

Witness Name: Elaine Ridgway

Statement No.: WITN0712001

Exhibits: -

Dated: 5 December 2018

## **INFECTED BLOOD INQUIRY**

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### **WRITTEN STATEMENT OF ELAINE RIDGWAY**

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 22 October 2018.

I, ELAINE RIDGWAY, will say as follows: -

#### **Section 1. Introduction**

1. My name is Elaine Ridgway. My date of birth and address are known to the Inquiry. I am a married woman and live in my own home with my husband. I have lived in this home for 43 years.
2. I intend to speak about my daughter Catherine and her infection with Hepatitis C, which she contracted either from a blood "exchange" at the age of 48 hours or from a blood "top-up" on 25 October 1975, or both. In particular, I intend to speak about the nature of her illness, how the illness affected her, the treatment she received and the impact it had on her and my own life.

## Section 2. How Affected

3. Catherine was born at Derby City Hospital at midday on GRO-C 1975. As soon as she was born, the doctors took her away from me. I later found out that this was to the Special Baby Unit within the hospital and that she had been given a blood exchange at 48 hours. I was told nothing about this beforehand; she was taken straight away from me after the birth.
4. After about a week Catherine was allowed to go home, so we returned to our family home in GRO-C
5. After a few weeks, she became very lethargic and seemed lifeless. I was really worried so took her to my own surgery, where she was seen by a doctor. She told me to take her straight to Derby Children's Hospital.
6. On the way to the hospital, I dropped my other child, Matthew, off at my parents' house. I stood at their front door holding Catherine and my dad took Matthew and said, "go now, that baby is dying".
7. I then went to the Children's Hospital in Derby, where Catherine was admitted and given a top-up blood transfusion.
8. At this point, I would like to stress that it never entered my head not to trust the National Health Service (NHS) to do the right thing by my baby, however as we are now aware, the NHS gave my baby infected blood and she has been suffering ever since.
9. After a few days, I brought Catherine home from the hospital. She seemed okay to begin with, but from then on she was always ill with a whole manner of ailments: flu, cystitis, colds and great sores on her legs, at times these were open and weeping.
10. When Catherine was 4 years old and attending playschool, another mother noticed the sores on her legs and asked me about them. It transpired that other people had been talking about these sores and thought that I was not looking after her properly. I took her to the doctors but was dismissed with "all children get those".
11. This response continued for years afterwards and I was always dismissed quickly whenever I took her to the doctors asking for help. I

- simply couldn't understand why she wasn't thriving like the other children her age.
12. She then started developing bruises all over her body and my own mother and auntie said that I couldn't be looking after her properly and that if I was doing she wouldn't always be poorly. This was very upsetting. I was accused of neglecting her but I wasn't; I was trying my best.
  13. At no time were we offered blood tests to try and find out what was wrong with Catherine.
  14. This worry continued for many years until the summer of 1999, when Catherine and myself went to visit [GRO-C] in Derby City Hospital. We saw a poster on the wall asking for blood donations, and as the hospital had been so good to [GRO-C] throughout his [GRO-C], we decided to donate. We wanted to give something back to the hospital that had done so much for him.
  15. When the blood service next came to Derby, we went to the old co-op building to donate. We had the initial "pin prick" test and then went into separate areas because I had donated before and Catherine hadn't.
  16. After the blood had been taken, Catherine came over to me and said that they had put a brown luggage label on her blood bag, like the one Paddington Bear had on his coat. I can clearly remember her saying that. She was extremely worried because her blood had been treated so differently to the others and she thought something must be wrong. This caused us a lot of concern.
  17. During the following week, Catherine received a letter from the blood service in Sheffield. It said that they had tested her blood and that she had an infection called Hepatitis C.
  18. Catherine lived with me at this point, so we found out at the same time. We were shocked and horrified. I was very concerned, I had never heard of Hepatitis C and was scared that she had AIDS or something. There wasn't any information in the letter about what this terrible disease was. I think there should have been.

19. Catherine then made an appointment to go to Sheffield for further tests and an interview. I waited outside and she came out and told me that they had asked her lots and lots of times if she had injected herself with drugs. She had not and found this very offensive. She was interrogated and grilled.
20. It transpired that the only way Catherine could have been infected with the virus was through her blood exchange or her top-up as a baby. I was so angry about this. No information had ever been provided to me about the risks of the blood exchange or top-up. None at all. Not before or after the transfusion. I didn't even know she was having the procedures until after they had been done.
21. We were naturally horrified at the news of her infection. She had spent her whole childhood "mixing up" with other people, young and old, and we were scared they could have caught the virus from her. Children are always falling over and this worried us. Since then, we have always been scared that whomever she was around could catch the Hepatitis C.
22. Nobody ever explained to Catherine or myself what Hepatitis C was. We tried to look on the internet but only found horror stories. I didn't go into the appointment in Sheffield so can only rely on what Catherine has told me, but we left the appointment knowing nothing more about Hepatitis C, than before going. Even at later out-patient appointments, she was never given any information or support. The only information we ever got was what we sourced ourselves.
23. No information was given to me at all. And the information given to Catherine was very scant. Other than basic information, like not to share razors and toothbrushes and to avoid blood-to-blood contact, she was not told anything about the risk of infecting others.

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

24. I don't believe that Catherine received any infection or infections other than Hepatitis C as a result of being given infected blood.

#### **Section 4. Consent**

25. I believe that Catherine was tested for Hepatitis C without her knowledge and consent. We didn't know that she had been tested for anything, let alone Hepatitis C, until the letter arrived informing us that she had Hepatitis C. We were dumbstruck when it arrived.

#### **Section 5. Impact**

26. Hepatitis C has totally changed Catherine's life. She has suffered mentally with brain fog, lack of concentration and tiredness. She has suffered physical symptoms of frequent colds, cystitis and thrush. She was always ill, always. She has also suffered hugely with her teeth and undergone lots of treatment. As a child, we never understood why she suffered so terribly when others didn't. To present day, she has ulcers and abscesses on a regular basis and has lost a lot of teeth.
27. Catherine has also developed further medical complications as a result of her Hepatitis C, including liver flares, jaundice and Bipolar affective disorder. A doctor has confirmed the Bipolar affective disorder is a result of the Hepatitis C and/or treatment.
28. For Hepatitis C, Catherine was treated with pegylated Interferon and Ribavirin. This began in hospital at Derby City Hospital but then continued at home.
29. Catherine had to wait 8 years for the Hepatitis C treatment in Derbyshire on the NHS to begin. She was told many times before this that it was not available to her. We were desperate to get treatment for her before this and considered re-mortgaging our home so that we could pay for it. It would have cost £10,000.00 but we would have done anything to get her better.
30. When she eventually received the treatment, we found out that other people had been given it before this, meaning it was available. These people had become infected by self-inflicted means. I found this extremely offensive and distressing.

31. The mental and physical effects of the treatment Catherine received were horrific. It was awful. When Catherine first injected herself at home, we were away in Hovingham, having a long weekend away. Catherine got in touch and said that she wasn't okay and we shouldn't have left her. She was really ill. This was about 4 weeks into treatment.
32. I never expected it to be as bad as it was for her. The treatment made her more ill than she had previously been. From the very start, she became extremely ill and covered in weeping sores that looked like severe eczema. She was wrapped up in bandages and looked like someone with a terrible skin disease. People were very cruel and thought she was contagious.
33. From then on the side effects of the treatment got more and more serious. I began to think it wasn't worth it. It was like a nightmare; she was angry, frustrated and quite violent at times. She had no energy and was in bed most of the time. She needed our constant help and reassurance. It was a horrible treatment from start to finish.
34. We thought our troubles would be over after the treatment. However, we knew little in terms of what the treatment and illness had done to her mentally. She became anxious, paranoid, depressed and couldn't concentrate. I began to notice her doing things that she had never done before. On one occasion, she came over for dinner and sat with her hands around her plate as if someone was going to snatch it from her. It reminded me of Oliver Twist.
35. Since being diagnosed with Bipolar affective disorder in 2008, Catherine has had numerous treatments and been seen by lots of different doctors. The treatments (very strong anti-psychotics, mood stabilisers and Diazepam) all have horrendous side effects. It's "mind-boggling" when you think about it. She is overly reactive to treatment and is yet to find a medication that helps her. Nobody has an answer or a solution.
36. It has now got to the point that her case has been referred to Pharmacy. They are investigating why the treatments she has been

- on aren't working and exploring possible links to past Hepatitis C treatment.
37. Catherine's infected status impacted upon her dental care. Her dentist always wore gloves and took her into a different room for treatments that involved blood.
  38. Catherine's private, family and social life has been affected by her infection. She has never had a long-term partner and has never been able to settle down. It is too much of a constant battle to "get through each day". She was very secretive with her symptoms, which made her private life a very lonely path to take.
  39. As a family, it was difficult to make and keep plans. She was always ill over Christmas and we never knew whether or not we could be able to celebrate her birthday. Booked holidays would be equally uncertain, and we didn't know if they would be fulfilled until the last moment.
  40. At school, she was always picked on for scabs and other noticeable symptoms. She often came home very upset. Her extreme tiredness also had a big impact on her social life. It was hard for her to participate in social activities and this was hard for her friends to understand too, as they did not know about her infection.
  41. Catherine's infection has taken a lot out of me mentally, physically and emotionally. I have had a lot of support from my husband but it has still been difficult for all of us. Even this procedure, of recalling the events of Catherine's infection for my statement has been hard for me to do.
  42. Prior to her diagnosis, I constantly worried about what was wrong with her. I was then paranoid when she was first diagnosed, as for a long time I was not fully aware of what the virus was or what it did to the body. She always had to go to the doctors and I found it difficult and stressful to fit this around a family. I still had to go to work and care for my husband and son.
  43. When she was poorly on treatment, she would ring me at 5:30am crying because she was suffering so much from the side effects. The

phone calls were persistent throughout the day. I wish I had been given some support.

44. I am tired because I still have to support Catherine on a daily basis with her Bipolar affective disorder. This is not an easy illness and like Hepatitis C, it comes with stigma and people do not understand it, nor do they have any inclination to try and educate themselves about it.
45. I can truly say that throughout the last 43 years we have worried about Catherine's health every day. Looking after Catherine has been difficult and given me huge anxiety. It has been going on for so long. I now tremble and am always walking on eggshells with her. I fear what she may do next.
46. I don't think I will ever be able to live a normal life. It is a constant worry to me now and I even worry about what will happen in the future, when my husband and I are not here to help her.
47. The stigma of Catherine's infection has affected us all. Catherine was told by doctors not to tell anyone so neither did we. This has been a very heavy burden to carry and one we carried alone through fear of the stigma.
48. The stigma has also impacted relationships. We had discussions about whether or not to tell Catherine's boyfriends about her infection through fear of the stigma. We told my son's partner and I feared that one day she would decide not to let Catherine see their son anymore.
49. Our family have witnessed things that no parents or siblings should have to see. Watching Catherine suffer has been a constant worry and my husband, my son, my grandson and myself have never been able to live a normal life. It has been a load that we have tried to share but it has affected each of us individually. My son's needs have always come second to Catherine's.
50. Catherine's education, work life and financial situation have also been affected. She has always taken pride in everything she does and has always been a committed individual, but she has never been able to maintain any degree of stability at school or in her work.
51. Catherine has tried her best to work and maintained a number of jobs. In the past she had a full-time job at Thorntons, earning £20,000.00 a



year. Unfortunately, she lost this job in 2007 and has not been able to hold down a full-time job since. This is due to her ill-health. She then set up a small cleaning business to help herself have some sort of routine. However, she lost this in 2018 due to her bipolar, anxiety and depression. This has traumatically affected and changed her financial situation.

- 52. I have always managed to keep working, but it has been difficult. I have to be available at all times to make sure she is okay and this has been challenging to do alongside work. At one company, I had to take holiday to take her to hospital and out-patient appointments.
- 53. My husband and I had our own private detective business and this was also hard to run whilst meeting Catherine's needs. I relied on my own parents a lot during this time.

#### **Section 6. Treatment/Care/Support**

- 54. We were never offered any counselling or psychological support in relation to the Hepatitis C.
- 55. Catherine is with a mental health support service now, but this was by no means easy. This is for her Bipolar affective disorder, generalised anxiety disorder, anxiety disorder, panic disorder and OCD. She sees a psychiatrist once every 6 weeks, a community psychiatric nurse twice a week, a psychotherapist psychiatrist weekly and her GP weekly.

#### **Section 7. Financial Assistance**

- 56. I found out about the financial assistance that may be available for Catherine, through searching the Internet.
- 57. Catherine received about £20,000.00 from the Skipton Fund on 28 June 2007.
- 58. The process of applying to the Skipton Fund was very strict. Our first application was refused due to a lack of evidence. I had written to Derby City Hospital and the Children's Hospital at Derby asking for

- Catherine's medical records but they said all records had been destroyed.
59. I wrote to a local MP asking for help in getting the evidence. She sent a very unhelpful response.
60. I then kept going to the doctors to try and get evidence that proved Catherine had received a blood exchange and top-up. It was extremely difficult and I had to beg for it. I was so determined to get it for her. The whole process took months.
61. Catherine also receives benefits. This was a long ordeal. At one point, she had to have her eligibility to work reassessed and was told that her benefits would stop. The woman assessing her asked questions with multiple-choice answers that were totally unreflective of Catherine's circumstances. Even then, the answers taken down were contradictory to what she had said and the evidence she had provided. We then went to a tribunal and were successful in having the benefits reinstated.
62. Catherine felt victimised throughout the entire process. She ended up in this position because of the infected blood she was given through no fault of her own, yet she has been treated like this. She would much rather be working full-time than be on benefits, but this isn't possible.

#### Section 8. Other Issues

63. One of the doctors [GRO-D] who worked at the Children's Hospital when Catherine was given her blood top-up now lives near us. My husband got in touch with him when we were applying to the Skipton Fund and asked what records would have been kept regarding the blood top-up. He called back and said that it would have been recorded on a form known as an "A4", which would be kept in paper form and on a microfiche. He said he would call back with more information but never did. My husband saw him on a later date, at a local golf club. He was offhand to the point of rudeness and didn't want anything to do with it.

64. I have been told that the medical records before 1980 have been destroyed, including the blood bank records. This information came from the Medical records section for the Health Authority at the Derby Royal infirmary.
65. I have made my own enquiries and been told that when files get too large or a patient dies, records are moved from the hospitals in Derby to a storage warehouse on Ascot Drive in Derby.
66. I would also like to add that I often ask myself why I was so naïve to trust the NHS and Department of Health (DoH). At that time I had always been brought up to respect and not question what doctors and figures of authority told me.
67. I won't dwell on the indignities we suffered trying to get benefits for Catherine when she was too ill to work, but I would like to mention that the process was terrible. We were not scrounging; we were doing all we could to keep a roof over her head and food on her table and we struggled.
68. I would like answers to the following questions:
- Why was England not self-sufficient in blood in 1975? I can clearly remember the National Blood Service visiting factories and workplaces in the 1950's and 1960's, where workers had an hour off to donate blood and were given a cup of tea and a biscuit. This took place on a regular basis. I also believe we were self sufficient from 1939 to 1945, when extra blood was needed for soldiers returning from war and civilian casualties. We are also self-sufficient now, when the population is much bigger. Why was this a problem then?
  - Whose decision was it to buy blood from abroad? Was there profit to be made by a government authority, pharmaceutical or drug company, or individual whose responsibility it was to purchase blood in England?
  - Did the doctors' check if there was any blood available at Sheffield blood bank, before taking it upon themselves to give new born babies untested blood from prisoners in America?

- When will the England Infected Blood Support Scheme (EIBSS) payments finish?
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**Statement of Truth**

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

Signed \_\_\_\_\_

GRO-C

Dated