

Witness Name: Dr Anna Pettigrew

Statement No.: WITN3527004

Exhibits: None

Dated: 7th May 2024

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DR ANNA PETTIGREW

I provide this statement in response to the request under Rule 9 of the Inquiry Rules 2006 dated 19 April 2024.

I, Dr Anna Pettigrew, will say as follows: -

Section 1: Introduction

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

Dr Anna Frances Pettigrew (Retired)

c/o Central Legal Office, Anderson House, Breadalbane Street, EH6 5JR

DOB 03/12/1949

Qualifications MBChB (Glasgow 1975) BscHons Biochemistry (Glasgow 1971)

I have never held the position of Consultant in Haematology nor in any other speciality.

After completing my Pre Registration House Officer Posts in Medicine and Surgery, I took an additional Pre Registration House Officer Post in Medical Paediatrics at the Royal Hospital for Sick Children in Glasgow (RHSC) until February 1977. Thereafter, I was appointed to the post of Haemophilia Senior House Officer in the Professorial Department of Medicine at the Royal Infirmary, Glasgow. I was an SHO in Medicine, but also had duties in the Haemophilia Unit under the then Director Dr Colin Prentice

and subsequently Professor Charles Forbes.

I took Maternity Leave in February 1979, but was unable to return to my post as Haemophilia SHO as the then Professor of Medicine did not accept women returning from Maternity Leave in his department.

In May 1980, I was appointed by Dr Michael Willoughby, Consultant Haematologist, to the post of part time (6 sessions) Clinical Assistant in the Haematology/Oncology Department of the RHSC. I was based mainly in the Day Unit (which served all departments in the hospital) where haematology and oncology patients attended for procedures such as chemotherapy, venipuncture, blood transfusion and clinical assessment.

I held this post until January 1989 when I commenced training for General Practice and became a Principal (and later Senior Partner) in Springburn Health Centre, Glasgow in February 1991.

I refer to my CV as presented in my Written Statement to the Penrose Inquiry [PRSE0002690].

I retired from General Practice in November 2013 and from my post as VS tutor in the School of Medicine at the University of Glasgow in June 2015.

Section 2: Responses to criticism by Witness W6478

2. The criticisms I have been asked to address are contained within paragraph 16 – 21 of WITN6478001.

The witness statement describes what must have been for him a very distressing and traumatic event and I am truly sorry for the distress that he has suffered.

Some 39 years later I cannot recall this event nor do I have access to the medical records and therefore I can't confirm what took place. I understand that the Yorkhill Hospital medical records of this patient were destroyed in 2014 in accordance with the Board's destruction policy. What I can say is that it would have been unusual in the Paediatric department of Haematology and Oncology for such a serious and life changing diagnosis to be given to a child-even at 14 or 15 years of age-without the support of their parents and a discussion

with the parents beforehand. In the case of an adolescent their permission for a discussion in the presence of their parents would be sought. I cannot recall, and do not know, what the circumstances were that led to the diagnosis being given in such a regrettable manner.

The advice not to tell anyone reflected, at that time, the attitude of the public to those infected with the “AIDS virus” and the risk of ostracisation and stigmatisation particularly for those living in small communities.

This advice may have been misunderstood because it was not the practice that advice not to tell anyone would have included not informing his parents. In such circumstances, it would be suggested that the parents be informed either by the patient or by one of the clinical team.

For completeness, I can recall that there were regular clinics to monitor the health of those infected and to keep them up to date with the knowledge of HIV infection as that knowledge progressed and appointments would have been offered to all.

Section 3: Other Issues

3. If you hold evidence you consider may be relevant to the Inquiry’s investigation of the matters set out in its Terms of Reference, please insert here.

None.

Statement of Truth

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

Signed  **GRO-C**

Dated 7th May 2024