

ANONYMOUS

Witness Name: [GRO-B]

Statement No.: WITN2708001

Exhibits: 0

Dated: 4 September 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF [GRO-B]

Section 1: Introduction

1. My name is [GRO-B] My date of Birth is [GRO-B] 1973. My address is known to the Inquiry.
2. I live in [GRO-B] with my wife [GRO-B] and my two children, [GRO-B]
[GRO-B]
3. I am making this statement because my mother-in-law [GRO-B: M] contracted hepatitis C through receiving a blood transfusion. She has now passed away.

Section 2: How Affected

4. [M] was a very caring, fun person; I lived with [GRO-B] and [M] before [GRO-B] and I got our house. She was a happy go lucky person, she was very unselfish; she always put her kids and her grandkids before herself. She always made sure they were alright before she was. As far as mother-in-laws go, she was more a mother to me, rather than a mother in law, she looked after

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me during the time I lived with her. She always helped me out if I needed a little bit of money and she always had my tea ready when I got home from work. She was a very caring person.

5. [M] went from a fun loving happy person to a person who was constantly in and out of hospital. You could tell the moving about from one person to another was hugely affecting her home life. She went from being so happy to being and looking really sad. In her defence she outwardly made it look like she was not sad, she put a front on as best she could.
6. [M] needed a valve operation because her body was not pumping blood properly; she had it in 1988 at the Sheffield Northern General Hospital. During that operation she was transfused with blood. Many years later we found out that the reason for her years of ill-health was that she had contracted hepatitis c. My understanding is that she was told that the blood transfusion was the only way that she could have become infected with this virus. At this point in time, we do not know whether this has been written in her records but we believe that it must be.
7. [M] sadly passed away in 2014; she was in Rotherham District General Hospital at the time. She had been taken off her warfarin medication that she had taken for many years, in order to assist with her heart problems. The nurse told my sister-in-law [GRO-B] that she died from a blood clot but this was not put onto her death certificate. The family does not understand why she was taken off the warfarin as she needed to breathe and to live. We believe it was a dangerous thing to do.
8. I remember her passing quite well. We went to Rotherham District General Hospital, we were told by a family member to get there as quickly as possible. I dropped my wife and [M]'s grandson [GRO-B] off while I parked the car. I remember walking through into the ward and I saw [M] lying on the bed. I thought she was asleep. [GRO-B] ([M]'s son) shook his head and I knew

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what that meant; I could not believe it. It traumatised me because I had never seen a dead person before.

9. I was not with [M] when she was diagnosed with hepatitis C. I remember that [GRO-B] told me that her mum was diagnosed with hepatitis C. I remember there being a confusion around it and HIV, we did not know what anything about hepatitis C. I cannot really remember the detail. I remember TV shows which dealt with blood borne viruses. It made me realise the serious nature of what she had. I am a positive thinker, and I also knew what a strong person [M] was. She was a real fighter. I felt that she would be alright, she would fight it and get through but in the end, she did not.

Section 5: Impact

10. To me, [M] went from a lady with bags of energy to a lady with no energy. She became annoyed with herself because slowly over time she became physically less able to do the things she loved to do. She used to still do these things but it became more and more difficult for her.
11. [M] went from a fun loving happy person to a person who was constantly in and out of hospital. You could tell the moving about from one hospital to another was hugely affecting her home life and eventually she went from being so happy to being and looking really sad. In her defence she always outwardly made it look like she was not sad as she put a front on as best she could.
12. I always knew she was in pain, when you walked through the door you could see her with her head in her hands. It looked like she was asleep but that is when I knew she was physically in pain. She kept describing her sight as being foggy; she would clutch her head in her hands and squint her eyes and scrunch her face in pain. I remember her hand used to lock, she used to do something weird with her hand. You could tell she was in pain because she would have extreme mood swings and she could become nasty or abrupt, especially with her husband. I felt that she was suffering and was being constantly worn down

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by the whole thing. When she got stressed or angry or annoyed she could hear her heart valve ticking more quickly.

13. The hepatitis C affected her emotionally too when she thought about not seeing her children growing up. [M] would not allow herself to cry often and when she did you knew it was serious. I saw [M] cry when she saw the impact of how she looked on [GRO-B] and [GRO-B]
14. I think that [M]'s leukaemia was as a result of the treatment for hepatitis . [M] passed in 2014; she carried the hepatitis C virus/ infection for 26 years. I have explained above how I believe it affected her.
15. I saw [M]'s condition slowly deteriorate; both physically and mentally. I do not know what was related to the hepatitis C and what was related to the treatment. When she was at home she looked normal enough, but when we visited her in the hospital sometimes she looked totally unrecognisable. It was like her appearance changed. Whether they pumped her with more drugs in there I do not know, but she looked sicker in hospital. [M] was always a big lady, but over time she looked and became more and more frail. During her last year, her weight plummeted, she became skin and bone and she looked old. Her hair became really thin. Her face colour looked grey.
16. I can remember when we went on holiday together, to Skegness in a caravan. [M] had all of her family around her for that holiday. This was a massive boost for her, because of what she was going through. She always used to say that she was "stuck in these four walls", which really got her down. The holiday was really enjoyable and one of the positive things that sticks in my mind. She bought a mobility scooter to get around. She used to give the kids a ride on it and tried to make a joke of it to make her feel better.
17. As far as her social life goes, [M] was always the centre of attraction. All of the family used to go to her. She was the heart of the family. She got a lot

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of comfort out of that. Towards the end she couldn't cope with people coming; with their germs and their coughing because she would always get sick. I think she also did not want people to see her decline, to see her how ill she had become.

18. I know that [M] used to confide in [GRO-B] a lot, I think it was because [GRO-B] and I have a stable family life. She also used to rely on me for a lot, like lifts here and there and for advice with letters. I know that over time her dependency on [GRO-B] increased, and the topic of her conversations became more and more difficult. She used to mention taking her life but it was always said in jest and she would undo what she said by saying she could never leave the children. She used to say a lot "I would not wish this life on anyone".
19. I am quite a strong and positive person. I tried to not let it affect me. It was the people around me that I worried for. I always needed to make sure that I was there to provide "a shoulder". As far as the children are concerned, I needed to make sure that [GRO-B] in particular (because of her age), knew that [M] would always be her nan and that she was a strong person. Sometimes, when [GRO-B] got upset and when she worried about her mum dying I tried to reassure her. I used to tell her that we would get through it together.
20. It was [GRO-B] that I always had a concern for. Not so much [GRO-B] because he was too young. [GRO-B] is sensitive and I was aware of needing to make sure that no-one thought badly of her nan. She learned about hepatitis C at school and got teased about it, some of the children looked at her funny and asked her if her nan was a druggie. I had to make sure that she knew the truth about it and could talk about it in a positive way.
21. [M] had to leave her job as a cleaner as she could not work.

Section 6: Treatment/Care/Support

22. I am not aware of [M] having faced difficulties or obstacles obtaining treatment, care and support.
23. Counselling or psychological support was not made available to me or to [M] in consequence of what happened.

Section 7: Financial Assistance

24. [M] did not receive financial assistance from any scheme; all she received was a disability badge. She did everything herself even down to buying her own mobility scooter, and she was not well off. She used to always panic and worry about money.
25. The family has not received any financial from any Trusts or Funds.

Section 8: Other Issues

26. As a family we need closure; we need peace. We need to know why so many mistakes were made; mistakes that were made by people from whom you expect the best care. The treatment that [M] got was not what you would expect from the NHS. [M] wanted to do something about this when she was alive. She got to the point where she was not well enough to do something; she was also very worried about what it might cost to do something legally. She would have liked to have fought for answers herself. If something does come of this, [M] would be happy that we did this for her.

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Statement of Truth

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

SIGNED

GRO-B

DATED

4/9/2019