

IRISH HAEMOPHILIA SOCIETY

TRIBUNAL NEWS

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TRIBUNAL OF INQUIRY

(into the infection with HIV and Hepatitis C of
Persons with Haemophilia and related matters)

Proceedings: May 2nd, 2000

The proceeding opened before Her Honour Judge Lindsay on the above date at the Distillery Building, 141/145 Church Street, Dublin 7.

Opening Remarks:

In her opening remarks the Judge stressed the urgent nature of the inquiry and that it would be conducted in an inquisitorial fashion as opposed to an adversarial contest. She said her findings would be based on the facts as they emerged before the Tribunal.

Terms of Reference:

In accordance with the role of a Tribunal as set out in Haughey -v- Moriarty, the Judge gave an interpretation of the Terms of Reference. No objection was raised by any party on the Tribunal's initial interpretation of the Terms of Reference. The Tribunal pointed out that in light of the facts that might emerge in the course of the hearings the interpretation of the terms of reference may change. The Tribunal also set out a procedure whereby any query regarding any Term of Reference may be dealt with. Should a query arise the party making enquiry may write to the Solicitor for the Tribunal setting out the query which shall be dealt with in public in due course.

Despite media speculation that the Tribunal would rule on whether or not US-based pharmaceutical companies would be investigated the sole member did not make any such ruling. She may return to this issue at a future date.

Anonymity:

The identity of witnesses with HIV, Hepatitis C and the relatives of such witnesses who will give evidence is not to be disclosed in public unless the witnesses in question agree in advance to such disclosure. The Tribunal made an order prohibiting the press from publishing the names or personal details or photographs of witnesses.

Arrangements for preserving the anonymity of witnesses giving evidence were also put in place. Those witnesses who wish to preserve their anonymity will not be identified by their own name and those who wish to give evidence without being identified in public will be permitted to give their evidence behind a screen

The Tribunal heard that to date all the witnesses who would be giving evidence of having be infected by HIV and/or Hepatitis C had been put forward by the Irish Haemophilia Society. The Tribunal invited any other person who may come within the Terms of Reference to contact the Tribunal through their own solicitor.

**Mr John Finlay, SC,
for the Tribunal**

Mr Finlay set out how the Tribunal will deal with the issues arising from the Terms of Reference.

The issues will be set out in sub-categories within the Terms of Reference.

- (A) Terms of Reference 1,2,4 and 3,5,6,7 with respect to B T S B its servants and agents.
- (B) Terms of Reference 9,10,11,12
- (C) Terms of Reference 3,5,6,7 with respect to parties other than the B T S B.
- (D) Terms of Reference 8,13,14.

A separate opening address will be made by counsel for the Tribunal at the start of each of the above sub-categories.

Representation:

Mr Finlay told the hearing that 17 individuals and bodies were represented at the Tribunal. Of these, three had full representation - Irish Haemophilia Society, B T S B, Department of Health - the remaining 14 had partial representation.

Documents:

Mr Finlay made reference to the extensive discovery of documents undertaken by the Tribunal. He illustrated how the documentation was indexed within the discovery and made reference to the extent to which parties to the Tribunal could access the documents. He also dealt with how the Tribunal had taken witness statements and noted that while the Tribunal could compel attendance of witnesses the statements made by witnesses were voluntary.

Irish Haemophilia Society - Costs

Counsel for the Tribunal noted the controversy surrounding the issue of the Society's costs. He then read the letter from the Minister for Health and Children setting out the agreement under which the State had agreed to meet the Society's legal expenses.

In noting the scale of the tragedy which has befallen the Irish haemophilia community Mr Finlay acknowledged the courage of those who had agreed to come forward to give evidence he also stated that no judgment should be made until all the facts had been put

before the Tribunal and all that parties to the Tribunal had been given an opportunity to put their case.

He also stated that it was hoped that the Tribunal would have the effect of dispelling public ignorance surrounding HIV, Hepatitis C and Haemophilia.

Adjournment:

Upon the application of Mr Martin Hayden BL, counsel for the Irish Haemophilia Society, it was agreed to adjourn the hearings until June 20th, 2000. This adjournment will commence when the Tribunal has heard the witnesses put forward by the Society. It is expected that these witnesses will conclude their evidence on May 11th, 2000.

Witnesses:

Karen Stevens

Ms Karen Stevens told the Tribunal about her father Jerome who contracted HIV from infected Factor VIII and subsequently died of AIDS in the month of February 1993.

Ms Stevens' testimony related the story of a childhood overshadowed by her father's illness. Initially she was told her father had cancer, after a short period she found out her father had Aids. She told the Tribunal about being singled out by other children as someone to be avoided. She said when other children touched her they would run off to wash their hands as they believed she was dirty on account of her father's condition. She talked of her two friends whose parents were tolerant of the fact that her father had Aids and allowed their children to play with Karen.

Ms Stevens described her home life at this time. She would assist her mother in looking after her bedridden father and in caring for her two young brothers. Her father eventually was consigned to a wheelchair. Ms Stevens was unaware of any help for their situation coming from the State. Any help that was forthcoming seemed to come from her father's friends.

In the last few years of his life her father was frequently in hospital. Before he went to hospital he would tell Karen that he may not return. When he eventually died in 1993 Karen was 13 years old. She was not surprised when he died.

When asked by Counsel what she hoped to obtain from the Tribunal she replied that she wanted her father back but she realised that this was not possible. In these circumstances she wanted answers to what had happened so that she could put the ghosts of the past to rest.

Ray Kelly

Mr Kelly told the Tribunal the story of his son John who died as a result of HIV and Hepatitis C infection in 1994, aged 13 years.

Mr Kelly described how John was originally treated, as an infant, with Cryoprecipitate. On being treated with Factor VIII he was told John would certainly become ill if he was not treated with Factor VIII and had only a remote chance of contracting HIV from the treatment. When he was informed that the child had in fact tested positive for HIV he was told that the chances of developing Aids from the condition were 100-1. When John became HIV positive Mr Kelly was told to continue using Factor VIII as the damage had already been done. The child subsequently became Hepatitis C positive. Mr Kelly administered the Factor VIII to John without any real knowledge of the dangers posed by the concentrates.

The Tribunal heard how Mr Kelly tried to obtain information on AZT treatment for his son. He could not find anyone who knew anything about treating children with AZT – this appeared to arise because up to then only adults had been considered for treatment with AZT.

Mr Kelly described how Professor Temperley of the NHTC had discussed his son's condition in a public area of Harcourt Street Children's Hospital when members of the public were present. When Mr Kelly tried to complain about this Professor Temperley assigned a registrar to deal with the complaint.

John's quality of life, while still reasonably good, was deteriorating during his later childhood. He suffered numerous bouts of shingles. Harcourt Street was the only place where he could be treated.

Professor Temperley treated John for TB. The child had to take 15 tablets per day. Mr Kelly described the medication as 'Horse Tablets' due to the size of the pills. Mr Kelly told the Tribunal that a nurse in Harcourt Street had advised him that Professor Temperley had to be stopped as he was using John as a Guinea Pig. Mr Kelly had a short, acrimonious meeting with Professor Temperley about John's treatment. After this meeting Mr Kelly sought the opinion of another doctor as to appropriate treatment for his son. Mr Kelly told the Tribunal about the difficulties he has experienced in trying to find a suitable secondary school for John. The issue of confidentiality regarding John's HIV gave rise to difficulties. The schools wanted to be able to tell all their teachers of John's condition. In order to get John into a school Mr Kelly had to agree to this arrangement.

In December 1993, John suffered a stroke which paralysed him on his left side. He was 12 years old. He suffered a further stroke in the Spring of 1994 and died in June of that year. He was 13 years old.

Mr Kelly said he thinks his son was infected with HIV by a blood product imported from the US. He wants to know who made the decision and if they knew the product was

infected. If they did know the product was infected and nevertheless put it into circulation, then they murdered my son, said Mr Kelly. I would like to know who is responsible, he added.

Cross Examination

Mr Kelly was cross-examined by Mr Brian McGovern, S.C. Counsel for Professor Temperley.

While agreeing with counsel that in the early stages of dealing with Professor Temperley he had faith in him and his treatment of his son, Mr Kelly said the Professor was always a difficult man to deal with.

Mr Kelly maintained that he disapproved of the treatment afforded to John, especially with regard to treatment for TB. He said Professor Temperley was arrogant and lacking in humanity. Counsel made the point that treatment was available to John 365 days a year at St James's Hospital. Mr Kelly told counsel that his son had not been treated at St James's Hospital except during a two year period. John's treatment took place mainly at Harcourt Street Children's Hospital.

Counsel for St James's Hospital told the Tribunal that the hospital had been using recombinant factor concentrated since 1997. Mr Kelly said he as delighted to hear this. He also said he was interested in finding out who was responsible for policy in the early 1980s and who was responsible for his son's death.

TRIBUNAL OF INQUIRY

(into the infection with HIV and Hepatitis C of
Persons with Haemophilia and related matters)

Proceedings: May 3rd, 2000
DAY 2

The proceedings continued before Her Honour Judge Lindsay on the above date at the Distillery Building, 141/145 Church Street, Dublin 7

Applications

The second day of witness testimony opened with a number of applications. Mr Brian McGovern SC successfully applied for limited representation on behalf of Dr Fred Jackson.

Ms Maureen Clarke made an application on behalf of the Attorney General that the AG be accorded full representation. The Tribunal indicated that there was no need to change the form of representation, if counsel wished to attend the Tribunal had no difficulty with that.

Mr Mel Cristle for the Adelaide and Meath Hospital made an application to cross-examine Mr Ray Kelly who had given evidence yesterday. He said his client was caught unawares by the testimony of Mr Kelly regarding a conversation Mr Kelly had had with a nurse at NCH. There was no reference to this conversation in Mr Kelly's statements. Raymond Bradley for Mr Kelly said Mr Kelly had not identified the nurse in his evidence and that there would be no difficulty in recalling Mr Kelly should the Tribunal wish to do so.

Witnesses

'Dominic'

Dominic was born in 1950 and suffers from severe Haemophilia A. He described what it was like to grow up in Ireland in the 1950s and 60s with Haemophilia; he told of the pain brought on by the condition and the difficulties of early treatment. He told the Tribunal of Professor's Temperley's pioneering work with Cryoprecipitate and how it made life less difficult for him.

But while Cryo treatment was effective it took a long time to apply. People suffering from Haemophilia had to wait while the Cryo was being made and had to wait until a doctor was available to administer it.

Dominic continued to be treated with Cryo into the 1970s and into the 1980s. In or about 1980 Factor VIII became available. It was an imported product, mostly coming from the US, where it was made from the blood of paid donors.

Mr Durkan, counsel for the Tribunal interjected at this point. He said that the testimony of the witness was straying from the statement supplied to the Tribunal. The Tribunal would be obliged if the witness stayed within the confines of his statement.

During the 1980s Dominic's treatment option changed from cryo to Factor VIII concentrates.

During the period of his treatment Dominic said he was reliant on Professor Temperley but no information was forthcoming about HIV. Dominic said his knowledge of HIV was gained from what he could read in newspapers. When he raised the issue of HIV infection with the Professor he was told that the risk from a bleed was much greater than that of catching HIV from blood products.

Dominic was diagnosed HIV positive in 1985. He was told to clean up any blood spillage using bleach, to separate his cutlery and toothbrush and to use condoms if having sexual intercourse. Condoms were not readily available in Ireland in 1985.

On being diagnosed HIV positive Dominic and his wife decided to move from Dublin and set up home in his native town in southern Ireland. They also set up a business. Dominic said the business was established in order to provide for his family when he was gone. At this stage Dominic thought he had five years to live.

Despite having been diagnosed with HIV Dominic received no assistance or counselling about his condition. Trying to start up a new business was very stressful but he was motivated by the knowledge that if he got sick he would be on social welfare and he could not let his kids see him on social welfare.

Dominic benefited from the HIV recompense campaign mounted by the Irish Haemophilia Society in 1991. In the same year he was diagnosed as Hepatitis C positive.

By 1996 Dominic's condition had deteriorated badly. He was unaware of the full effects of HIV and thought his poor condition was brought about as a result of Hepatitis C. Dominic was not informed by any medical adviser that he was in danger of dying. He was told by a lawyer that his HIV status was so bad that he should get treatment for it.

In 1996 Dominic attended St James's Hospital, Dublin and was there put on a course of triple therapy by Dr Mulcahy, an infectious diseases consultant. "I would have died in 1996 – triple therapy saved my life and it improved my life, without the therapy my T cell were dropping rapidly."

Dominic's future is uncertain. His prognosis for HIV is quite good but there is no treatment available for Hepatitis C – he does not expect to get a liver transplant.

Dominic said he thought the BTSB did not do its job. “The product, the Factor VIII was brought into the country by the BTSB. They bought it and brought it into the country. I don’t believe they checked or cared, or was it a financial consideration? I don’t believe they did their job. I think it’s disgraceful. It’s appalling that so many people have died because someone did not do the job they were paid to do. They didn’t do their job.”

Cross-Examination

Mr McGrath for the BTSB said he did not wish to cross-examine the witness but all that matters raised may be addressed at a later stage on behalf of the BTSB. His silence at this stage was not to be taken as acceptance of what Dominic had just said.

Anne

Anne has been married to Dominic, the previous witness for the past 29 years. She knew Dominic was Haemophiliac when they got married but only realized the seriousness of the condition when he had to have his appendix removed. Dominic was seriously ill but he survived by virtue of the care he received from Professor Temperley. He was the first person suffering from Haemophilia to survive the removal of his appendix.

Anne told the tribunal that Dominic was treated during this period with Cryoprecipitate. He continued this treatment through the 1970s and into the 1980. Because he was treated principally with Cryo he was not considered to be at risk from HIV infection.

In or around 1984 Dominic had a bleed to his ankle. It was a serious and painful bleed. He was treated at the Haemophilia Centre at St James’s Hospital. On this occasion he was not treated with Cryo. He was treated with Factor VIII. He received two 20ml syringes of Factor product. Dominic and Anne thought it was great to have such a convenient product , which could be administered quickly, at their disposal.

In 1985, Sister Margaret King of the NHTC suggested that Dominic take a HIV test. It was positive.

Upon testing positive for HIV Anne and Dominic were offered no support from the State other than to be told to practice safe sex. Any other information they got from HIV was obtained from the press.

Anne took a test for HIV. After some delay, during which she suffered great anxiety, she was told she was not HIV positive.

Dominic found out he was Hepatitis C positive in 1991. Dominic had been given a letter to give to a physiotherapist in the hospital he was attending. He opened the letter it said this patient [Dominic] is HIV positive, Hepatitis A positive, Hepatitis B positive, Hepatitis C positive. “So that’s how we found out my husband was Hepatitis C positive. We didn’t even know he’s been tested.”

Anne was asked what she thought the Tribunal would achieve.

“Over the last few days, I’ve just been thinking about all the people I know who are now dead. And I feel I have a responsibility to make sure that those people and my husband and my children and myself and everybody else find out who wasn’t minding them. It sounds like such a motherly thing to say, but somebody was supposed to be looking out for us, but nobody was. There was nobody there who care enough about us to ensure our safety.”

Barbara

Barbara, eldest daughter of Anne and Dominic gave evidence. She discovered her father was HIV positive when she was 16 years old. She thought that both her mother and father would die from HIV and she would be left to look after her brothers and sisters.

Barbara recounted how the atmosphere in the family was tinged with anger arising from her father’s condition.

As a consequence of the family’s anger her performance at school deteriorated. Her previously carefree family was now living in expectation of her father’s death. She also felt under pressure because of the need to keep her father’s condition a secret.

Barbara pointed out that family gatherings would be overshadowed by the prospect of death. HIV affected members of her extended family. She was also of the view that there was a difference between the treatment of Hepatitis C and HIV. Hepatitis C was seen as a threat to everyone whereas HIV affecting people with Haemophilia and was not seen as important.

Barbara said that given the experiences of her family she did not know whether she would choose to have any children of her own.

“I’m a carrier of haemophilia so the chances are my son would be haemophiliac so I don’t know if I’ll be having children. I really don’t know if I can go through this again. And I don’t think I could put my husband through it.”

Catherine

Catherine is the younger sister of the previous witness. She discovered her father was HIV positive when she found a letter in her parents' bedroom from the health board and read it. She thought her father would be dead within the week.

After her initial panic she tried to find out more about HIV. She could find very little information on the condition. She asked her mother was her father HIV positive and she said he was. Catherine's only knowledge of HIV was that it killed gay men in America and Freddy Mercury of Queen had died from it. She was a big fan of Queen.

Her father's illness interfered with her school work but because she could not tell her teachers of her father's condition she got into trouble with the school and fell behind in her work.

Catherine said that by giving evidence to the Tribunal she hoped to put this chapter of her life behind her. She hopes to do her exams and go to college.

The Tribunal commended her for her bravery in giving evidence.

TRIBUNAL OF INQUIRY

(into the infection with HIV and Hepatitis C of
Persons with Haemophilia and related matters)

Proceedings: May 4th, 2000
DAY 3

The proceeding continued before Her Honour Judge Lindsay on the above date at the Distillery Building, 141/145 Church Street, Dublin 7.

Applications

Gannon Liddy Solicitors applied for and were granted limited representation on behalf of St Vincent's Hospital.

Witnesses

Isabel

Isabel, wife of John (deceased) gave evidence to the Tribunal. Isabel told the Tribunal she met John and they were married in 1972, within a year of their meeting. She learned about his condition and how he was affected by haemophilia.

John was a founder member of the Irish Haemophilia Society. There was much relief in the haemophilia community when the NHTC opened. Soon after it opened John was advised to attend his GP before presenting at the hospital for treatment.

Sometime in the early 1980s John received a letter from Professor Temperley informing him that he had non-A non-B hepatitis. He discussed the letter in detail with Isabel. This was a departure from his usual practice of dealing with his condition in a low-key way.

John and Isabel did not fully realize, and were not told, the significance of the NANB diagnosis. During this time there was no question of any support services. Eventually John suffered liver failure.

This event occurred when he was at home. They did not realize that John was at risk of liver failure and when it happened they did not really realize what was happening. John was admitted to hospital. Shortly after he was told that his only chance of survival was to have a liver transplant. He was put on a strict diet and advised not to drink.

Even then John did not realize the immediate danger he was in. He wanted to put the transplant operation off for a few years. He wanted to delay in order to put adequate provision in place for his children and to get a few more years in which to work.

Upon being identified as a liver transplant candidate John was referred to St Vincent's Hospital. While accepting that there must have been some form of liaison between the hospitals John and Isabel were left feeling isolated in relation to being a haemophiliac facing a liver transplant. They felt they had been handed on to someone else.

John and Isabel were presented to the transplant team at St Vincents. They felt there should have been more active and obvious contact between the hospitals in respect of their case. They had spent years dealing with St James and were now in a new hospital facing a major procedure and they were dealing with people they were meeting for the first time. John was told he would get a bleeper and if a liver became available they would be called.

Isabel said that point she would like to make was that they needed professional help to face the change in their situation. They had been dealing with a long-term illness in NANB hepatitis and were now dealing with a life-threatening illness. Despite the long period of time in which they could have been prepared for what happened no help at all was forthcoming.

John was summoned late on a Sunday night to go to the hospital. A liver was available for transplant. The family gathered in the parents' bedroom and when asked by his son was he afraid of the prospect of the operation John said: "No, it has to be done." He went to the hospital but the liver was not suitable for him.

At this point John's condition deteriorated sharply. He had a scan and the results were conveyed firstly to Isabel. She instructed the hospital not to tell her husband the results of the scan until she was present. The following day when she arrived at the hospital around 1 p.m. John had been told that he was dying.

"I was so sure that I made it quite clear that I wanted to be there, that we should hear it together. I ascertained, as I thought, the time and I said I would be there and I was there and when I arrived he had been told that the transplant couldn't go ahead, that he had liver cancer and I just can't explain what that was like," said Isabel.

John died, in the presence of his family 36 hours after being told the news that he would not get a liver transplant.

Cross Examination

Mr McGovern, SC, for Professor Temperley, stated that patients were not advised to visit their GPs before attending at the Centre. They had two options: (i) home treatment, (ii) go to the center. Isabel disputed this assertion.

Counsel for Professor Temperley said back-up services were adequate and cited a liver biopsy and treatment for gall bladder problems as examples of adequate back-up supplied to John.

Mr McGovern also asserted there was a great deal of liaison between the hospitals.

Ms Gemma Cody of Gannon Liddy Solicitors for St Vincents Hospital said that the referral occurred in the month of June not May and that John had had the services of the transplant coordinator, Ms Shovlin. Isabel acknowledged that Ms Shovlin had been extremely helpful.

Ms Deirdre Murphy, SC, for St James's Hospital said that from 1985, the time that HIV became public knowledge, hospitals were looking for funding for counsellors at that stage to advise people about HIV. She said: "the record will show that from 1985, when the fact of HIV infection became known, strenuous efforts were made by medical teams and administrations to get funding for additional social workers to help and assist in the counselling of haemophiliacs". These efforts resulted in the funding of two additional social workers in or around 1988. The money was made available from lottery funding.

"That is just about the size of it, isn't it? Lottery funds," said Isabel.

Oliver

Oliver, mild haemophilia A. After suffering a sports injury in 1979 Oliver was identified as being haemophiliac and was given a shot of Factor VIII. After another sports injury in 1982 he got one or two shots of Factor VIII. Six week later he developed hepatitis and was out of work for six months.

In or around 1996 Oliver felt he was showing symptoms of Hepatitis C. There had been publicity about Hep C and he had become aware of the physical signs of the condition. He went to his GP who took a blood test. The test was sent off for analysis.

Some time after this his wife was in the GP's surgery and the doctor called her out to a corridor. The GP told Oliver's wife that the test was positive. He gave her a telephone number for Oliver to call. The number was that of the BTSB in Cork.

When he called to the BTSB in February 1997 he was told he was positive for Hep C antibodies and it was 90 per cent certain he was positive for the virus also. He was asked about body piercing and tattoos, no reference was made to any treatment with Factor VIII. He was told to isolate his cutlery, toothbrush and take precautions with blood spillage.

While attending the BTSB in Cork with his wife they were asked were any members of the family were blood donors. He told them his wife and daughter both gave blood. He was told their names would be removed from the list of blood donors. In April and again

in August both his wife and daughter were called to give blood. The BtSB later apologized for any distress caused by these invitations.

Oliver believes that only for taking the initiative himself he would never have discovered he had Hep C. There was no lookback programme alerting him to the dangers he faced. No explanation was ever offered as to why he, as someone who had received the product, was not included in a lookback.

Bernard Smullen

Mr Smullen gave his evidence under his own name in public. He is mild haemophilia A and had known of his condition since childhood. To the best of his knowledge he was treated with Factor VIII following a road traffic accident in 1980.

Following this treatment he was diagnosed Hepatitis A positive.

He was diagnosed Hepatitis C positive in 1992. Prior to being diagnosed Hep C antibody positive Mr Smullen suffered serious mood swings, he was difficult to live with and suffered from depression. He believes his undiagnosed Hep C was the underlying cause of these conditions. The full effects of Hep C have not been fully explained to him. He was told to take precautions concerning his personal utensils. He has been told his liver has been affected by Hep C and cannot drink alcohol. He has suffered alienation from his family but since being identified as having Hep C has been able to restore his family relations. His work performance has suffered and he was reprimanded and passed over for promotion. His employer now knows of his condition and he [Mr Smullen] understands why he has not been promoted at work.

His social and professional life has also suffered. He has lost contact with friends in sport and he does not meet any of his business contacts socially.

Mr Smullen's brother is also haemophiliac and has the full Hep C virus. As a consequence of the infection he has had to sell his business, he has had a nervous breakdown and continues to receive psychiatric treatment. Mr Smullen fears that the virus may have the same effect on him.

Trevor

Trevor is mild haemophiliac A. He did not know of his condition until he was 22 years old when he was admitted to hospital following a sports injury. He was not treated with any products at this stage.

Following a road traffic accident in 1981 Trevor was brought firstly to Loughlinstown Hospital and then transferred to St James's Hospital where he was treated with Cryoprecipitate. During the time he was in St James's he suffered a serious bleed from the mouth which was eventually contained by the application of pressure by a nurse.

Trevor recovered from the accident and subsequently ran the Dublin City Marathon in a time of around three hours 15 minutes.

(It emerged in cross examination that Trevor was treated with Factor VIII sometime in 1984 when he was having dental treatment.)

In 1988 Trevor and his girlfriend went to England. They worked hard and made enough money to return to Ireland, build their own house and start about setting up in business. They returned in 1994. They had just built their house when a letter came from St James's hospital directing Trevor to attend the hospital for a blood test. He attended the hospital in October 1995 and was told if there was anything of significance they would contact him. He heard nothing further from the hospital until he attended his GP with an unrelated problem. The GP told him that he had received a letter from the hospital telling him the first test was inconclusive and that he should attend for a second test.

The second test was positive. Trevor was distressed about the casual way in which the news was imparted to him at St James's Hospital. He was advised to take the usual precautions and was put in touch with the I.H.S..

Since contracting Hep C Trevor has dropped out of sport and lost contact with many of his friends. He has been the subject of rumour. He met a friend in his local pub who told him he had heard Trevor was suffering from everything from Hep C to Aids. These sort of comments discourage him from maintaining social contacts.

As his condition progresses he is subject to unexplained bouts of tiredness. He has to rest for half an hour. Trevor stated that he did not like his children to see him in this condition and he did not want them to remember him as someone who was not very able.

Because of his condition Trevor has been refused a small mortgage on his valuable property and has been restricted in developing his building business. He thinks it is wrong that he should be blacklisted simply because of his health.

Trevor remains optimistic of a cure being found for Hep C. He says he does not want to dwell in the blacker side of things but is conscious of the dangers posed by his condition. He would like to know how and why he got infected and would like to see big improvements in the health services offered by the State so that something like this does not happen again.

Trevor was cross-examined by Ms Murphy SC, for St James's Hospital. Reading from the Medical Records of St James's Hospital she brought his attention to an attendance at Tooting Hospital, London in 1990 and asked was he not tested for Hep C on this occasion.

Mr Hayden for the Society interrupted noting that all concentrates administered in the UK during the relevant period were treated with solvent detergents unlike the situation in the Republic.

Mr Durkan for the Tribunal said this was not the appropriate time to go into this type of detail. At this stage the Tribunal was hearing the stories of the people involved; medical records and their contents were more appropriate to forthcoming parts of the Tribunal.

The proceedings adjourned until 10.30 a.m. on Monday, May 8th, 2000.