

Citizen Participation and Public Petitions Committee  
Wednesday 10 December 2025  
19th Meeting, 2025 (Session 6)

## PE2086: Recognise the vaccine injured and offer appropriate treatment

### Introduction

**Petitioner** William Queen

**Petition summary** Calling on the Scottish Parliament to urge the Scottish Government to acknowledge those injured by Covid-19 vaccines and to have the NHS offer appropriate treatment to those who are injured.

**Webpage** <https://petitions.parliament.scot/petitions/PE2086>

1. [The Committee last considered this petition at its meeting on 5 March 2025](#). At that meeting, the Committee agreed to write to the Cabinet Secretary for Health and Social Care and NHS Scotland.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received new written submissions from the Scottish Government and the Petitioner, which are set out in **Annexe C**.
4. [Written submissions received prior to the Committee's last consideration can be found on the petition's webpage](#).
5. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
6. [The Scottish Government gave its initial response to the petition on 19 March 2024](#).
7. Every petition collects signatures while it remains under consideration. At the time of writing, 784 signatures have been received on this petition.
8. [At its meeting on 24 September 2025, the Committee took evidence on thematic healthcare issues](#) that have been raised in multiple petitions, including this petition.

### Action

9. The Committee is invited to consider what action it wishes to take.

**Clerks to the Committee**  
**December 2025**

## **Annexe A: Summary of petition**

### **PE2086: Recognise the vaccine injured and offer appropriate treatment**

#### **Petitioner**

William Queen

#### **Date Lodged**

28 February 2024

#### **Petition summary**

Calling on the Scottish Parliament to urge the Scottish Government to acknowledge those injured by Covid-19 vaccines and to have the NHS offer appropriate treatment to those who are injured.

#### **Background information**

My wife was injured by the Covid-19 vaccine and we had to find a private doctor to help her. Through this journey we met others who had been injured by the vaccines. Most of them have failed to find any help or acknowledgement from the SNHS and have been gaslit by those who are supposed to care for them.

Through this journey we found this group of volunteers

<https://scottishvaccineinjurygroup.org/>

They now hold core participant status in both the UK and Scottish covid enquiries and the number of members continues to grow.

The frustration at being unable to access proper health care has also led to suicides from those injured and it's now time for our government to give the help needed by people who "did the right thing" and now feel abandoned by their government.

## **Annexe B: Extract from Official Report of last consideration of PE2086 on 5 March 2025**

**The Convener:** Our next continued petition PE2086, which was lodged by William Queen and calls on the Scottish Parliament to urge the Scottish Government to acknowledge those who were injured by Covid-19 vaccines and to have the national health service offer appropriate treatment to them.

We last considered the petition on 29 May 2024, when we agreed to write to the Scottish Government to seek information on informed consent, specialist diagnostic testing and specialist treatment.

The Scottish Government's response states that information on the potential side effects of the Covid-19 vaccine is provided with each appointment letter, which also includes links to further detailed information. The submission also highlights that staff at clinics are trained to answer any questions about side effects and that each patient must give informed consent before receiving a vaccination. That has been my personal experience.

The Scottish Government's submission states that no specialist diagnostic testing is available for Covid-19 vaccine-related harms, but there are other diagnosis methods. For example, if a patient has a condition that is a known side effect, further tests or clinical assessment could be done in order to rule other likely causes in or out, although there might be nothing that is definitive enough to confirm the condition's cause. The submission reiterates that an individual would be offered the same treatment as any other patient, regardless of how they contracted a condition.

The petitioner's written submission highlights concerns that patients are not being adequately treated for the conditions that they are presenting with, which is resulting in some individuals seeking private treatment. He points to vaccine-induced myocarditis as a condition that can be difficult to diagnose. He also states that he is aware that people have been described as over-anxious when seeking support through the NHS, which is leading them to be hesitant about continuing to seek support, while others have pursued private care and received a heart injury diagnosis.

I believe that the petitioner is in the gallery—good morning and welcome. There continues to be issues of substance in this area, so it is a petition that we would want to hold open. Do members have any calls or suggestions for action?

**Foyso Choudhury:** We should keep the petition open and write to the Scottish Government to ask whether conditions that could be the result of Covid-19 vaccination side effects are being monitored in order to assess whether those with such illnesses are presenting differently.

**Fergus Ewing:** I note that the petitioner's 23 January submission, which extends to two and a half A4 pages, is very closely argued and covers an awful lot of points that I will not rehearse. Plainly, the petitioner has, possibly along with others, carried out a great deal of background work.

Can we ask the health minister to respond to the main points that the petitioner's submission raises? They are, in many cases, points of principle that should be addressed because they might affect many people, as the petitioner suggested in his original petition and attached comments.

**Foyso Choudhury:** Can we also write to NHS Scotland and ask how it is treating Covid-19? I had a round-table meeting in which I was told that people with Covid-19 are not being treated as patients or given priority, even though they have reservations about their illness.

**The Convener:** We can do that. However, Mr Ewing is correct—the petitioner has made a comprehensive series of specific points in their latest submission, which we could condense into a series of questions to put to the minister, and then see what response we obtain. Similarly, we can write to NHS Scotland to highlight issues in relation to the requests of staff.

As there are no other suggestions, are we content to keep the petition open and pursue those points?

**Members** *indicated agreement.*

**The Convener:** We thank the petitioner for his on-going work to underpin the petition that he submitted. We will seek specific evidence on the particular points that have been identified in his most recent submission.

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## **Annexe C: Written submissions**

### **Scottish Government written submission, 1 April 2025**

#### **PE2086/G: Recognise the vaccine injured and offer appropriate treatment**

##### **A lack of adequate treatment for conditions, resulting in some individuals seeking private care.**

The Scottish Government recognises the importance of people receiving appropriate care.

In many cases it may be difficult for a clinician to explicitly determine if an illness or condition is linked to vaccination. The Scottish Government understands how this lack of acknowledgement may be deeply frustrating for citizens.

If a patient has been vaccine injured and is experiencing a particular condition or symptom as a result, then the NHS should treat them for that condition, as they would with any other patient who displayed those symptoms, regardless of the cause.

A clinician's inability to attribute symptoms or conditions to COVID-19 vaccine injury does not prevent them from effectively treating the patient.

There are certain conditions, like MCAS and PoTS, the examples quoted by the petitioner, where a patients' clinical presentation can vary substantially, not only from person to person, but even within a patient from one point in time to another. Diagnosis may take time, as clinicians rule out a series of possible causes, which can be a lengthy process, no doubt leading to frustrations in some cases.

##### **A lack of recognition of postural orthostatic tachycardia syndrome (PoTS) in the NHS, leaving individuals without diagnosis or treatment**

While the Scottish Government provides core funding and is responsible for setting the strategic policy for the NHS in Scotland, responsibility for the delivery of care rests locally with NHS boards who configure services taking into account local circumstances and the reasonable needs of their patient populations.

The Scottish Government expects NHS boards to provide high quality, person-centred care and support for everyone, including people with PoTS. Support is often provided via primary care, with referral to secondary care if necessary to rule out other causes of symptoms or provide management advice.

NHS Education for Scotland's learning platform 'Turas' contains the learning resources listed below on PoTS and autonomic nervous system dysfunction. These resources are accessible to a multidisciplinary audience.

- 14 June 2022 – PoTs UK webinar 'Long Covid and the autonomic nervous system - a top - down and bottom - up approach'.
- 17 July 2023 – NHS Education for Scotland slide pack learning bite 'The autonomic nervous system and Long Covid'.

We have commissioned and funded NHS National Services Scotland to establish a national Long Covid Strategic Network. A pathway for the diagnosis and management of PoTs in Long Covid was developed by the network in 2023. This has since been withdrawn pending a review of evidence to support an updated pathway, with Healthcare Improvement Scotland having been asked to carry out a rapid evidence review to support this work.

**Reports of individuals being described as over-anxious, leading to hesitancy in seeking further support, and resulting in some individuals seeking private care**

The Scottish Government would encourage anyone who is suffering from any symptom or condition to seek medical intervention in order to access suitable healthcare support. For those patients who feel like they have had their concerns dismissed, or badged as anxiety, Health Boards have set complaints procedures that patients can follow. The Government is committed to improving public health and alleviating pressures on the NHS to allow for better treatments for patients.

**Challenge in diagnosing vaccine-induced myocarditis**

The Scottish Government has great sympathy for anyone who has been injured as a result of receiving the COVID-19 vaccines and acknowledges the difficulties some citizens have experienced in receiving appropriate treatment as a result of these injuries.

In many cases it may be difficult for a clinician to explicitly determine if an illness or condition, such as myocarditis, is explicitly linked to vaccination, as it can be caused by multiple factors.

If a patient has been vaccine injured and is experiencing a particular condition or symptom as a result, then the NHS should treat them for that condition, as they would with any other patient who displayed those symptoms, regardless of the cause.

The UK Health Security Agency (UKHSA), in partnership with the Royal College of General Practitioners (RCGP) and the Royal College of Emergency Medicine (RCEM), produced clinical guidance to support the detection and management of clinical cases of myocarditis and pericarditis associated with coronavirus (COVID-19) vaccination. This clinical guidance was endorsed by the British Congenital Cardiac Association (BCCA) and is available here; [Myocarditis and pericarditis after COVID-19 vaccination: clinical management guidance for healthcare professionals - GOV.UK](#)

Clinicians can also obtain further information on side effects of the COVID-19 vaccines via the [COVID-19: the green book, chapter 14a - GOV.UK](#).

**Ongoing concerns about whether people are being provided with accurate information to support them to give fully informed consent**

The Scottish Government in partnership with Public Health Scotland (PHS) gave, and continues to give, recipients of the COVID-19 vaccines as much information on the potential benefits and risks of the vaccines as possible.

Information on the side effects stated on these materials is based on the expert advice of the Joint Committee on Vaccination and Immunisation (JCVI) and the UK Medicines and Healthcare products Regulatory Agency (MHRA).

There is a formal mechanism by which new side effects are recognised and included in official materials such as Patient Information Leaflets, Summary of Product Characteristics, and the Green Book Chapter. When this occurs, we update our materials.

This is managed by the MHRA, when signals are such that something becomes a formally recognised side effect, due to its prevalence in those receiving the vaccine.

High level information on potential side effects is provided with the information leaflet that accompanies each appointment letter. That leaflet has web links directing people to the patient information leaflets, via NHS Inform, should they require more information prior to their appointment.

Patients are given further materials at their appointments, including the manufacturer's 'Patient Information Leaflets' and our NHS 'What to expect after your Covid-19 vaccine' leaflet, which contains more information on side effects.

The Scottish Government is aware that some people were given the Patient Information Leaflet (PIL) after receiving vaccination. Best practice would be for clinics to provide these to patients whilst they wait for vaccination. The leaflets sent with appointment letters gave patients the chance to read the PILs online prior to attending their appointment.

Staff training materials are updated regularly, so that staff at clinics can answer any questions about side effects during consent conversations at the point of vaccination.

The informed consent materials developed by PHS are available in a range of accessible formats, including multiple languages, Easy Read, Braille and British Sign Language (BSL).

### **Monitoring the side-effects of Covid-19 vaccination**

The UK Medicines and Healthcare products Regulatory Agency (MHRA) is responsible for medicine licences and it only grants approval to COVID-19 vaccines following rigorous reviews of the safety, quality and effectiveness of such vaccines. All mRNA vaccines currently in use in the UK and Scottish programmes have been subject to this process. As with all vaccines and medicines, the safety of COVID-19 vaccines is being continuously monitored.

The MHRA monitors the safety of all medicines throughout their marketed life, in what is known as pharmacovigilance. Information is derived from multiple national and international sources including:

- spontaneous adverse drug reaction reporting schemes, such as the Yellow Card Scheme
- clinical and epidemiological studies
- worldwide published medical literature
- pharmaceutical companies
- worldwide regulatory authorities
- morbidity and mortality databases

Public Health Scotland is a participant in the multinational Global Vaccine Data Network (GVDN) cohort study, looking at COVID-19 vaccines and adverse events in over 99 million vaccinated individuals. The UK National Institute for Health and Care Research also commissions research and studies into COVID-19 vaccines.

Further information on Pharmacovigilance can be found here:

[Pharmacovigilance how the MHRA monitors the safety of medicines.pdf \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/115555/Pharmacovigilance_how_the_MHRA_monitors_the_safety_of_medicines.pdf)

## **Population Health Directorate**

### **Petitioner written submission, 2 April 2025**

#### **PE2086/H: Recognise the vaccine injured and offer appropriate treatment**

I want to thank the Committee for the time they have given this petition and for the questions they have asked the Scottish Government.

This paper is designed to highlight the difference in the way those with long covid have been treated compared to the vaccine injured. To be clear this is not an attack on anyone with long covid.

The Scottish Government's approach to Long Covid and vaccine injuries shows a clear divide. Long Covid got quick action: by 2021, they'd noted 187,000 affected and launched a strategy. They've committed £3 million—£10 million for NHS services in 2023, £0.5 million for research—plus clinics and a 2023 committee review with 12 meetings. It's a priority with real support. Vaccine injuries, though, get far less. There's no official figure—Public Health Scotland cites 641 cases, 36 deaths—but no focus follows. There are no dedicated funds, just a UK £120,000 payment for the worst cases. No clinics or specific plans—just a March 2024 response deferring to the Medicines and Healthcare products Regulatory Agency. Long Covid's backed with resources; vaccine injuries feel ignored. Both are serious, but the gap in response is hard to miss.

In providing this summary I hope to demonstrate how those with vaccine injuries have been treated. Many of the responses we have received tell us that whether a person is vaccine injured or not they will still receive the appropriate care needed. This is a completely inappropriate way to deal with any patient. It's gaslighting but more importantly, it shows a willingness to ignore safety signals. Why would any medical practitioner choose to ignore what a patient is telling them? Do they not want to acknowledge possible injuries? The Scottish Government and the Scottish NHS



actively encouraged everyone to get vaccinated. They cannot now walk away from the duty of care they have for those injured.

Finally, I want to challenge the committee by asking what they can practically do to help us achieve the aims of our petition.

I engaged with this process in good faith and believe we have presented a well evidenced petition (which was noted by members).

Sadly, I note that the responses from the Government now seem to have dried up. I note they have failed to respond to our last evidence paper. Which is deeply disappointing given the time and energy that has been put into producing our evidence papers.

It is my understanding that part of the remit of this Committee is to encourage deliberative democracy. I also believe the Committee has the ability to set up people's forums. Given that the Committee mentioned the amount of health related petitions perhaps it's time one was set up to allow the people to have a say on the current state of all of our health related services.

I believe it's time for the Cabinet Secretary for Health and Social Care to come to the Committee and answer our questions directly and lay out how they plan to help us.

I feel the time has come for this petition to receive some answers and to find solutions. Once again, I thank the Committee for their time and hope that we can now move on to finding the solutions needed to help those who have been injured.