

Witness Name: Robert **GRO-B**

Statement No.: WITN2258001

Exhibits: WITN2258002-013

Dated: 20th October 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF ROBERT **GRO-B**

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5th November 2018.

I, Robert **GRO-B**, will say as follows: -

Section 1. Introduction

1. My name is Robert **GRO-B** My date of birth is **GRO-C** 1967. My address is known to the Inquiry. I am currently married to my husband Caesar and we have been married for three months. I currently do not work, for reasons which I will go in to. I intend to talk about my hepatitis C and in particular, the nature of my illness, how the illness has affected me, the treatment I have received and the impact it has had on my life. I have been told that I suffer from hepatitis C, genotype 3.

Section 2. How Infected

2. I was born on the **GRO-C** where my parents had met. My father was a policeman who was stationed there, and my mother was from the islands. My father moved every 5 years because of the nature of his job. After I was three we moved to **GRO-C**, and five years later we moved to **GRO-C**, and finally we moved to **GRO-C** when I was 13. I have one older brother, **GRO-B** and a younger brother, **GRO-B**. I continue to be a patient of the haemophilia unit at Raigmore Hospital, Inverness.
3. I suffer from mild haemophilia A. When I was 9 years old or around about 10, **GRO-C**
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- GRO-C**. After this, we were all tested and it was discovered that I had haemophilia A. **GRO-C**
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- GRO-C**. My records suggest that I was first diagnosed in around May 1980 (when I was 12) and that my factor level was between 28% and 39%. I produce these records in evidence and refer to them as **WITN2258002**. I also produce a letter dated the 28th August 1980 and a letter dated the 20th May 1980 refer to them as **WITN2258003**.
4. I did not need any regular treatments and only really required it for dental work or any sort of operation. I was treated with Factor VIII initially on the day I was diagnosed; no reason was given for this. I note that in my records it suggests that I was treated with "Edinburgh Inter. Factor VIII" in February 1981 and 1982. There was a drug called TXA (tranexamic acid), which was a backup but I believe that we were always treated with factor VII. I think desmopressin may also have been used if we required surgery. Dr Iain Cook was responsible for our care. My **GRO-B** and I were both given Factor VIII concentrate at Raigmore Hospital, Inverness concentrate on the day of our diagnosis. We were both sat down and given factor VIII concentrate.

There was no discussion about where the factor treatment came from beyond the fact that we knew it came from human blood. I have asked my mother and there was no reference to any concern about the treatment. You just trusted doctors. My dad never forgave himself for what happened with me becoming infected. My dad was like me; a smart and inquisitive person. I had no bleed on the day I was diagnosed, but as I have said, I was given factor on that day.

5. My treatment was chosen by a Dr [GRO-D] at Raigmore Hospital until my teen years or maybe even my early or mid-20s. Dr [GRO-D] was very unpleasant. I remember one particular time that I had gone into hospital in the late 80s and I had lacerated the left tendon on the lower part of my ankle and had gone to casualty in Raigmore and the staff there gave me factor, and Dr [GRO-D] was outraged and screamed at me about being given factor. It seemed a very unreasonable and unjust response. He was an old school imperious sort of person. I said I never wanted him near me again. Dr [GRO-D] took over Dr Cook retired. Dr [GRO-D] was a foul and nasty person. Children were dealt with together with adults at Raigmore as the haematology centre was essentially a tiny room. I still believe that we do not have a supportive haemophilia unit at Raigmore Hospital. I feel that we are treated as secondary citizens. When I had my back operation, which I will come onto discuss later, I came up to Raigmore, but had got my medication already in Glasgow and was self-administering for two weeks, the factor. I tried to get in touch with Raigmore's centre and they simply weren't responsive at all. In 39 years I feel they have never been responsive.
6. In terms of when I received Factor VIII treatment, I can think of some examples when I think I may have required it. I had a tooth pulled when I was about 10 years old (around 1977) and I believe I required Factor VIII for this. I was terribly accident-prone when I was younger. My parents were simply told I had to be careful and not do anything risky. I broke my leg when I was about 14 years old (around 1981)

and think that I may have had Factor VIII then. I note that in my records on 13 September 1982, it was stated that my mild haemophilia had not caused me any bleeding problems by age 14/15. I produce this record in evidence and I refer to it as **WITN2258004**.. I broke my other leg when I was in my early 20s. Between the ages of 22 and 25 (1989 to 1992), there was one occasion where I was given Factor VIII in casualty at Raigmore. I recall that Dr **GRO-D** questioned why I was given Factor VIII. I think apart from my back operation, where I had to take factor treatment for two weeks, I only received factor treatment 4 or 5 times in my whole life.

7. As a child my records state that I did not usually require factor VIII I produce a record in my medical notes and I refer to it as **WITN2258005**. There is an entry in my records which states that as at 3 November 2007 (when I was 30) that I had had factor VIII once before. I produce this entry in evidence and refer to it as **WITN2258006**. I appear to have been invited to take part in a trial of high purity factor VIII in around December 1992. I produce this entry from my medical notes in evidence and refer to it as **WITN2258007**.
8. I had a spinal operation when I was 34. I had my operation at the Southern General but in order to monitor my haemophilia I was at Glasgow Royal Infirmary prior to and post-operation. Dr Lowe was my specialist for my blood at that point and he was a wonderful man. I believe I was on Factor VIII solidly, for two weeks. This would have been in roughly 2001. I believe when I have dental work, I am given things like desmopressin (DDAVP) or TXA.
9. I believe that although I was mild, **GRO-C** **GRO-C** I probably required factor treatment **GRO-C** because I was a bit of a daredevil when I was younger. I believe that **GRO-C** received the same factor products when **GRO-C** needed it. **GRO-C** was not infected. I believe that the advice **GRO-C** were given about treatment was much the same.

10. I note that in my medical records at the time of diagnosis some advice appears to have been given to my GP about hepatitis risk by Dr [GRO-D]. I produce the records relating to this and refer them as **WITN2258008**. I do not know if this advice was right at that time. I do not think any of it was ever passed to my parents. It shows at least that hepatitis was known to be linked to treatment for haemophilia to some extent.

Diagnosis with hepatitis C

11. In the January of the year of me being 31 (1999), I was flying to New Zealand. Prior to me going to New Zealand, I had cracked a tooth and went to the dental hospital in Glasgow. I did not mention that I was a haemophiliac and I bled a lot during a procedure. At that time, I was living in Glasgow so I had to register with Glasgow Royal Infirmary haemophilia centre. I was under the care of Professor [GRO-D] in terms of my haemophilia, and Dr [GRO-D] who I will go onto discuss, was a member of his staff. I did not have any medical treatment in Glasgow prior to that cracked tooth. When I went to the haematology unit, they did a clotting screen and gave me treatment in the form of DDAVP. I produce the letter to which this refers in evidence and I refer to it as **WITN2258009**. This was a horrible experience. This would have been a few weeks before I was due to fly, on around 8 March 1999. I note that in the letter of that date it states that I had a factor VIII level of 28 and that I was suitable for treatment with DDAVP. The letter states that I was to be called back to the hospital and that tests would be done for hepatitis infections. I was not aware that these tests were being done or whether I had ever been tested for hepatitis before.
12. I recall being called back in on around 9th April 1999 and speaking to a Dr [GRO-D]. I understood that she was a doctor although I note from the letter in my records of that date that she is described as a "clinical assistant". I produce this letter in evidence and refer to it as

WITN2258010. She told me that they had sent my bloods off and they discovered an anomaly. Dr [GRO-D] said that they thought I had HIV. I said to her that at that point, I had no time for emotional relationships or anything like that so I do not see how I could have had it. They double-checked and said it was non-A non-B hepatitis. I was aware that they were doing a whole screen of my blood, but not specifically about hepatitis C. I looked at her and she said it was a liver condition and she said I may die. At this point Dr [GRO-D] collapsed. I wanted to kick her to get her back up because it was such a shock that she had delivered that news and collapsed but she was unconscious. I was swept out by a nurse called Liz, who gave me a cigarette and said calm down a little bit because I was in a complete state. I had been given a diagnosis and no explanation as to how this had happened to me or what it would mean for me. I believe what ended up happening was that Dr [GRO-D] was an alcoholic who had had a kidney transplant and this is what caused her to collapse. A nurse called Liz at the hospital said that and that they had wanted to wait to tell me when I came back from New Zealand because they knew me personally. From what I have been told, Dr [GRO-D] was determined to tell me according to Liz... I do not know if I was given accurate information because of Dr [GRO-D] who had a hypoglycaemic com. Liz told me this. Liz also explained about me having hepatitis C, and that the worst case scenario would be that in years to come I may require a liver transplant. I note that none of this is contained in the letter of that date to Raigmore Hospital, informing them of my diagnosis. Also it does not mention that I was given any advice about the infection. I note the results of the testing done on me at that time and that these do not include a test for HIV. I produce the notes in relation to this in evidence and refer to them as **WITN2258011.**

13. It was clarified on the day that I did not have HIV according to those tests. I believe Liz said that my results had been double checked and it came back that I had hepatitis C. As no one discussed HIV with me at this point I made the natural assumption that I did not have this.

There was no leaflet given, and all the information I got was from Liz. I do feel that I am still traumatised by how this all happened.

14. At the time I was told of my diagnosis (1999) I was a key representative for ethnic minorities in Scotland. This job involved research, writing, as well as speaking to the government and armed forces and other responsibilities like that. This would involve speaking to people like the RAF, the managing directors of Hilton, as well as other multinational companies. This job included raising money for breaking down barriers for ethnic minorities in different professions. I created new programmes, such as apprenticeships. This was all very high pressure. We created the new deal for the government and launched this in Scotland. My life was certainly very focused on work at that point. I considered the work to be important. I would be out at events connected to my work all the time and I remember saying to one of my friends that I felt like I would go to the opening of packet of crisps.
15. The nurses told me a little bit more but I was given the impression by them there was not a lot of information known then about the disease. No haematology doctors spoke to me about this. It was all very informal. I was only told more about possible treatment when I sat down with a liver specialist at Glasgow Royal Infirmary. I believe it was the same day that I had a liver ultrasound. I do not recall the name of the person I spoke with but I would describe him as a horrible Chinese man. I was told to be careful but nothing was fully explained. I felt contagious, as if I was a carrier of the bubonic plague. I do recall them saying that if it got bad then I could have my liver replaced. I felt like a nuclear bomb had gone off in my head. I was used to high-pressure at work but I felt lost for a long time after. It certainly ruined my holiday to New Zealand. This would all have taken place in 1999.
16. In terms of the information given about cross contamination, it was generally just the standard; do not share toothbrushes, do not share

razors and have safe sex. They did not seem to be overly worried. I remember researching the disease online and there was very little information there. I felt the details were very sparse, even from the research I was able to do. Nothing existed which I could find from government type bodies or the NHS to help me understand the position I was in. I remember saying to the haematology unit at Glasgow Royal infirmary six months later that there needs to be a leaflet for people that have contracted hepatitis C. I was never given one. I feel there was a lack of clear answers due to what appeared to be a lack of knowledge at that time. It may be that more was known. It was not shared with me. It was a comedy of errors, especially when Dr [GRO-D] collapsed when I asked if I was going to die. I do not think there is anyone else who got their diagnosis that way. I did not feel reassured and just remember going into a state of silence.

Section 3. Other Infections

17. I was infected with hepatitis C through blood products. I note that I am on the high risk register for infection with CJD. I produce a letter to which this refers in evidence and refer to it as **WITN2258012**.

Section 4. Consent

18. As I say above, I was not and I do not believe that my parents were given information about the infection risks in the products given to me. I think that we were just given the products and trusted the doctors that they were the best and safest thing for me. When I was given concentrates I or my parents were not offered alternatives.
19. Due to my haemophilia I have had a great deal of blood tests over the years. I remember thinking, why had they not picked up on my hepatitis C? It was 1999 when I was told. They AIDS crisis was high

on the agenda and I believe the medical profession was quite up on all that. I am sure they must have been testing for things like hepatitis C. I remember having a few blood tests for different things. I never remember being told that I was being teste for viruses at any time, whether in Inverness or Glasgow. I do not believe that my parents were told about this either. I must have been tested for hepatitis C without my knowledge which means that someone must have known I was infected before I was, perhaps a long time before I was. I may have been tested for HIV by my haemophilia doctors though I am not aware that I have been.

20. I note from my records that I appear to have been tested for HTLV III in February 1985. I was not aware at the time that I was being tested for HTVL III and nor was I passed any literature about this; although my records state that I was given literature. I appear also to have been tested for hepatitis B. I note that my liver function was also tested and that the level was 74. I was not aware of any of this. I was 17 at that time. I note that interest appears to have been paid to my history of treatment with concentrates but other treatments I had received are not listed. The document showing that I had been tested for HTVLIII and that interest was paid to my previous history of treatment as **WITN2258013**.

Section 5. Impact

21. I do believe I had symptoms that can very much be put down to hepatitis C, although I did not realised it at the time. I always had lots of energy as a child. I recall when I was 9 years old, I arranged a Red Cross jumble sale and I was always doing something. I suffered frequent flu-like symptoms but my Mum also got the flu quite a lot. My Mum thought I was just like her in that regard. It is only now when you look back, you realise these may have been symptoms of my hepatitis C. I hate to think of the amount of times I was on erythromycin.

22. In my teen years, the flu-like symptoms got worse. I had flu a lot growing up and going through school. This did start getting to be a regular thing when I started working. I remember one day, I had driven to work and at one stage, I leant against a wall and just slipped down it. I remember my colleagues took me home.
23. By the time I reached my 20s, I felt lacklustre. I would get an awful flu and I felt like I was dying. I hated not being able to get up and go but I was suffering from fatigue at that time. I had terrible brain fog and had trouble concentrating. It is only in retrospect I fully realise this now. When I was 21 years old, I was supporting people who were 18 who had been abused and I was supporting those who had been affected by Lockerbie. I remember feeling like I was constantly pushing through a wall. I always felt tired and under immense pressure. In my youth I should have had more energy, Even at 22/23 I was a regular gym-goer and I used to have so much energy as child. I now believe the tiredness was a symptom of hepatitis C. I am not an unhappy person but I did start feeling lonely around that time. I was suffering aches and pains and went to my doctor a few times.
24. Between diagnosis and treatment no support was offered. There was no one to call. I told my very good friend Emma Munro, who was a nurse in Glasgow. I told her because I felt I had to tell someone. My friend Cilla in New Zealand had said that I should tell someone so that spurred me on to tell Emma. Emma came with me to my meeting with the liver specialist. I only told my family maybe 15 years later. I may have told my brothers earlier than the wider family. I felt to ashamed and like a leper. My friends and family were supportive.
25. Until I was 39 (2006), as far as I was aware, there was no treatment available for hepatitis C and there was nothing I could do about it. No options were given to me as far as treatment for my symptoms was concerned. I felt disgusted with the lack of treatment being made available prior to when I received it. I felt isolated and I felt that I had to close my emotional self off. I did not allow anyone to be near me. I

did not get tested regularly at the haemophilia centre either. They did a test a couple of times to check my liver levels but this was not a regular occurrence. When I moved back up north to [GRO-C] in 2001 I asked for my liver levels to be tested and I believe they were. I had gone up in the August of 2001 when I had my operation. Although I went back down to Glasgow it became apparent with my symptoms that I was not going to be able to return properly. I was suffering from exhaustion and I was tired all of the time. I was not asking about treatment at that point, but nor was I offered any information. When I was 39, I had Interferon and Ribavirin treatment. I injected myself every seventh day and had 400mg tablets to take four times a day. This treatment lasted for 6 months. I had my treatment when I was back up north in Inverness. I believe Prior to this, I had my back operation at Glasgow and then moved to [GRO-C] where I was treated at Raigmore Hospital again. I was treated by a Dr Zentler-Munro in the liver centre there. I believe that they thought there would be a high success rate for this treatment with my genome type. I recall there being a figure of perhaps a 60% success rate. The haematology team made no effort to get in touch with me.

26. I would describe the Interferon and Ribavirin treatment and my symptoms around it as foul. I had retrained as a hairdresser and completed my first year prior to treatment at Inverness College (now the University of the Highlands and Islands). I was doing an advanced course and I was around 7 or 8 months in at the time of the treatment. Because of the treatment, I had to stop the course because I was exhausted all time. I was vomiting all the time too and I really just had to stop. I remember looking at my tutor and I just broke down and had no control of my emotions. I felt supported by my teacher but not by anyone. When I explained to them my situation and that I was struggling they said it may be best to stop, so I did.
27. I went home and for the next 10 years, I have suffered from depression. I had no history of depression prior to my Interferon and

Ribavirin treatment. I am dealing with it to this day and 10 years in, I know that Interferon has caused this. I believe that I must have started feeling the symptoms of depression towards the end of treatment. Once my treatment was over I was hit with an inability to even get out of my bed with the depression. It was impossible to do anything. These symptoms had been ongoing through much of my treatment and I had thought I would get better once it was over, but this still impacts me now. I still have depression but it is more under control now. It sort of sits in the background but never goes away. I have tools that I use to manage it. I am now on the highest dosage of the antidepressant. I am currently on Trazadone. There are no side effects to this other than feeling sleeping, and I recently learned that this does make you hungry as I have put on some weight since being on it. Thankfully, I have a very good GP, Dr Jesus Ferrer. I was given a heads up that one side-effect of the Interferon and Ribavirin treatment can be depression by Dr Zentler-Munro. I was psychoanalysed before my treatment and there were no issues with my mood at all. I was considered the perfect candidate for the Interferon and Ribavirin treatment. I was told after my treatment that I had cleared the virus though I certainly have ongoing effects and continue to be monitored for the virus on a six monthly basis.

28. I feel that I am a completely different person since the Interferon and Ribavirin treatment. I am unable to work and I always worked before. I stopped working in 2001 and then went to college as I have mentioned. I was 37 when I went to college. I cannot guarantee with my depression that I can actually even make it into work at this point. I hate that I have to prove that I am unwell every two years. I have to have medicals through the DWP and it feels that I am constantly having to prove that I am as ill as I am. The medicals are a common cause of complaint. I have to go in and prove to them that I am depressed. Unemployment has never been common in my family, so this is all alien to me. I am on PIP and DLA.

29. I feel that first of all, I was given something unwittingly, through no fault of my own. I was not aware of the risk of infection. Neither were my parents. When I was told of my diagnosis and since there has been nothing there really in terms of support. This is all the NHS or the government's fault. If the government or the NHS screened the blood and managed everything properly, this would never have happened. Because of the government and NHS's fault, I cannot work anymore. It is very difficult to live with that feeling. It contributes to the depression which was triggered by the Interferon and Ribavirin treatment.
30. In terms of my social life, I feel that I push people away. I occasionally meet people but I never let anyone near me. This has been the way I have been from around the point of my diagnosis. I feel that I did not know enough about my condition and I could not find information either. I avoided emotional connections because I felt like a pariah or a leper. I felt like a contagious monster. I would not hug my family or kiss my nephew, who was a baby at the time. I never told anyone at the time.
31. One of my other friends is a nurse and I was in her house and washing dishes. I would have been around 39 when this happened. I cut my hand and her little girl tried to hug me. Her mother grabbed her away. My friend looked at me in horror and that ended our friendship. I had given her all the information I had about my infection and she had more knowledge than I did. I told her that I would never risk harming anyone, least of all a child. I told her that I did not care to come around anymore and that is something that is still true to this day. It's hard to describe how this made me feel. I felt like I had alien flesh. My friend recoiled so violently when it happened, which caused her child to become even more upset.
32. I told some of my friends in New Zealand when they said that I didn't seem right. My friend Cilla gave me more information in 1998 or 1999.

New Zealand seemed to be ahead of where the Brits were in terms of understanding what had caused this. She mentioned that she was working for Saudi Royals and she had to be tested as part of that job. I remember people talking about false positives. I felt that the NHS staff I deal with were very vague and noncommittal when I asked for information about what had caused this and what it would mean for me.

33. I left school with no qualifications because I could not concentrate. I now realise this inability to concentrate may have been part of the symptoms of hepatitis C. If I had been able to do better in school I would have liked to have gone on to be a nurse, although studying medicine and becoming a doctor was my dream. I would have loved to have been a doctor when I was younger, because I respected doctors so much. I can never understand why I was looking at the board at school and taking nothing in. I did not lack intelligence; I have the ability to break things down and understand how things work. I could take things apart and see how things worked and I remember I used to ask for extra maths work. By the time I got to the Academy in Inverness (secondary school), I had no interest. I believe this may have been brain fog because I found myself trying to figure things out but I was unable to focus. It hit me a lot more in adult life. As a child, I used to get in bother for daydreaming. I had epilepsy briefly in my teen years from 12 to 14, which went away after that. I think at the time we just put it down to maturing quickly and perhaps it was a hormone rush. Given that the liver affects 90% of hormones, I believe that my hepatitis C may be the cause.
34. This pattern extended into my working life and I developed tactics and coping mechanisms for this. I would focus on more than one thing when I could. It was a real struggle and everything was done in steps. I learned a lot from listening and being shown how to do things. It could still realise I was not doing things properly and sometimes it could take months to master things. I remember someone saying to

me that the day you stop learning is the day you die. I have done my very best but feel so very limited.

35. I live a lot in my head and have internal conversations. It is something I am working on with my psychologist because of my hormonal imbalance. This is a term I use for it simply as an expression. Interferon destroys serotonin, so I feel this will have had an impact. I am quite determined and I am generally working on techniques to try and get better. My husband will ask me what I am thinking about. Sometimes, it is just not much of anything.
36. As far as my ongoing employment options are concerned, I do believe that my condition has stifled my career ambitions considerably. I wanted to be a nurse at one stage. I feel that due to my experiences at school, I had no educational ability and of course I had left school without qualifications. I went to college and did a course to see if I could access the nursing profession but it turned out that course was not sufficient for entry to nursing. I was 21 at the time and I almost caused a riot when we discovered that there was a core module missing from the course that meant that it was not sufficient to access nursing. I was a calm quiet person before that. I wanted to take a vocational course as I thought that it would help me find a job and better myself. In the end, I worked damn hard to get to the top of my profession.
37. Had I been fit and able to continue with my career progression, would have loved to continue to represent people as I had been doing, this time in political life. Ultimately, I would have loved to try to become the MP for **GRO-C** in Glasgow. It was a hard pill to swallow that I could not continue with that ambition. I was becoming more fatigued and felt like I was hitting a wall. This would have been around the time that my back gave in as well, in 2001. I felt that with my symptoms of hepatitis C that a huge amount of options were being

taken away from me. I felt that going into politics was a natural progression as I was at the height of my career. I hardly ever went to my doctor and at the time I just assumed it was from overworking, but I now realise the extreme fatigue was likely a symptom of my hepatitis C. I could never understand why I felt like that when I was doing all the right things in terms of eating, resting and sleeping. I would only socialise if I was not working and there was nothing that was sufficient to justify how fatigued I felt at the time.

38. My role with the Ethnic Minorities Enterprise Centre (EMEC) was giving advice, support and interviews. Everything was coming through my desk. I was managing crises like those involving refugees. I was dealing with a lot of things and I was a patron of the Scottish Ballet. I had no financial worries and because of my condition, I lost everything. I could be earning 5 to 6 times what I am getting now through the Scottish Infected Blood Support Scheme. It was 20 years ago that I stopped working and the financial losses have been large. I had a good salary and position. I feel that I have possibly over £1 million in losses because of the consequences of my infection and the treatment for it.

Section 6. Treatment/Care/Support

39. In terms of barriers to treatment, I recall that three years ago, I was put under anaesthetic for a medical procedure. The anaesthetist said that I had hepatitis C. I said that I don't have it because I had been told that I had cleared of it. They said that I do have it. I said that some training should be done with them because of such conflicting attitudes as to whether I should be considered to be infected or not within the medical profession. I found their position to be ignorant and hurtful. The nurse spoke to me about my infection and I was pumped full of drugs and put under anaesthetic. There does not seem to be a

plan of action for how to deal with hepatitis C, even after it has been cleared.

40. Being told I still had it when I am cleared of it caused me huge distress. It was a nurse called Mo Kerr, who gave me my hepatitis treatment at that time. I spoke with her. I would never have gone and spoken to a nurse normally, but she was easy-going and approachable. She said it was absolute rubbish that I had been told I was still infected and that I was clear of the virus. I feel that medical professionals should know their job and been more informed about what being clear of the virus means.
41. I am clear of the virus according to the doctors and there is no sign of the virus in my blood in my six monthly test.
42. There was no real medical or psychological support available in looking at treatment options for my hepatitis C. Mo, the nurse I mentioned, was only one I could call. There was nothing offered and no support. Mo did her best but she was one nurse. She said that they really needed support for people in my situation. There was no support at any point. No one ever got in touch and there was no offer of support. Anything I have done in terms of finding counselling or psychological help has been done on my own and I have gone to my GP about my feelings of depression. This is not me at all; this is not the me I know. Not being able to get out of bed is not something I would have ever been like before. I could not understand at first. I do not know how I am still alive. The depression is so bad that I would have taken my life 100 times over. The only thing that stopped me is my nieces and nephews and the rest of my family. If I had not had my family, I would not be here. It is the very thought of writing them a letter that says that it is not their fault that means I have not gone down that path.

43. I feel that what has been offered has been entirely inadequate. It has been disgusting and disgraceful. There is still nothing to this day in relation to my hepatitis C. It is only now that I am getting counselling every fortnight. This is after 10 years of requesting this. My GP has fought for this for me. I have felt cast adrift. I asked Mo for support, she said there was nothing. She said that she really felt for me. I felt like a leper and it is all the NHS's fault.
44. I remember when going in for the Interferon treatment that there was hazard tape all over my medical sheet for all to see. I remember the other side of the page said CJD exposure and high-risk. I was sitting in a public place. I remember going to see my dentist and he was suddenly wearing gloves. I felt that it was handled as if I had some sort of disease. I feel like people put on gloves and masks more readily than they would have normally. I could not defend myself and I remember feeling a sense of isolation. Seeing my medical files out for everyone to see was disgusting. I was so depressed that I did not care. The next time I saw my file was after the Interferon treatment and I did not argue anything, I was so disappointed and angry. I had no energy to fight.

Section 7. Financial Assistance

45. I received nothing through the Caxton fund.
46. I remember with the Skipton fund that they contacted me and there was a form that had to be filled out. I received £20,000 in around 2004 or 2005. I have not received anything else from them since then. I received a subsequent payment of £30,000 through the Scottish Government.


47. With the Scottish Infected Blood Support Scheme, they know nothing about the subject they are dealing with. They have no clue. In October 2018, I started receiving my £18,000, which I receive over 12 months. I was only receiving £400 a month before that. The basic difficulty was trying to get on the appropriate band. Due to the fact that I didn't have significant liver problems, this caused issues. I have never had a liver biopsy or liver scan, but I did have an ultrasound on my liver. This means I do not qualify for the higher level of support. I do not feel the financial assistance has been anywhere near adequate, not at all, not even close.

Section 8. Other Issues

48. From a very young age those who were responsible for my haemophilia care have changed my life path through giving me infected blood. I have been fighting professionals for 10 years but I am still on the highest dose of medication I can get for depression. Any higher and I would have to be treated in a hospital.
49. I did give a statement to the Penrose Inquiry. The general consensus was that they didn't really hit any targets in that Inquiry. They did not answer the questions we had. We know that they gave us hepatitis C and we wanted some acknowledgement that the NHS caused this for people like me. I feel that the NHS to this day is not taking this seriously. Documents went missing and things like that. It is all seems so very irresponsible.

Statement of Truth

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

Signed  GRO-C

20/10/19 19

Dated