



## Petitions Committee

House of Commons, London SW1A 0AA

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Rt Hon Jeremy Hunt MP  
Secretary of State for Health  
Department of Health  
Richmond House,  
79 Whitehall,  
London, SW1A 2NS

18 October 2016

*Dear Jeremy,*

The Petitions Committee met yesterday and considered the Government's response to the petition "Instruct NHS England to reverse their sudden ban on stem cell transplantation" which has now been signed by over 11,000 people.

We were grateful for this response. However, it does not address one of the key points made by the petition—namely, that some patients have already started a course of treatment, only to be told suddenly that they cannot receive a stem cell transplant. It can be no coincidence that this petition has been most heavily signed in Henley and in Dartford, and in the neighbouring constituencies, in the light of the cases of Dr Harriet Scorer and Sandra Renshaw.

The Government's response to this petition does not adequately explain the situation that patients seem to be experiencing. I would therefore be grateful if you could provide the Committee with a response which addresses this point.

We would be grateful if you could provide a full explanation of the situation, which we will share with everyone who has signed the petition.

*Best Wishes,  
Helen.*

Helen Jones MP

Chair of the Petitions Committee



Department  
of Health

*From the Lord Prior of Brampton  
Parliamentary Under Secretary of State for Health (Lords)*

Helen Jones MP, Chair of the Petitions Committee  
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79 Whitehall  
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*Tel: 020 7210 4850*

October 26<sup>th</sup>, 2016

Dear Helen,

Thank you for your letter of 18 October to the Secretary of State for Health regarding the Government's response to the petition "Instruct NHS England to reverse their sudden ban on stem cell transplantation."

Waldenstrom's macroglobulinaemia (WM) is a rare form of blood cancer. The condition is characterised by a slow progression and patients are managed on a case by case basis as symptoms develop.

Whilst stem cell transplantation will not be routinely available for patients with Waldenstrom's macroglobulinaemia until a final decision has been taken later this year, it is available for patients who meet the criteria for urgency or exceptionality under NHS England's Individual Funding Request Policy. It is not the case that this treatment was routinely commissioned before or that the treatment has been suddenly banned by NHS England.

In the case of the patients mentioned in this petition, it has become apparent that their treatment started ahead of NHS England concluding its decision making about whether the policy proposition will be prioritised when it is considered for investment together with 14 other proposals. The clinicians treating the patients involved have since confirmed that their treatment will continue.

I hope this fully explains the position.

**DAVID PRIOR**