

Witness Name: Professor Michael Arthur

Statement No.: WITN4668001

Exhibits: WITN4668002-004

Dated: 24 August 2020

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF PROFESSOR MICHAEL ARTHUR

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 2 June 2020

I, Professor Michael Arthur, will say as follows: -

Section 1: Introduction (questions 1-3)

Question 1)

Name: Michael Arthur

Address: known to the Infected Blood Inquiry

Date of Birth: GRO-C 1954

Qualifications: Bachelor of Medicine 1977, Doctor of Medicine 1986, FRCP 1993, FmedSci 1998

Question 2)

Positions held: Professor of Medicine, University of Southampton

Honorary Consultant Physician and Hepatologist, Southampton University
Hospitals Trust

Roles and responsibilities: Teaching Medicine and Gastroenterology/Hepatology, liver research. Clinical care in acute general medicine and provision of tertiary Hepatology clinical services for the Wessex Region.

Question 3) Membership of Committees: Member of the Dept of Health Advisory Group on Hepatitis (1998-2004)

Section 2: Responses to criticism of Witness Number -WITN2254001

Question 4) Response to paragraph 23.

Thank you for asking me to provide a statement to the Infected Blood Inquiry about my clinical care of this patient in 1997 – now nearly 23 years ago.

I have no recollection of the case, the hospital notes have been destroyed, and all that I have been able to access are digital records of three clinic letters that were sent either to her or to her GP at that time. The letters were dated 24/11/97 and 22/12/97 (to her GP). I also wrote to her on 10/12/97 offering another appointment to see me personally to discuss further investigation and potential treatment of her disease.

The three letters reveal that she had chronic HCV infection against a background of Von Willebrands disease (VWD). The consultation notes that she was positive for Hepatitis C antibodies and also for HCV-RNA in her blood stream. Her liver function tests were normal, including her AST level. She was asymptomatic apart from reporting lethargy.

My letter of 22/12/97 states clearly that we discussed the pros and cons/risks of further investigation by liver biopsy (given her VWD) and we also discussed potential treatment with Interferon and Ribavirin.

Given the content of my letters (indicating that she was HCV-RNA positive) and the fact that we were discussing treatment with interferon and ribavirin, I cannot think that I would have told her that she was clear of hepatitis C. I am very sorry if there were any misunderstanding.

My clinic letter records that the patient and her mother wanted time to consider next steps and I therefore suggested a further appointment arranged for two months later. I'm sorry, but I have no recollection or record of what happened next, and I have no recollection of any subsequent interaction with the patient. I hope that she has been able to avail herself of the curative treatments for Chronic Hepatitis C infection that are now available.

Question 5) Response to paragraph 24.

I am very sorry if this patient felt I was abrupt. I cannot remember the consultation but I would normally try to be empathetic about a patient's symptoms. I am sorry if my efforts fell short on this occasion.

Section 3: Other Issues

I do not wish to raise any other issues.

Statement of Truth

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

Signed: Michael Arthur

Dated: 07/09/2020

Table of exhibits:

Date	Notes/ Description	Exhibit number
24 November 1997	Letter from R Thomas to Dr Pearson regarding W2254's hepatitis C infection and investigation into her symptoms.	WITN4668002
22 December 1997	Letter from Prof. Arthur to Dr Pearson regarding W2254's hepatitis C diagnosis	WITN4668003
10 December 1997	Letter from Prof. Arthur to W2254 regarding a further appointment to discuss her hepatitis C diagnosis.	WITN4668004