

Witness Name: Dr John Jones

Statement No.: WITN7725001

Exhibits: WITN7725002

Dated: 23 August 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DR JOHN JONES

I provide this statement on behalf of Shrewsbury and Telford Hospital NHS Trust in response to the request under Rule 9 of the Inquiry Rules 2006 dated 17 July 2023.

I, Dr John Jones, will say as follows: -

Section 1: Introduction

1. My name is Dr John Jones, Date of Birth **GRO-C** 1968. I am the Executive Medical Director at Shrewsbury and Telford NHS Trust, Royal Shrewsbury Hospital, Mytton Oak Road, Shrewsbury SY3 8XQ I was appointed as a consultant physician and gastroenterologist in September 2003 and have worked in a number of leadership and educational roles since. I was appointed in the substantive role of Executive Medical Director in February 2023, having been in the acting role since end of April 2021. My role is now predominantly managerial as Executive Medical Director and this statement is made as the Executive Medical Director.

Section 2: Response to Criticism by Witness W7593

2. ***We were then advised they would carry out scans to find the cause of her bleeding, but a scan did not happen.*** When there is significant gastro-intestinal bleeding, a CT angiogram may be used to verify the location of the bleed. However, this is only done if further intervention is likely to be required to stop the bleeding. In this case, the bleeding was slowing down so the CT scan was not required. I am sorry for the confusion that this caused the family.

3. ***Mum was instead given a TXA (Tranexamic acid) a clotting drug by the ward doctor. We later learnt that due to the Hepatitis C, she should never have been given this medication, as it increases blood clotting, causes issues to organs and accelerates liver problems and scarring. However, mum was released from hospital.*** Hepatitis C is not a contraindication for tranexamic acid. At the time of administration, Witness W7593's late mother had had a significant post-procedural bleed, and tranexamic acid reduces bleeding due to surgery and after trauma. The risk of developing blood clots with tranexamic acid is around 1%, whereas the risk from on-going bleeding (or surgery to treat on-going bleeding) would be much higher for causing death from heart attacks, blood clots or bowel related complications.
4. ***Dr Ali of Shrewsbury hospital informed us that the CT scan results showed liver and kidney failure. I asked him what was causing this and if it could be because of the Hepatitis C. He replied "she has Hep C?" and he was shocked. Dr Ali did not know about her status. "This changes everything" he said and immediately got another professional, involved and he came to speak to us, Dr Butterworth, from the Gastro team, who mum had seen previously in regards to her polyps procedure.*** Witness W7593's late mother's Hepatitis C status was recorded in her notes, so staff were aware of it. I am sorry that the family were under the impression that this was not the case.

Section 3: Other Issues

5. The Trust received a complaint from witness W7593, a copy of the response is attached (WITN7725002)

Statement of Truth

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

Signed _____

GRO-C

Dated 23rd August 2023

Table of exhibits:

Date	Notes/ Description	Exhibit number
10/07/2023	Complaint response	WITN7725002

