

**Petitioner's response to PE1056.**

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**From:** Gordon McPherson

**Sent:** Monday, January 14, 2008 9:12 AM

**To:** Hough R (Richard)

**Subject:** Public Petition PE1056

Mr R Hough

Thank you for the opportunity to comment on the responses received regarding Public Petition PE1056.

If we may comment on each document as they are referenced:

**PE1056A.Response from The Scottish Government.Dated 8th November 2007**

We are pleased to note the fact that the NHSQIS stock take "showed variations in the existence of written up-to-date protocols and policies for the prevention and management of Deep Vein Thrombosis (DVT) within NHSSCOTLAND" and also "showed variation in the availability of Patient Information Leaflets"

We also note and agree as a family did have a meeting with The Scottish Government at St. Andrews House at the beginning of the year regarding the Government stance of neonatal screening for Factor V Leiden, but would hope that said stance is able to be amended as required.

**PE1056B Responses from NHSQIS.Dated 12th November and 4th December 2007**

We are pleased to note the three (3) recommendations as laid out therein regarding mandatory assessment tools and the fact that the Chief Medical Officer has agreed with the recommendations and is acting upon them.

**PE1056C.Response from National Screening Committee...Dated 23rd November 2007**

We are pleased to note that the National Screening Committee is "to prioritize this topic" for next year.

**PE1056D.Response from Lifeblood...Dated 16th November 2007**

We are pleased to note the support from Lifeblood for Commonality of assessment tools throughout NHSSCOTLAND Health Boards and also their support regarding Commonality of Patient Guidance Information throughout NHSSCOTLAND Health Boards. We also note Lifeblood's comments with regards to screening of newborn for factor V Leiden.

**PE1056E..Response from Association of British Insurers...Dated 30th November 2007**

We are pleased to note the approach of the Association of British Insurers to the notion of genetic testing for Factor V Leiden and the use of the results. This approach will ease the minds of many people who will have had worries regarding the potential pitfalls with future insurance.

Overall we are pleased with the responses received but would ask that policies are put in place to ensure that where changes to procedure, implementation of Guidelines regarding

Patient Information leaflet and the general increasing of awareness to DVT are implemented then suitable audits are in place to ensure procedures are continuous/ongoing.

Regarding our request for screening for Factor V Leiden we would draw your attention to the findings from the TREATS Study Group mentioned by NHSQIS in their response (PE1056B) which stated:

"There was a significant association of risk of VTE in women taking OC (Oral Contraception's) with Factor V Leiden"(abstract from report Pubmed record 16113779,published 30th June 2006.copy enclosed)

We would therefore ask that if it the opinion of Medical Professionals not to progress with neonatal testing,then at least prior to dispensing the Oral Contraception the patients are offered the opportunity to be tested for Factor V Leiden.

Gordon,Jane & Steven McPherson