

To Whom It May Concern

I have been asked by Lothian Health Board to assist in responding to the Rule 9 Request of the Inquiry Rules 2006 dated 12 August 2021 to criticisms made by witness W2674. The criticisms I have been asked to address are as follows:

5.2. At paragraph 38 of witness W2674's statement, the witness states that as her husband's health deteriorated, he repeatedly phoned the liver transplant team, 'but they would not do anything', so the witness personally took her husband to the transplant ward at Edinburgh Royal Infirmary.

5.3. At paragraph 39 of witness W2674's statement, the witness states that her husband was given a diagnosis and details of secondary cancer in a room where other patients and their visitors were listening. At no time did her husband see an oncologist.

5.4. At paragraph 39, witness W2674 states that her husband was sent home on a Friday in a private ambulance with no medical support, and no care package for the weekend.

5.5. At paragraph 41, witness W2674 states that she sent a letter to the liver team outlining her concerns regarding her husband's treatment and the fact his tumour was not investigated properly. Witness W2674 states that she received a response in which the hospital admitted they had not looked after her husband properly

My name is Alastair MacGilchrist, and I was a consultant hepatologist (i.e. liver specialist) in the Scottish Liver Transplant Unit at the Royal Infirmary of Edinburgh from 1992 until 2017. I appreciate the opportunity to respond to the criticisms of witness W2674 regarding the care of her husband by the Scottish Liver Transplant Unit, where I was one of a team of clinicians responsible for his care. He had cirrhosis of the liver due to hepatitis C and in 2003 he developed a cancer within his cirrhotic liver for which he underwent a successful liver transplant. Unfortunately, the cancer recurred in 2011 and this proved fatal.

His widow (witness W2674) was critical of some aspects of his care during his final illness. She documented these concerns in a letter dated 1st February 2012 and I addressed these in a detailed reply dated 23rd February 2012. I append both her letter and my reply as these are

the same criticisms which she raised in her witness statement. I believe my reply fully addressed these criticisms, and do not think I can meaningfully add anything further 10 years on. Specifically, points 5.2, 5.3 and 5.4, referring to paragraphs 38 and 39 of the witness statement, are answered in full in my 2012 letter.

Point 5.5 refers to paragraph 41 of the witness statement in which she states that she “received a response in which the hospital admitted they had not looked after her husband properly”. With respect, I would suggest that is not the conclusion that I would draw from my 2012 letter (which must be the response to which she refers). Although the care provided to her husband by the transplant team could have been better, it did not involve significant errors or mismanagement.

In paragraph 36 of her statement the witness notes some of the benefits that the liver transplant gave her husband, such as the opportunity to spend time with his grandson. She expressed similar sentiments in greater detail in her letter to me in 2012, thanking the transplant team for her husband's 8 extra years of life.

Signed GRO-C

Alastair MacGilchrist MD, FRCP

Consultant Physician, Scottish Liver Transplant Unit 1992-2017

Dated 31st March 2022