

The Infected Blood Public Inquiry NEWSLETTER



THE
HAEMOPHILIA
SOCIETY

A summary of remote inquiry hearings

This week the inquiry heard from clinicians from Swansea, Leicester and Oxford. Dr Saad Al-Ismaïl, who joined Swansea Haemophilia Centre in 1982 and became director in 1985, spoke about his collaboration with Prof Arthur Bloom, who worked in Cardiff. Inexperienced in haemophilia care, Dr Al-Ismaïl said he asked for Prof Bloom's advice and felt it would have been the "wrong path" to ignore what he said. He paid an emotional tribute to his former mentor, saying Bloom was "haunted" by what happened to his patients. Dr Vivian Mitchell became director of Leicester Haemophilia Centre in 1979. Influenced by early training in Sheffield, he used DDAVP and tranexamic acid where possible and concentrate only where necessary. He protested when, in 1985, it was suggested cryo should no longer be used. Dr Paul Giangrande, who was director of Oxford Haemophilia Centre from 1993—2015, believed patients should have been asked for their consent before their details went on the national data base. He accepted criticism after the inquiry heard that Oxford charged patients £75 to fill out Skipton Fund application forms. He paid tribute to the "moving" and "humbling" personal testimonies.

Inquiry news

The inquiry takes a break from hearings next week and will re-start on 1 December with nine days of evidence from clinicians from Scottish centres. Professor Christopher Ludlam from Edinburgh Haemophilia Centre will be the first to be questioned. Also appearing are Dr Anna Pettigrew and Prof Ian Hann from Glasgow's Royal Hospital for Sick Children and Prof Gordon Lowe of Glasgow Royal Infirmary.

There was disappointment from people treated in Belfast when the inquiry confirmed that there will not be any live evidence from clinicians in Northern Ireland. There will be a presentation of evidence by inquiry counsel, Jenni Richards QC, on 12 and 13 January. However, the inquiry team has emailed core participants in Northern Ireland asking for suggestions of "clinical witnesses", so it is possible this may change.

Quotes of the week

"The most devastating experience for a doctor is to witness harm inflicted on his or her patients that resulted from treatment the patient had received...that feeling of devastation is shared by many of my current and previous colleagues."

Dr Saad Al-Ismaïl

"You had to be fairly obsessive about not giving concentrate unless you felt it was necessary." Dr Vivian Mitchell on enforcing his treatment policy

"There seemed to be, to a certain degree, hurry and scurry after the realisation about HIV, and a much more laid back view about liver disease.... This had been going on for years. I don't think that governments, fractionators and blood transfusion services really took the matter seriously enough."

Dr Vivian Mitchell

"I must be honest and say I had assumed consent was sought. I have my doubts about that now."

Dr Paul Giangrande on whether patients gave their consent to be tested for hepatitis C at Oxford Haemophilia Centre in 1991