

Senate Community Affairs References Committee Inquiry Into Hepatitis C And Blood Supply In Australia

Submission prepared by the Australian Red Cross Blood Service May 2004

The Australian Red Cross Blood Service (ARCBS) is a humanitarian organisation, committed to saving lives through sharing life's best gift.

The ARCBS has recognised that, in the past, some blood-transfusion recipients contracted the hepatitis C virus from blood transfusions. This is a terrible fact and we are sorry that this occurred.

The ARCBS is sorry that for some blood recipients, contracting hepatitis C has resulted in often debilitating physical symptoms, and in some cases, unfair discrimination. As individuals and staff of the ARCBS, we have been distressed to hear of these situations. ARCBS in its submissions to the Inquiry has argued that people with hepatitis C should have improved access to personal, medical and social support, through the existing health care system in Australia.

Having heard the concerns of the many who have acquired hepatitis C through blood transfusions, the ARCBS has been searching for a means by which it could acknowledge its sorrow to all those impacted by this tragic disease.

On 27 May 2004 at NSW Parliament House in Sydney, the ARCBS convened a meeting chaired by a highly respected Australian and experienced facilitator, Sir Laurence Street AC KCMG QC. The meeting was in part a result of the ARCBS having listened and learned from the appearances of those who spoke at the hearings of the Inquiry into hepatitis C and the Blood Supply about their own experiences of living with the consequences of blood transfused hepatitis C.

The intention of the ARCBS in convening this meeting was to assemble representatives of organisations who had appeared before the Inquiry, speaking on behalf of those with hepatitis C who have acquired the virus from transfusions. With this objective in mind, the following people were present at Parliament House:

- Rev. Bill Crews (Exodus Foundation)
- Mr Charles MacKenzie (Administrator, Tainted Blood Product Action Group)
- Mr Niel Lake (Independent)
- Mr Stuart Loveday (Executive Officer, Hepatitis C Council NSW)
- Mr Peter Matthews (Vice President, Haemophilia Foundation of Australia HFA)
- Miss Maria Romaniw (Co-ordinator, TRAIDS)
- Ms. Miriam Reja (Representative, TRAIDS Support Group)
- Dr Tony Keller (National Donor and Product Safety Manager, ARCBS)
- Dr Brenton Wylie (National Blood Products Manager, ARCBS)

An invitation was extended to all Inquiry Committee members to attend as observers.

Senators McLucas, Knowles and Moore, together with the Committee Secretary, Mr Elton Humphery attended in this capacity. Apologies were received from the other members of the Committee.

In gathering these individuals, the ARCBS expressed its sorrow to all who had contracted hepatitis C as a consequence of a blood transfusion.

The ARCBS stated its clear desire to establish an ongoing dialogue with those affected by hepatitis C to move forward an agenda to meet the needs of blood transfusion recipients with hepatitis C.

The ARCBS proposes to establish a steering committee to review donor- and recipient-triggered Lookback programs with a view to making improvements in communication and engagement with

blood donors and recipients. As a result of today's meeting, we will seek the participation of stakeholders representing groups such as those who appeared before the Inquiry.

The meeting recognised continuing concern about low levels of awareness of hepatitis C and in particular the likelihood that some blood recipients who received transfusions prior to the introduction of specific hepatitis C testing may still be unaware of their potential exposure to hepatitis C. The meeting supported improved education and awareness programs that were culturally appropriate for non-English speakers. The meeting also saw a need to address continuing discrimination against those with hepatitis C.

As we have stated before, we extend our sympathy to each Australian who has acquired hepatitis C, including those who have contracted it through blood transfusions. We recognise the impact that this disease can have on a person and their family.

However, as we said at the Inquiry we maintain that we have always acted in good faith, taken decisions responsibly and in accordance with the best available contemporary scientific knowledge. Accordingly, we do not accept liability at law.

However, we do acknowledge specific circumstances raised during the Inquiry hearings where it is clear the ARCBS has not always met the expectations of people with hepatitis C in terms of how the ARCBS has interacted with them. We hope that we have learned from these experiences and intend to implement improved systems wherever practicable in our day to day dealings with those affected by hepatitis C.

In making this submission, the ARCBS expresses through the Inquiry its sympathy and genuine sorrow to all who have suffered the impacts of transfusion-transmitted hepatitis C.