

Q As I understand your evidence, you do not know how this information came to "Private Eye"?

A That is true certainly.

Q If one looks on the 5 and 4 May 1995 there is the reference to what is described as a secret audit conducted by yourself and whether rightly or wrongly MD says that that secret audit was first published in the "Eye" and it seems to me refers back to the three articles that we have looked at.

A I think that MD was wrong to call it a secret audit and he was wrong to say that we could have published it in 1992, when we did not get the results until 1993.

Q Can I move on again? After these articles were published in "Private Eye" are you able help me as to what the effect was on the clinicians at Bristol? What was the effect on yourself, for instance?

A As the national audit coordinator of the Association of Cardio-Thoracic Anaesthetists I was dismayed to find my name in "Private Eye" under a topic on audit of cardiac surgery. I was attempting to promote a national audit programme, which was going to collect data from cardiac surgery centres, on adult cardiac surgery, and provide risk adjusted data as part of a quality assurance tool for all those cardiac surgical centres. To have my name associated with (a) audit and (b) cardiac surgery in a satirical magazine in this way was not helpful and very damaging to my position as the national audit coordinator of the Association of Cardio-Thoracic Anaesthetists.

Q It gives both you and audit a bad name. It makes one more reluctant to go about the process if one thinks that one's figures are going to be published in a satirical magazine, as you observe.

A Absolutely.

Q Did it cause you to take a step back and wonder whether in fact this was right. Do you follow my question?

A No.

Q In the light of what you have just said about concerns about being linked, and the effect it would have on people generally, did it cause you to stop for a moment and consider whether it was right for the whole process to go forward?

A I think that what I was looking for was reassurance that there was not a problem with mortality in the paediatric cardiac surgery unit at the Bristol Royal Infirmary.

Q You recognised that an article such as this would undoubtedly cause clinicians considerable disquiet?

A Absolutely, yes.