

Witness Name: Maria McGrath

Statement No.: WITN0807001

Exhibits: Nil

Dated: 29-3-2019.

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF MARIA MCGRATH

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 13 February 2019.

I, Maria McGrath, will say as follows: -

Section 1. Introduction

1. My name is Maria McGrath. My date of birth is GRO-C 1951 and my address is known to the Inquiry. I am the long-term partner of Christopher Munn ("Chris") who was infected with Hepatitis C ("HCV") following a blood transfusion. I intend to speak about the nature of Chris' illness and how it has impacted our lives.
2. I have been Chris' partner for twenty-six years. I have one grown-up son from a previous relationship and two grandchildren. I am currently not employed and receive disability allowance.

3. I can confirm that I have chosen not to be legally represented and that I am happy for the Inquiry team to assist me in writing my statement. The inquiry team has explained anonymity and I do not require any information to be kept private.

Section 2. How Affected

4. Chris was infected with HCV following a blood transfusion on 17 November 1981 in Walton Hospital, Liverpool. Chris had been out the night before at a family event, and had been stabbed in an attempted mugging on his way home, which led to his admission to hospital. I did not know Chris at this time.
5. Chris was diagnosed with HCV following a visit to his asthma consultant, Dr Evans. Dr Evans asked Chris to have a routine blood test. We were both quite surprised that they needed a blood test for asthma but we did not question it.
6. The results came back a few weeks later and we found out Chris had HCV. Finding out that Chris had HCV was a real shock to us. I attended all of Chris's appointments in hospital with him. I believe it was Mr [GRO-D] and another doctor who gave Chris his initial diagnosis and asked Chris questions relating to how he could have been infected. Mr [GRO-D] asked if he had been self-injecting drugs or if he had any male sexual partners. Even the doctors assumed he was a drug user. Mr [GRO-D] did not react well when Chris asked a question. He would respond with words to the effect of, "who are you to ask?". It felt very much that it was the doctor who was in charge, and that there would be no talking back or posing questions, however important they might have been.
7. We were given very little information on how to deal with the infection. In terms of advice, the only thing we were told was that Chris should avoid having salt in food, so we avoided cooking with salt and buying

products with salt in it. There was no advice on drinking alcohol or transferring the infection. It wasn't until years later that Chris received more information on HCV.

8. When Chris was diagnosed, he didn't know how he was infected with HCV. Years later someone in a support group that Chris attended mentioned that an infection could occur following a blood transfusion. It suddenly clicked with Chris that it was the blood transfusion he was given back in 1981 that infected him. Until this point, I had no prior knowledge that Chris had received a blood transfusion and it was hard to believe that blood would be contaminated. After this realisation, Chris started to ask questions to his doctors, seek medical records and began campaigning on behalf of those infected. Chris asked his GP at the time, Dr GRO-D for his records and was told that they had all disappeared; all that was given to him was one piece of paper stating he'd had a transfusion.

Section 3. Other Infections

9. Apart from HCV, I am not aware of any other infections that Chris has been diagnosed with.

Section 4. Consent

10. I am not aware of any issues concerning Chris consenting for treatment or testing.

Section 5. Impact

Mental and Physical Health

11. Prior to his diagnosis, Chris took everything in his stride, was confident and happy; nothing phased him, he was your every-day man. When I think of him then and I think of him now, he is a different person

altogether. He is not the same man at all. The happy-go-lucky part of Chris is gone completely.

12. Just before Chris was diagnosed with HCV, he was lethargic and tired all the time and stopped making an effort. I started to blame myself and I thought I was the cause of his lack of love for life; I even asked him if he wanted me to leave. Chris would complain about his energy levels constantly, and he was losing weight to the point that I thought he was on a diet. I was frustrated with his behaviour and would tell him off for complaining all the time. It was only when he received his diagnosis that we realised his behaviour was a symptom of HCV.
13. Chris' attitude slowly shifted after his diagnosis; there was a slow change in character and mood. When he was diagnosed initially, we had little knowledge of what HCV was and its long-term implications, so his attitude stayed consistent for a while.
14. Chris became bad tempered and it felt like you had to walk on eggshells around him. At one point Chris stopped making an effort to wash and dress for the day. I tried to encourage him to wash and dress but he would just get angry. That was never like him; it was like he had no dignity left. I believe the diagnosis felt like an impending death sentence for him.
15. Chris also used to go fishing and take a lot of joy in it. Once diagnosed he would say that he could not be bothered to go out and was a less motivated to participate in social activities. It was only after quite some time that my friend's partner eventually got him to go fishing with him again.
16. Chris is still affected by the infection, whether he knows it or not. We were watching a television programme recently about a person who had received a heart transplant. It made him think of the healthy person

whose liver he had received and he broke down. The thought that someone had died so that he could be alive is a great weight on him.

17. My health has also declined because of the effects of Chris' infection. Mentally, Chris' illness has taken its toll on me. I have to remind myself that what has happened to Chris is not his or my fault; however sometimes I find myself getting upset when I think about my situation.

18. I don't recall ever being tested for HCV, although Chris tells me that I was and the result was negative.

Family

19. I believe Chris' mother's health deteriorated due to his illness. Chris' mother was severely depressed and had become bedbound in the years prior to her passing away. It was as if she felt responsible in some way for Chris' illness.

20. As a result of Chris' infection, my own son has turned against me. When he found out that Chris had HCV he stopped allowing me to see my grandchildren. My son then stopped visiting me altogether and has told us to stay away. My son is afraid of his children catching HCV and treats the infection like AIDS. Even now, despite all the information available about HCV, my son has said he does not want to hear from me again, "until I'm dead." It has broken my heart. To this day I have only met my granddaughter but I have no idea what my grandson looks like, which is extremely upsetting. I have never told Chris that I don't see my son and grandchildren because of my son's reaction to his infection. I have always just told Chris that we had a falling out over something else.

Stigma

21. When Chris started the Interferon treatment, he was told to dispose of his used needles at the local pharmacy. This experience was very stigmatising and degrading, as it required Chris to line-up with drug users. A friend of mine once saw Chris queuing at the pharmacy and she told me that he was a "smack-head". I told her he wasn't and never spoke to her again. Chris was only informed after complaining that he could deposit his used needles at the hospital.
22. People assumed the worst about Chris, but if they just took the time to talk to us about it we could have explained his situation. Physically Chris began to look different which did not help in people viewing him as a drug user. Chris went from being quite a well-built man who suddenly dropped dramatically in size to a 28-inch waist. Chris also went yellow, and then he went a grey-tone, it looked as though he had not been washed. Chris was so weak and poorly looking that I thought he had cancer as well.
23. Friends would see Chris and comment on his poorly state saying that he has AIDs. I would say that his state is a result of HCV to which they would reply in ignorance that they were the same thing. I believe if people had received information that we were not "unclean," that we were not involved with drug use or with HIV/AIDS, it would have been better handled.
24. I do not have many friends any more. I used to love life, going out and socialising. At times during Chris' illness I was afraid of leaving him alone because of the frame of mind he was in. My old friends were worried that you could catch HCV from a cup of tea, so stopped coming over. Those people are not my friends any more. In the late 1990s I had no social life at all. I actually felt as though I was as infected as Chris from the way people were treating me. It was as if I was a leper, so many people isolated themselves from me.

25. To this day, we have moved house about four times. Each time was to move away from the prejudice towards HCV. In one instance, one neighbour found out about Chris' infection and told the other neighbours. That was the end of my friendship group in that neighbourhood. Even today, the stigma just as bad. I never mention or tell anyone about Chris' past infection at all. It is a lonely life when people find out; it has stung us too many times.

Section 6. Treatment/Care/Support

26. Following his diagnosis, Chris was put on a drug called Interferon. I would assist him sometimes in administering the Interferon injections. The drugs created very unpleasant side effects; he had huge mood swings and his whole body broke out in a rash. Unfortunately the Interferon treatment did not work, and the treatment was stopped. At this time, Chris' mind-set was very poor and I was afraid that he was considering killing himself.

27. Before we were ever told by medical professionals that Chris should not drink alcohol it was our friend, who was a nurse, who explained to us that HCV affects the liver. It was years before we received any other information about care or transmission. It was only around 1999-2000 when doctors said that he could not drink alcohol. I remember it was around that time because we had one drink for the new millennium but stopped drinking from then on. From that point onwards, we were just drinking orange juice. I recall people asking why Chris was not drinking and then he had to explain to them about the HCV. It was always quite scary for him to tell people about the HCV.

28. After some time living with the infection, Chris was put on the transplant list. Doctors told us that Chris' liver had shrunk to the size of an orange and it would get even worse if nothing was done about it. I attended an interview with a doctor at the transplant clinic who told me

that if I was not prepared to fully look after Chris, they were not going to find a liver for him or be able to perform the operation.

29. At one point Chris had a terrible nosebleed, and we eventually found out he was haemorrhaging. He initially blamed me and got angry because he thought it was caused by cough syrup that I had bought for him. My friend Michelle, who was a nurse, was with us at the time and phoned an ambulance. Chris had to go to hospital and found out that he was haemorrhaging. As Chris' liver was shrinking, the veins were coming out of the skin and he was haemorrhaging badly. Bands were tied around the veins to stop the haemorrhaging but they would slip and he would bleed again. At this time, Chris was very depressed.

30. Not too long after he was put on the transplant list Chris received notification from the hospital in Birmingham that they had a liver for him. I went with Chris to Birmingham, but we were told that the liver had scarring so it could not be used. Two weeks later Chris received a call saying that they had another liver for him. Chris had the transplant and was in hospital for around 10-12 days. The liver treatment coordinators in Birmingham were very helpful and very easy to get in contact with and ask for assistance when I needed it. The doctors told us afterwards that if Chris had not had the transplant when he did, he would have only had less than a couple of months to live.

31. Following the transplant, Chris lost his temper over the smallest things. I called the unit at the hospital and asked about it. They said that this sometimes happens to people post transplant. To go from a death sentence to a new life was a hard shift in mind-set to adjust to. I asked why nobody warned me about the character change, but they said it only happens to some individuals, so it was not worth telling every person. It took around 3-4 months for Chris to calm down.

32. Chris has been to see a psychiatrist in the past. However, even now, regardless of the fact that he is no longer HCV positive Chris still has mood swings.

33. As Chris' partner, I have never been offered any psychological support in the past. I have been informed by the Inquiry that the British Red Cross are providing a counselling service for witnesses.

Section 7. Financial Assistance

34. Chris received money from the Skipton Fund. I did not help Chris with his application as he said he didn't require my assistance. Chris' application was rejected the first time he applied. Chris was upset and I thought he might get angry about it, but he just said that he would re-apply.

35. Chris re-applied to Skipton and was successful on the second time he applied. Chris was pleased as this provided a bit of financial assistance.

Section 8. Other Issues

36. Chris has been involved in campaigning concerning the contaminated blood scandal and has dedicated a significant amount of time to this cause.

Statement of Truth

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

Signed

GRO-C

Dated 29-3-2019

