

# Infected Blood Inquiry

[Prof Brian Edwards](#)

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## Smaller Centres

Counsel takes the Inquiry through whatever records she has about the small centres in London.

Charing Cross, Westminster, UCH, St Mary's, Middlesex, Northwick Park, Edgware, Guys, Lewisham, Kings and Hillingdon.

Nothing much new except

There is much correspondence about fair shares of a limited supply.

Alder Hey in Liverpool however faces some more uncomfortable questions.

Why did it take so long to switch to the safer heat-treated products? Was the lead Paediatrician right to decide he did not tell

parents about the tenuous HIV risk unless they asked as he wanted the children to continue treatment.

The review

of centres in other NHS regions illustrate the arguments about centre designation and how many there should be in each region.

to observe how many there were. Most dealing with small numbers of patients.

All ran into supply problems from time to time including Great Ormond Street.

Should it be one or more to reflect the distance patients would have to travel. Associate centres began to expand. The designation decisions look to rest with the Department of Health.

An interesting disagreement emerges as the Cambridge Regional Transfusion Centre, whilst happy to supply cryoprecipitate and happy to supply NHS concentrates to its Haemophilia Centres is not willing to act as a supplier of commercial concentrates. Cambridge secures its main supply from Scotland for some reason.

The exploration of the centres in the Midlands and the North confirms the variations in clinical practice with Trent and the West Midlands having the highest degree of clinical consensus and strongest clinical guidelines set by specialist committees.

**Next** hearings in November will hear from Industry leaders and Directors of Blood Transfusion Services.

*An interesting disagreement emerges...*

