

The Penrose Inquiry is a Scottish Public Inquiry into Hepatitis C/HIV infection acquired from NHS treatment in Scotland with blood and blood products. The Inquiry was set up by Nicola Sturgeon, the Cabinet Secretary for Health and Wellbeing. The Rt Hon Lord Penrose is the Chairman of the Inquiry.

## ➤ MESSAGE FROM LORD PENROSE



I am pleased to advise that the public hearings phase of the Inquiry is now concluded. I would like to take this opportunity to thank all of those who have co-operated with the Inquiry. I am particularly grateful to the patients and relatives who gave written statements, and those who gave evidence during the public hearings. I am now writing my final report with the support of the Inquiry Team. A publication date will be announced in due course.

A handwritten signature in blue ink, appearing to read 'C. Penrose'.

The Right Honourable Lord Penrose

## ➤ PROGRESS REPORT

Since Lord Penrose took up his appointment in 2009, the Inquiry Team has reviewed over 118,000 documents and more than 150 statements have been taken from patients and relatives. Statement taking is now complete.

Lord Penrose published his Preliminary Report in 2010. To see the Preliminary Report please go to [www.penroseinquiry.org.uk](http://www.penroseinquiry.org.uk) This 600 page report set out the factual background to the matters covered by the terms of reference and identified controversial issues which required further investigation during the public hearings. The list of topics can be seen below.

The public hearings commenced on 8 March 2011, and took place in the Clydesdale Bank Plaza in Lothian Road, Edinburgh. During the hearings, 67 witnesses gave evidence over 89 days. This included patients and relatives.

The transcripts for all of the hearings are available on the Inquiry website [www.penroseinquiry.org.uk](http://www.penroseinquiry.org.uk)

Closing submissions from the legal representatives of the core participants were heard on 30 March 2012. All the closing submissions can be found at [www.penroseinquiry.org.uk](http://www.penroseinquiry.org.uk)

The core participants include: Patients, Relatives and the Haemophilia Society; the Common Services Agency for the Scottish Health Service (on behalf of the Scottish National Blood Transfusion Service) and the Health Boards; and Scottish Ministers.

If you do not have access to a computer, and would like more information on any of the topics mentioned in this bulletin, please contact the Inquiry Secretary as follows:

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## ➤ **COST OF THE INQUIRY**

Up until 31 March 2012 the expenditure incurred as a result of the work undertaken by the Penrose Inquiry team is £8.8 million.

Further information on the cost of the Inquiry will be published when the Inquiry is concluded.

## ➤ **PUBLIC HEARINGS**

The following topics were investigated during the hearings that took place between 8 March 2011 and 30 March 2012. The names of the witnesses who gave evidence are listed below each topic.

Please note that where first names only appear, these are the pseudonyms used to protect to privacy of patients and relatives who gave evidence anonymously in closed sessions.

### **PART A – INVESTIGATION OF THE DEATHS OF SPECIFIED INDIVIDUALS**

The deaths of Reverend David Black, Mrs Eileen O'Hara, Alexander Black Laing and Victor Tamburrini, with particular reference to the circumstances in which they became infected with the Hepatitis C virus, HIV or both.

Reverend Black	<i>Dr Brian Colvin, Dr David Mutimer</i>
Mr Laing	<i>Dr Graeme Alexander, Dr Brian Dow</i>
Mrs O'Hara	<i>Dr Frank G Dunn, Mrs Roseleen Kennedy, Dr Kevin Robertson, Dr David Mutimer</i>
Mr Tamburrini	<i>Professor W G van Aken, Dr Andrew Bathgate, Dr Myrtle Peterkin, Mrs Jean Tamburrini, Dr David Mutimer, Dr Bruce Cuthbertson</i>

### **PART B – HIV/AIDS**

**B1)** The efforts made to discourage 'higher risk' donors from giving blood (by the dissemination of information, including leaflets); whether these efforts went far enough and began early enough.

*Dr Brian McClelland*

**B2)** The use of blood product concentrates **in Scotland**, including any perceived disadvantages of such products, from their introduction in or around 1974; the continuation of the use of commercial concentrates in particular after:

- international realisation that these carried a risk of AIDS;
- the proposal by Dr Galbraith of the Public Health Laboratory Service in May 1983 that use in the UK should be stopped;
- significant progress towards self-sufficiency in the manufacture of blood products by the NHS **in Scotland** had been made.

*Dr Frank Boulton, Professor John Cash, Professor Charles Forbes, Dr Peter Foster, Professor Ian Hann, Professor Andrew Lever, Professor Christopher Ludlam, Dr Brian McClelland, Dr Robert J Perry, Dr Anna Pettigrew, Mr David Watters, Dr Mark Winter*

**B3)** The implementation of heat treatment against LAV/HTLV-III by the Protein Fractionation Centre in Scotland in December 1984, and the technological background to such implementation, including the history and exploration of methods of heat inactivation by the Scottish National Blood Transfusion Service.

*Professor W G van Aken, Professor John Cash, Dr Bruce Cuthbertson, Dr Peter Foster, Professor Christopher Ludlam, Dr Robert J Perry, Dr James K Smith*

**B4)** The decision not to use kits from the United States of America for testing donated blood for the virus as soon as they became available but, instead, to follow a process of evaluation of the kits before any such use.

*Professor John Cash, Dr Brian McClelland, Dr Ruthven Mitchell, Dr Graham A Scott, Professor Richard Tedder, Professor Robin Weiss*

**B5a)** The information given to patients (or their parents) about the risk of AIDS before their treatment with blood or blood products;

**B5b)** the tracing and testing of patients who might have been exposed to the virus through their treatment with blood or blood products;

**B5c)** the information given to patients who might have been infected, or who were found to be infected, and their families;

**B5d)** in particular, the circumstances in which those patients known collectively as the Edinburgh Cohort became infected with HIV, the testing of such patients for HIV and the information given to them about their infection.

*Amy, Ms Geraldine Brown, Christine, David, Elaine, Frances, Professor Charles Forbes, Dr John Gillon, Professor Ian Hann, Ms Christina Leitch, Professor Gordon Lowe, Professor Christopher Ludlam, Mark, Dr Brian McClelland, Dr Vivienne Nathanson, Dr Robert J Perry, Dr Anna Pettigrew, Dr Alison Richardson, Mr David Watters, Dr Patricia Wilkie, Dr Mark Winter*

**B6)** The effects of infection with HIV, including the effects of treatment on patients and their families.

*Amy, Ms Geraldine Brown, Christine, David, Elaine, Frances, Professor Clifford Leen, Ms Christina Leitch, Mark, Dr Alison Richardson, Dr Patricia Wilkie*

## **PART C – HEPATITIS C**

**C1)** The acceptance of blood from 'higher risk' donors, in particular:

**C1a)** prisoners; and

**C1b)** donors who had a history of jaundice, and who were negative for Hepatitis B when the existence of Non-A Non-B Hepatitis was known and its presence could not be excluded.

*Professor John Cash, Dr Brian Dow, Dr John Gillon, Professor Juhani Leikola, Dr Brian McClelland, Dr Ruthven Mitchell, Dr Robert J Perry, Dr Graham A Scott*

**C2)** The non-introduction in Scotland of surrogate testing for Non-A Non-B Hepatitis.

*Professor John Cash, Dr Brian Dow, Dr John Forrester, Dr John Gillon, Professor Juhani Leikola, Dr Iain MacDonald, Mr Duncan Macniven, Dr Brian McClelland, Dr Ruthven Mitchell*

**C3)** The implementation of heat treatment sufficient to inactivate Hepatitis C in blood products by the Protein Fractionation Centre in Scotland in 1987, and the technological background to such implementation, including the achievement of this objective by the National Blood Transfusion Service in England and Wales in 1985.

**C3a)** The use of blood product concentrates in Scotland in the period between the introduction of NHS heat treated products in 1984 and the supply of NHS products sufficiently treated to inactivate Hepatitis C.

*Professor WG van Aken, Professor John Cash, Dr Bruce Cuthbertson, Dr Peter Foster, Professor Christopher Ludlam, Mr Duncan Macniven, Dr Ronald V McIntosh, Mr Alexander Murray, Dr Robert J Perry, Dr James K Smith, Dr Brian Colvin, Professor Gordon Lowe, Professor Christopher Ludlam, Dr Robert J Perry*

**C4)** The interval between the availability of tests for the Hepatitis C virus in 1989 and the introduction of screening of donated blood for the virus in the United Kingdom in September 1991.

*Professor John Cash, Dr Brian Dow, Professor Juhani Leikola, Dr Brian McClelland, Mr David McIntosh, Dr Ruthven Mitchell, Dr Robert J Perry, Mr George Tucker*

**C5a)** The information given to patients (or their parents) about the risk of Non-A Non-B Hepatitis and the severity of the condition before their treatment with blood or blood products;

**C5b)** the tracing and testing of patients who might have been exposed to the virus through their treatment with blood or blood products; and

**C5c)** the information given to patients who might have been infected, or who were found to be infected, and their families.

*Dr Graeme Alexander, Dr Philip Cachia, Professor John Cash, Dr John Gillon, Dr Charles Hay, Dr Aileen Keel, Professor Gordon Lowe, Mr David McIntosh, Dr Vivienne Nathanson, Mr David Watters*

**C6)** The effects of infection with Hepatitis C, including the effects of treatment, on patients and their families.

*Alex, Anne, Bridie, Colin, Gordon, Professor Peter Hayes, Laura, Stephen*

## ➤ GENERAL TOPICS

Collection of Blood

*Professor Mark Turner*

Introduction to Hepatitis

*Professor Howard Thomas*

Statistics

*Dr John Gillon, Professor David Goldberg, Dr Charles Hay, Professor Christopher Ludlam, Dr Campbell Tait*

Use of Blood

*Dr Derek Norfolk*

## ➤ CONTACT US:

If you have any questions about the Inquiry, please contact:

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