

Witness Name; Tracey Gillies
Statement No.: WITN6932012
Exhibits WITN6932013-016
Dated: 27/06/2022

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF TRACEY GILLIES

I provide this statement on behalf of NHS Lothian in response to a request under Rule 9 of the Inquiry Rules 2006 dated 23 March 2021.

I, Tracey Gillies, will say as follows: -

Section 1: Introduction

1. Please set out your name, address, date of birth and professional qualifications

My name is Tracey Gillies, my date of birth is GRO-C 1966, and my professional qualifications are MBChB FRCS. My address is NHS Lothian, Waverley Gate, 2-4 Waterloo Place, Edinburgh, EH1 3EG.

2. Please set out your current role at the Lothian Health Board and your responsibilities in that role.

My current role is as Executive Medical Director with consequent responsibilities and as Responsible Officer for NHS Lothian.

3. Please set out the position of your organisation in relation to the hospital/other institution criticised by the witnesses (for example “NHS Foundation Trust (‘the Trust’) operates from Hospital X and Hospital Y (formerly Hospital Z)”).

NHS Lothian is responsible for healthcare provision for the population of the Lothian area.

Section 2: Response to Criticism of witness W1718

4. At paragraphs 30 and 43 of his witness statement, witness W1718 asserts that had he initially been referred to the liver unit at King's Hospital for antiviral treatment instead of the RIE, he would not have required a liver transplant. Witness W1718 believes he incurred extra suffering because he was not given the right care from the start. Please comment on this.

Paragraphs 30 and 43 referred to say as follows:

“33. What has really annoyed me is that, despite the fact that I was suffering from a liver disease, rather than being treated by a liver specialist, I had a hematologist in charge of my care. I feel they should have immediately referred me to a liver consultant. Even at St Thomas' Hospital, a year before I underwent a liver transplant, I was still receiving treatment from hematologists at the Haemophilia center for my hepatitis, rather than being treated by a liver specialist.”

“43. I believe that, if I had been under the care of the liver unit for my first two rounds of antiviral treatment, I may have cleared the HCV and I would not have had to have the liver transplant. I believe I went through extra suffering because I was not under the right care. I should have received blood transfusions every time I was given antiviral treatment; this would have meant I was well enough to continue the treatment for longer.”

The Board identified Professor Christopher Ludlam and Professor Peter Hayes as the most appropriate people to respond to the criticisms made. Professor Ludlam is now retired but was the Haemophilia Director at the Royal Infirmary of Edinburgh. He was one of the patient's treating clinicians and is the clinician towards whom the criticisms are directed. His response and accompanying exhibits are attached (WITN6932013-015). Professor Hayes is now retired but was a Liver Specialist at the Royal Infirmary of Edinburgh. He was one of the patient's treating clinicians. His response is attached (WITN6932016).

Section 3: Other Issues

5. If there are any other issues in relation to which you consider that you have evidence which will be relevant to the Inquiry's investigation of the matters set out in its Terms of Reference, please insert them here.

None

Statement of Truth

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

Signed

GRO-C

Dated

27/06/2022

Table of exhibits:

Date	Notes/ Description	Exhibit number
16/03/2022	Comments from Professor Christopher Ludlam	WITN6932013
12/01/1995	Letter dated 12 th January 1995	WITN6932014
25/07/1995	Letter dated 25 th July 1995	WITN6932015
17/03/2022	Comments from Professor Peter Hayes	WITN6932016