

Witness Name: Chris Deighan

Statement No.: WITN7116032

Exhibits: NIL

Dated: 19th April 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF CHRIS DEIGHAN

I provide this statement on behalf of NHS Greater Glasgow and Clyde in response to the request under Rule 9 of the Inquiry Rules 2006 dated 3rd November 2022.

I, Chris Deighan, will say as follows: -

Section 1: Introduction

1. Introductory paragraph to include your date of birth, address, occupation and employment history.

Name: Dr Christopher J Deighan

Date of birth: **GRO-**1966

Address: Gartnavel Royal Hospital, 1055 Great Western Road, Glasgow, G12 0XH

Qualifications:

- MB.ChB.: University of Glasgow, 1989
- MRCP : Royal College of Physicians, U.K. 1992
- M.D. : University of Glasgow, 2000
- FRCP : Royal College of Physicians, Glasgow, 2004

Employment:

- Executive Medical Director: NHS Lanarkshire January 2023 to date
- Consultant Nephrologist: NHS Greater Glasgow and Clyde April 2000 to 15th January 2023
- Deputy Medical Director: Corporate, NHS Greater Glasgow and Clyde May 2019 to January 2023

- Chief of Medicine, North Sector, NHS Greater Glasgow and Clyde – June 2015 to May 2019
- Clinical Director, Renal Services and Centre for Integrative Care, Regional Services Directorate, NHS Greater Glasgow and Clyde – October 2009 to June 2015

Section 2: Response to Criticisms by W3616

2. Please insert your response to the criticisms made by witness W3616, as listed in the Rule 13 Notification sent to you on 11 October 2022.

Before responding to the individual issues raised by witness W3616 regarding her treatment at the Victoria Royal Infirmary from around 1985 to 1988, NHS Greater Glasgow and Clyde (NHSGGC) notes the lack of medical records available to allow a full response. Over the period of W3616's treatment, the Board managed its medical records in line with (SMH 58/60) *Scottish Hospital Service Destruction of Hospital Records* guidance of 1958, as previously confirmed in Statement No.: WITN6911007. Medical records were only required to be kept for a minimum period of six years after the conclusion of the patient's treatment at hospital, subject to any preservation value set out in Paragraph 7 in the Notes preface of the guidance. This means that many of W3616's medical records would have been destroyed from any point from 1994 onwards.

As a result, we have been unable to identify the majority of W3616's medical history, including records of her treatment at the Victoria Infirmary. We have, however, been able to identify W3616's maternity notes from the Royal Alexandra Hospital which covers her second pregnancy and these include a comprehensive discharge letter from her first pregnancy in 1985. We have also reviewed W3616's case notes obtained from NHS Ayrshire and Arran with her permission. We once again thank her for her assistance.

Given the explanation above, I will endeavour to respond from the limited information available.

Paragraph 11

I have never been told that I had contracted hepatitis C, however, I attended the Haematology Unit for two years, where they gave me a number of different

medications, both in tablet form and injections. I was trying to cope with looking after my baby and I found that the tablets they were giving me, were making me ill. I do not know the names of the medications. I believe they may have been experimenting on me and trying a number of different treatments for hepatitis C.

I can confirm that NHSGGC does not hold any records covering this period apart from a discharge letter dated **GRO-C** 1985 following W3616's first delivery at Rutherglen Maternity Hospital. In the discharge letter, Dr Mack, Consultant Obstetrician, states that he referred W3616 to Haematology at the Victoria Infirmary for continuing review of her anti-D as she had needed significant treatment with this after the delivery. NHSGGC holds no record of testing for Hepatitis C for W3616. We also note that W3616 was tested twice for Hep C in NHS Ayrshire and Arran and both tests were negative.

Paragraph 15

At no point in the two and a half years, when I was a patient of the Haematology Department at the Royal Victoria, was I told that I had hepatitis C. I do believe that I was treated for this and cured.

As per my response above, NHSGGC holds no record of positive testing for Hepatitis C. Hep C would not have been treated in Haematology and the only treatment at that time was interferon which is self-administered by injection at least twice weekly. It is my view that it is highly unlikely that W3616 would have received this treatment as the side-effects are considerable and require treatment with premedications. No other Hep C therapy was available at this time.

Paragraph 16

I went on to have two miscarriages due to Anti-D, so I do not believe that they could have been treating me for my anti-D levels if these were still high enough to cause two miscarriages.

On behalf of NHSGGC, I am very sorry to learn of these two miscarriages suffered by W3616.

Paragraph 19

If I did have hepatitis C as I believe I did, then any treatment to clear the virus

would have been done without my consent. I have never been told that I have had hepatitis C, but do not believe that there is any other explanation, for the cirrhotic condition my liver is now in.

As already noted, NHSGGC holds no record of W3616 being tested for Hep C within its own services and notes the negative tests carried out within NHS Ayrshire and Arran.

Paragraph 20

I believe that I may have been treated for the purposes of research. I believe that they were worried that I, as a young mother then, would have gone to the press about what had happened to me, if I had known that I was infected.

Once again, it is not possible for NHSGGC to respond fully due to the absence of information still held in relation to W3616's treatment between 1985 and 1988. Under Paragraph 7 of the Notes preface of the *Scottish Hospital Service Destruction of Hospital Records* guidance of 1958, patient records may be preserved beyond the recommended minimum retention period if they are considered as having historical, medical or legal interest or are useful for social research. The absence of W3616's medical records would therefore suggest that her treatment was not part of a research programme.

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

19/04/2023