following points;**

- (a) "The [1984] adjudication has often been misquoted and misinterpreted" in that it ruled that the contents of the "Hospitals using killer blood" article were "of serious concern and a proper subject for newspaper inquiry and report";**
- (b) "The Press Council's criticism of the newspaper was not for dealing with the danger, but for the way in which it dealt with the danger";**
- (c) "The [18 October 1987] article implied that 1,200 people were paying the terrible price of infection because Dr Jones chose to ignore The Mail on Sunday's warning and reported the paper to the Press Council instead";**
- (d) "In its understandable determination to defend its original article and its zeal to overturn the critical adjudication, The Mail on Sunday has become obsessed with Dr Jones";**
- (e) "The attack on him in this editorial article was in shrill, pointed personal terms. The Press Council cannot say that it was actuated by malice but it is satisfied that it was unwarranted, unfair and misconceived."**

208. The subsequent rulings and events, recorded after my promotion, running the features department of the paper and in 1988 my departure from the Mail on Sunday, were not directly addressed to me and seldom involved me at all, despite the commitment I retained to a story that was perhaps the most important in my life. Why do I say that? Seldom as a journalist do you have the same chances I was given to change suffering and adversity. A journalist is employed to inform, challenge and seek, indefatigably, for the facts. Occasionally, a journalist can entertain. Even more occasionally, a

journalist's inquisitiveness can uncover mistakes, highlight injustice and wrong-doing, even to right some serious wrongs. Looking back, I have no regrets about the story I wrote and about the way I handled criticism, ostracism and sometimes flat abuse. Compared to the misfortunes of those I sought, in my own way, and in my own words, to protect, my challenges were minor.

209. The fact that I am in 2021 writing these words gives me a little personal pride, but most of all a pride in the power of human co-operation and collaboration, that we can change our world and most importantly we can learn from our mistakes. As this Inquiry seeks us to do.

210. Dr Jones' actions meant other people in the profession ran for the hills. It led to silence and suppression, which consequently allowed these things to continue. What he did had the knock-on effect of preventing transparency and immediate action.

**76)I have been asked for my comments about The Press Council's adjudication (bottom of 3<sup>rd</sup> column), in which it stated that The Mail on Sunday published an editorial in October 1987 ("Tragedy of AIDS warnings that went unheeded", which was the subject of the present complaint) "In its campaign to justify its original warning article and reverse the Press Council ruling".**

211. See above.

#### **Section 10: Other Issues**

**77)I have been asked if I believe that Dr Jones', and other medical professionals' and more specifically, haematologists' refusal to act in response to 01 May 1983 article, represents a lack of candour on behalf of the medical community, or even a cover-up more generally?**

212. Yes, at the top levels. I spoke to plenty of people within the medical profession who were concerned and wanted to talk more, but because of the consequences of that cover-up they were wary and didn't want to rock the boat.



It was the hierarchy of the medical community, not the community itself, that was responsible for covering this up.

213. There were numerous haematologists who were obviously concerned about this problem when talking off the record to me. These same haematologists became wary and fearful after Dr Jones' response.

**78)I have been to identify any documentation that I may hold pertaining to the matters discussed in this letter, and the Inquiry's Terms of Reference. If I hold no such material I have been asked to explicitly state this.**

214. I hold no such material, as stated I destroyed all my notes/records.

**79)Please address any further matter(s) that may be relevant to the Inquiry's Terms of Reference.**

215. I have nothing further to add.

**Statement of Truth**

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

Signed \_\_\_\_\_

GRO-C

Dated \_\_\_\_\_

28/10/21

**Susan Douglas WITN4120001: Table of Documents**

<b>Document</b>	<b>Description</b>
PRSE0000199	"Hospitals using killer blood", The Mail on Sunday (01 May 1983)
PJON0000001_101	"Action to ban danger blood", The Mail on Sunday (08 May 1983)
PJON0000001_100	Letter from Dr Peter Jones to The Press Council (06 May 1983)
PJON0000001_104	Letter from George Woodhouse, Managing Editor, The Mail on Sunday to Dr Peter Jones (18 May 1983)
PJON0000001_108	Letter from Dr Peter Jones to George Woodhouse, Managing Editor, The Mail on Sunday (10 June 1983)
HSOC0016112	"The scandal of [GRO-A] death", The Mail on Sunday (02 October 1983)
PJON0000001_126	Letter from Dr Peter Jones to The Director, The Press Council (05 October 1983)
PJON0000001_135	Letter from Assistant Secretary, The Press Council, to Dr Peter Jones (29 November 1983)
PJON0000001_148	Letter from Assistant Secretary, The Press Council, to Dr Peter Jones (09 April 1984)
PJON0000001_153	Letter from Dr Peter Jones to Assistant Secretary, The Press Council (06 June 1984)
PJON0000001_138	Jones against The Mail on Sunday: George Woodhouse, Managing Editor of The Mail on Sunday response to The Press Council Complaint U10098/D3101 (12 January 1984)
PJON0000001_145	The Press Council Press Release No. U10098/1647 ruling on Jones v The Mail on Sunday (18 March 1984)
PJON0000001_161	Letter from Dr Peter Jones to Mr Steven, Editor of The Mail on Sunday (21 November 1984)
PJON0000001_177	Letter from David Watters, Co-ordinator, The Mail on Sunday to The Press Council (26 November 1984)

PJON0000001_170	"Press Council refuses to withdraw", The Mail on Sunday (09 December 1984)
PJON0000001_021	"Press Council thinks again on AIDS alert", The Mail on Sunday (25 October 1987)
PJON0000001_018	Letter from The Director of The Press Council to Dr Peter Jones (12 November 1987)
HSOC0015999	"Those guilty of muffling the alarm", Daily Mail comment (22 November 1984)
DHSC0000352	"AIDS, this scandalous cover-up", The Mail on Sunday (25 November 1984)
PJON0000001_187	Letter from Hempsons Solicitors to The Editor, The Mail on Sunday (15 March 1985)
HSOC0008442	"Tragedy of AIDS warnings that went unheeded", The Mail on Sunday opinion (18 October 1987)
PJON0000001_017	Letter from Hempsons Solicitors to The Editor, The Mail on Sunday (13 November 1987)
PJON0000001_051	Letter from Hempsons Solicitors to The Editor, The Mail on Sunday (05 February 1988)
PJON0000001_050	Letter from Hempsons Solicitors to The Press Council (05 February 1988)
PJON0000001_058	Letter from Jim Anderson, Managing Editor of The Mail on Sunday to Hempsons Solicitors (18 February 1988)
PJON0000001_062	Letter from Jim Anderson, Managing Editor of The Mail on Sunday to Hempsons Solicitors (07 April 1988)
PJON0000001_084	Submission from Mr Steven, Editor of The Mail on Sunday, to The Press Council regarding Complaint No. Z15483/D5792 Jones against The Mail on Sunday (24 September 1988)
PJON0000001_090	"'Personal attack' on doctor is criticised", The Mail on Sunday (18 December 1988)