

# ANONYMOUS

Witness Name:

Statement No: WITN2879001

Exhibits: 0

Dated: February 2019

## INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF

I,  will say as follows:-

### Section 1. Introduction

1.   
  
 We have two adult children from my previous relationship, who no longer live at home.

### Section 2. How Affected

2.  has severe Haemophilia A 0%. He was infected with Hepatitis B and C and HIV as a result of receiving infected blood products.  believes he received infected Factor VIII at the Oxford Haemophilia Centre at some point between 1978 and 1983.
3.  has given a statement to the Inquiry. His witness number is WITN1096001. Exhibited to  statement is a log of the Factor VIII treatment he received.

4. I was thirty-one when I met [H]. We met at a nightclub for singles and started dating. He moved in with me six weeks later. We did not realise when we first met, but we had the same circle of friends.
5. [H] and I's relationship became serious quickly. 5 weeks into our relationship he called me and said he was coming over as he needed to tell me something. I thought he was going to end our relationship. He came over and told me he had Haemophilia and HIV. My father was an ambulance driver and had had Parkinson's disease since I was young, and so I had learnt not to judge people on their health conditions.
6. I refer to [H] statement regarding what advice he was given about the risk of being exposed to infection and how he found out that he had been infected.

### **Section 3. Other Infections**

7. As [H] has detailed in his statement, he has been told he is at risk of having been infected with vCJD. This is an additional worry for us.

### **Section 4. Consent**

8. I believe they tested Haemophiliacs at Treloars. To use Haemophiliacs and to not be honest about what they did is evil. They knew what they were doing. You would not treat an animal like that.

### **Section 5. Impact of the Infections**

9. [H] hip became infected in 2012, which led to him being admitted to the intensive care unit at the John Radcliffe Hospital in a life threatening situation. I was told he had a 1% chance of survival and I had to say goodbye to him, which was heart breaking. After he survived, there was still a period of a around fortnight where the doctors were not sure if he would make it.

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10. After being in intensive care, [H] then had to spend a further 8 weeks in hospital. I stayed in a bed and breakfast during this time in Oxford so that I could visit and support [H]. There is a letter from [H] Consultant in his medical records attributing this infection to his HIV, which is exhibited to [H] witness statement.
11. [H] hip became re-infected in 2014, as a result of which he required surgery. As a result of this surgery [H] has been unable to walk since 2014 and is in a wheelchair.
12. [H] is working hard on his physical recovery from this surgery by seeing a personal trainer and going to the gym. He is hoping to walk again by the end of the year.
13. [H] has suffered from anxiety, panic attacks and depression due to his infections.
14. When his panic attacks first started it was unnerving because I didn't know how to deal with them. [H] heart would race, he would get light headed, dizzy and panic. I believe these started just after he went on HIV medication in 1999. To start with, [H] would have panic attacks for most of the week. They then happened about 3 to 4 times a week, until he learnt how to manage them, which took about 20 years. These attacks could happen anywhere. A lot of the time his attacks would happen at the weekend when he was at home. If he had attacks during the night, we could be up all night.
15. [H] has also suffered from depression. Some days it gets too much and gets on top of him, but he has also learnt to deal with this over the years.
16. [H] is extremely angry about his infections. There have been times when I have had to talk him out of wanting to end his life, which can take a couple of hours. He looks to me for reassurance all the time.

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17. As [H] has detailed in his witness statement, his relationship with the Oxford Haemophilia Centre became extremely strained over the years and he stopped attending appointments with them. After what they have done to him, how dare they tell him that if he didn't attend appointments for six months they would stop his Factor for home treatment.
18. [H] takes Efavirenz for his HIV. [H] hates taking his medication. Every day he has to take it to survive and it's a daily reminder of his HIV infection. He has no choice but to take it. The medication gives [H] awful dreams.
19. I refer to [H]'s statement regarding the further medical complications/ conditions which have resulted from his infections, the course of his illness and how his infections have impacted upon his treatment for other conditions/ the availability of treatment.
20. [H] does not allow his infections to affect his family and social life. He carries on living whilst hiding his infections. Having to hide the truth from everybody is cruel.
21. In terms of the impact of [H]'s infections on me, when we first met and I found out about [H]'s infections, I didn't know whether I had him for a week or a year. To then watch [H]'s best friend die and to think is that going to be him next week was awful. His friend died leaving two young children and a widow.
22. What got me through [H] being admitted to intensive care in 2012 was the mind set of "what is happening is happening and I cannot do anything to change it". I realised I had two choices, to cry and feel sorry for myself or to take a deep breath and deal with it, and that is how I have managed the situation with [H]. If I had cried and felt sorry for myself I would be a mental wreck by now.

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23. I now make the most of every moment and do not worry about anything because there is no point. It is very draining and you learn to live with it because there is no other option. I would rather live with it than to not have [H]
24. It is extremely hard watching somebody you love go through what [H] has had to go through, not knowing how much time he has left. I am lucky I still have him. There are an awful lot of people whose partners were infected and have died.
25. We have always had lists of things we want to do and we have always done them when we want to.
26. Mentally I have had to deal with [H] being infected for 31 ½ years, which is over half of my life. You just have to deal with it. It is hard and difficult to express the strain the infections have put on our lives into words.
27. It is upsetting seeing [H] ill. It can be draining if I am tired or unwell.
28. [H]'s infections don't affect me socially because I don't talk to other people about them. It would be lovely to speak to somebody about them, but I don't have that option. The infections don't give you that option.
29. In terms of the impact on our family life, [H]'s Factor was out of view of the children when they lived at home and they knew his area was private, so they were not aware of [H]'s health issues. [H]'s infections never affected my children because I knew how particular [H] was, and so the children were never at risk.
30. In early 2018 I got polymyalgia rheumatica which I have been told by my doctor can be caused by stress. I assume this was due to a build up of everything that has happened to [H] and I over the years. With this condition you wake up and you cannot move the muscles and joints in your body. Your body hurts. I am on steroids for this, which I slowly need to come off. Hopefully this October I will be off them and it will not come back.

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31. The steroids I am on are effective, but if I do get ill it can be difficult as [H] can't get around and so I have to do everything.
32. Although living with [H]'s infections has impacted me, it is nothing compared to what it has done to [H]. I get so angry at what has been done to him. Panic attacks are not my [H]. There is nothing I can do, except reassure and comfort him.
33. I worked until [H] went into intensive care. Firstly I worked in sales and then I was a transport manager, before working on the control desk for transport. When I saw how close [H] came to losing his life, I made the decision I was not going to waste my time going to work. I wanted to spend the time I had left with [H]. We own the house we live in, so I could afford to give up work.
34. When [H] came out of hospital after having his operation in 2014 I changed his wound myself. I didn't have a nurse in. When he was in hospital I learnt how to change a bed with him in it and I learnt how to administer his Factor VIII.
35. In terms of the impact of the stigma on [H] and I, as we have not told anyone about [H]'s infections we haven't encountered any stigma.
36. With regards to his work, [H] could not progress, as he has detailed in his witness statement. If he had, we might have been more financially stable.
37. We could also not get a mortgage together due to [H]'s infected status, so the mortgage had to be solely in my name. This meant I had to make sure I was earning good money to be able to get a decent mortgage in my name.
38. [H] also couldn't get life insurance. We had the children to care for so it was a worrying time.

**Section 6. Treatment/care/support**

39. I don't believe [H] has faced difficulties in obtaining treatment as a result of being infected.
40. The hospital in Oxford have annoyed me in the past as the Doctors used to come to [H]'s bed when he has been an inpatient and said 'you have HIV' in front of the whole ward. It was disgraceful.
41. Another time before [H] went into intensive care a nurse openly said to a colleague 'you need to put gloves on and be careful as he has HIV and HCV'. This could have been said in front of my children who don't know about [H]'s infections. Fortunately it wasn't. I have found medical professionals often do not respect your privacy. [H] has complained about this in the past, as he has detailed in his witness statement.
42. I have never been offered counselling or support in relation to [H]'s infections. I would not accept it if it was offered. Professionals are trained, but I live the experience everyday. I know what it is to live with somebody with these infections and how to cope with it.

**Section 7. Financial Assistance**

43. I refer to the comments [H] has made regarding the financial assistance he has received in his witness statement.

**Section 8. Other Issues**

44. I think the whole thing is so devastating. I would love to come face to face with whoever did this and tell them what I thought.

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45. I want the Public Inquiry to get to the truth, for people to get struck off and for those responsible to be held accountable and receive appropriate punishment.

46. As much as we are pleased to see that the Public Inquiry is happening, it is extremely difficult for [H] to have to relive his experiences so many times. It will be good when it is concluded. Everytime an investigation has been announced and victims are told they will get compensation and then they don't, it's a knock back. It is time to end the investigations and have some finality.

### Anonymity, disclosure and redaction

47. I wish to be anonymous. I would be willing to give oral evidence as long as my privacy is maintained.

### Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed... GRO-B .....

Dated... 24/2/19 .....