

# The Infected Blood Public Inquiry NEWSLETTER



THE  
HAEMOPHILIA  
SOCIETY

## *A summary of remote inquiry hearings*

This week began with the story of Kevin Slater, the first person with haemophilia in the UK to be diagnosed with AIDS. Kevin's brother Paul was also infected and died, aged 30, in 1991.

Kevin, who had severe haemophilia and was treated at Cardiff, was first thought to have AIDS in March 1983, aged 20, when he reported having low energy, oral thrush and dramatic weight loss. In his notes was

written "? AIDS". Five weeks later, his consultant, Prof Arthur Bloom told The Haemophilia Society's AGM that one of his patients might have a "mild form" of AIDS, but this was not something to get "over-concerned" about. On 26 April 1983, Prof Bloom submitted an official notification that Kevin had "probable" AIDS. Yet in public he continued to cast doubt on the diagnosis. A few weeks later, he wrote in The

Society's newsletter that he was "unaware of any proven case" among the UK's haemophilic population.

It was not clear if Kevin was ever told of his AIDS diagnosis, with documents showing that efforts were made to withhold this information from him.

Kevin's condition deteriorated steadily and by the end he was as "weak as a kitten". He died, aged 22, in June 1985.

## *Inquiry news: Newcastle Haemophilia Centre*

Newcastle Haemophilia Centre and its former director Dr Peter Jones were the subjects of a presentation by Inquiry Counsel, Jenni Richards QC. Evidence given by Dr Jones to the Lindsay Tribunal 20 years ago was used, as well as written statements he gave to this inquiry. The presentation looked at Dr Jones' advice from 1975, when a link between hepatitis and commercial factor VIII was established, that restricted use of concentrate to severe adult haemophiliacs. A letter from a colleague was shown, in which he said Dr Jones was "reluctant" to draw conclusions from the emerging AIDS crisis. As it deepened, Newcastle had higher than average HIV infection rates. In 1987 figures showed 80 severe, 7 mild and 3 partners were HIV positive. The presentation continues at 2.15pm on 9 Feb.

## Quotes of the week

"Young children and mildly affected haemophiliacs should always receive cryoprecipitate in preference to concentrate, unless there is an overriding clinical reason for using concentrate."

Dr Jones in 1975

"The programme screened presented a dramatised account of the danger of hepatitis which...was both biased and frightening." Dr Jones on the 1975 World in Action documentary.

"The team was particularly taken up with AIDS problems when I was there, being quite shattered by the deaths they had had, each patient being like a friend." Comment from a visiting Australian colleague in 1986

"Cryoprecipitate opened our eyes and then concentrate came...We knew from the beginning that we were transmitting disease." Dr Jones looking back in 1998

"The extent of the disease here is now so great that we can no longer cope, in the sense that we have no time to do the fundamental work necessary to try to find out why we have proved so vulnerable." Dr Jones, 1986