Witness Name: Andrew MOWAT
Statement No. WITN0665001
Exhibit: WITN0665002
Dated: 22 / Aug / 2022

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INFECTED BLOOD INQUIRY

WRITTEN WITNESS STATEMENT
OF
ANDREW MOWAT

I provide this statement in response to a request under Rule 9 of the Inquiry Rules, 2006, dated 19th August, 2019.

I, Andrew Mowat, will say as follows:-

Section One - Introduction

1. My full name is Andrew Mowat and I was born on GRO-C 1965. I work and live overseas at an address that is known to the Infected Blood Inquiry. I am a married man with a son and am employed as an architect. Whereas I now live and work abroad, I was born and brought up in Aberdeen, Scotland.

2. Using this statement, I intend to tell the Infected Blood Inquiry of my infection with Hepatitis C (also referred to as Hep' C and / or HcV within this statement). In particular the nature of this infection and how it has affected my family and I, and the treatment I have received.

Section Two - How Infected

3. I was born with the hereditary condition, Von Willebrand's Disease, but this was not immediately apparent and remained undiagnosed until I was about five or six years old. I had bled a bit more than normal after having a tooth extracted at the dentist. I attended hospital to have my adenoids removed, and the doctors carried out tests. My grandfather had always told us that he was *"a bleeder"*; the hospital doctor undertook a check on the family history, which was followed up by blood tests, and in or around 1970 the Aberdeen Royal Infirmary diagnosed that I had Von Willebrand's.

4. Fortunately, my condition was regarded as having been mild, and as such I didn't really experience any significant health issues as a child, I just learned to live with it as I got older, and with the treatment I required which involved my having to use blood products, but only ever as and when necessary, not as a matter of course.

5. On one occasion of my requiring treatment as a child, I was given some Cryoprecipitate as a means of addressing a bleed, but I suffered an allergic reaction to it, and from that point onwards, I only ever received the blood product Factor VIII.

6. At fifteen, I suffered a serious accident whilst at school, breaking several bones in one of my arms and had to be taken to the Aberdeen Royal Infirmary (ARI).I was admitted through their Accident and Emergency Department (A&E), where I was initially treated, before being taken into theatre for surgery. I had been bleeding heavily from the injury and in theatre some metal plates had to be inserted into my arm.

7. Having been admitted as an emergency case, I remained an inpatient of the hospital for six weeks and had the arm immobilised within a plaster cast for eleven.

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8. I can remember having been given eight units of Factor VIII each day I was in hospital, and then perhaps every other day once I'd been released, but had to return to the hospital to receive it for a further five weeks.

9. Throughout this period, my treatment was overseen by the Consultant Haematologist, Dr Audrey Dawson. To the best of my knowledge and understanding, post-surgery I was placed on a Haematology Ward where the Factor VIII was administered to me in a side-room of that ward.

10. I do not recall where the Factor VIII I was given had come from, and probably didn't ask myself, as I would have had no cause to do so, but it was provided through a drip and fed intravenously into me. After six weeks I was released, but only on the strict proviso that I return every other day to be given Factor VIII.

11. At sixteen years of age, I was given some more Factor VIII as a means of facilitating the surgical removal of the plates which had been put in my arm once the breaks had healed. I can also remember having been given some more, when again I had to go to the ARI for an abscess to be drained in around 1985.

12. This had all happened in my mid-teens, and it wasn't for a further nineteen years that I knew that something was wrong. By then I was in my mid-thirties. I had long-since left home, had married and was living with my wife, was working in Aberdeen as an architect, and was seeking to progress my career.

13. Completely out of the blue, I received a letter from the Haematology Department of the ARI who asked me to make an appointment to see them. The letter suggested that I may have Hep' C, so I made an appointment to visit their clinic.

14. I can remember going to the ARI and meeting their then new head of haematology (who had replaced Dr Dawson), who sat me down and went through what looked like a pile of old medical records before telling me that I had Hepatitis C.

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15. I do not now remember if he told me *how* I had become infected with this blood borne virus, but believe that I was told that it had been the result of a 'bad blood product' and that it happened when my broken arm had been treated. I recall; being told that they had used a batch of bad blood at that time, but that now they knew me to have been infected, they would start monitoring my health and do 'as much as they could' to look after me.

16. I was told that from that point in time onwards, they wanted to see me in clinic each month, to assess where I was with the infection and what they may have been able to do to assist me, but there was no specific treatment plan offered and I do not think that they knew what they could do to rid me of the disease.

17. In advance of the consultation I harboured a lot of negative thoughts as to my future and that of my wife and I together, as having made the appointment I then researched HcV, using the internet and read as much as I could about it, none of which offered much optimism. I had known nothing of the ailment myself prior to receiving the letter, so I'd gone to what I thought to be the best point of reference, the internet, to see what may have bene known, but with the benefit of hindsight this may not have been wise as internet content can often be quite scary, which is how I found it.

18. Following the consultation, I can remember having been given a couple of pamphlets, but they weren't very detailed or informative and I'd actually learned more through the web.

19. Not too long after my first consultation, I was offered an experimental HcV treatment through the hospital, which I accepted. I was then placed on a course of treatment using Interferon and a second medication (the name of which I can now no longer recall).

Section Three - Other Infections

20. Hepatitis C aside, I do not believe that I have been given any other infections as a result of my having been given contaminated blood and / or contaminated blood products by the National Health Service (NHS).

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Section Four - Consent

21. Following my initial appointment through which I learned of the infection, upon entering into the course of treatment I received full disclosure, in other words I was told what I had, what its potential impact could be, how the hospital intended to treat it using the combination of drugs mentioned above (i.e. Interferon and another), and what the side effects of the treatment could be. I gave my consent for this treatment.

22. At the time of my having become infected, I was still a child and many of the issues of consent with which the Inquiry may be interested would have been addressed by my parents, not by me.

23. From my first diagnosis until the time of my having broken my arm, there wasn't a lot of choice available to clinicians treating someone with Von Willebrand's Disease – it was either Cryoprecipitate or Factor VIII.

24. When I broke my arm, my mother went to the hospital accompanied by my grandfather, and whereas I do not know and / or cannot recall what may have been said at the time, have no reason to believe that there were any deficiencies in the information provided when my mother would have been asked to give consent for my treatment, including the use of Factor VIII.

Section Five - Impact

25. Leading into my diagnosis as having Hepatitis C, I had been experiencing bouts of general lethargy and tiredness, some depression, mood swings whereby I could become quite irritable and some skin irritation. I had not linked theses separate symptoms together, and taking each on its own, hadn't appreciated that anything serious may have been going on.

26. I am fortunate in so much that I didn't contract HIV, and that ARI, have done everything they can to minimise any further health issues as a result of having become infected.

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27. I started on the combination therapy within six months of the initial diagnosis. I had to use Interferon and the other drug over a protracted period with the hospital checking on my progress as I did so. At first, during there were monthly check-ups, then three-monthly, and then every six months, with blood having been taken and tested in between (every fortnight).

28. Monitoring revealed that this 'first round' of Hepatitis C treatment had served to stabilise my condition, but there was no overall improvement and the Hep' C virus remained.

29. Whereas the result was disappointing and left me feeling a little down, I was nevertheless encouraged by the fact that whereas initially there had been no apparent 'hope,' the doctors were prepared to try treating me with an experimental therapy and always appeared to have been looking to assist me as best as they could.

30. Towards the end of 2008, I commenced a second course of treatment, this time using Ribavirin, which I was to take for some six months.

31. At the same time, in or around late 2008, I moved to the Middle East having been offered a job in Abu Dhabi.

32. The Ribavirin treatment came in tablet form along with a pen-style syringe with which I self-administered another drug into my thigh or waist. The hospital told and showed me what I had to do, and we then discussed my moving abroad whilst on the course.

33. Fortunately, the hospital didn't have any issues with my moving overseas, but told me that I would need to be monitored by them every three months and that this would involve a monthly blood test – again to assess how the treatment was progressing. I was reassured that all of the monitoring could take place whilst I was away, using local facilities and maintaining contact with the hospital remotely if necessary – but I returned every three months.

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34. I was given a six-month course of treatment, which I took with me, together with all of the necessary information I required and stuck rigidly to the treatment plan I had been given.

35. This second course of treatment passed better than the first, and I was cleared of Hepatitis C infection. All of the clinicians involved in my care told me that it had gone far better than they had anticipated.

36. All the same, despite having been declared 'clear' of Hep' C, I still had to return to the hospital for monitoring, which I did every three months over the following five years. These included scrutiny of my liver and its function as although HcV had gone, apparently it may have had a damaging legacy for my liver.

37. I was told, during the course of these consultations, that there was some evidence of severe liver damage, (not cirrhosis), but that as a precautionary measure I needed to be careful and keep any alcohol intake to a minimum.

38. Following five years of monitoring, I no longer had to attend the hospital, and was effectively discharged as an Hepatitis C / Liver Function patient, with the proviso that were I to present with any symptoms, I could return.

39. I had to submit to blood testing in 2019, and this revealed what appears to have been a trace of Hep' C, but no more than a 'marker' of it having once been present, not an *active* trace.

40. My infected status or former infected status has not had an adverse impact as regards my receiving treatment for anything else, and I found that having told my dentist, there was no impediment to him treating me.

41. Unfortunately I have been refused a work permit in Saudi Arabia, where I was about to take up a new position, as I have HcV markers in my blood.

42. In so far as my private, family and social life has been concerned, I have cut down on my drinking alcoholic drinks (since being informed that I had HcV),

albeit that I have not stopped completely, but my intake is negligible and I try to live a healthy life.

43. My wife and I were careful when it came to sexual contact, as a direct result of HcV, GRO-C GRO-C which wasn't very nice for her, and which caused us both a lot of worry at the time.

44. Our son was born in 2001, GRO-C GRO-C something which again came as a great relief following a good deal of concern.

45. My wife and I understood, from the time of my diagnosis, that my infection had had absolutely nothing to do with me or how I had conducted myself, and had been something I had contracted through absolutely no fault of my own. As such, we didn't have to endure the difficult, challenging conversations some families may have experienced as its origins were never a concern and we just tried to carry on with our lives as best as we could.

46. Our lives together in the Middle East are good, there have been no long term effects from the infection, we eat healthily, have a good social life and I can even exercise anything up to five times a week in the gym.

47. I always had the impression, rightly or wrongly, that the personnel of the ARI were very supportive and had tried to look after me to the best of their ability. If a new treatment came along, such as the experimental one I tried, I was offered it. I do not believe that I was ever denied treatment just because I had HcV.

48. Looking back, I have to say that it was probably quite beneficial to have been so young when I became infected, and that not having been diagnosed for many years, hadn't realised that I had Hep' C, although the signs were starting to appear leading into the diagnosis. Not knowing that I had it, I had nothing to worry about, so I didn't.

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49. When I was subsequently diagnosed and then treated, I met with a haematologist and other clinical staff of the ARI and never once felt that there had ever been any attempt to conceal things from me, we always had good, open discussions and the general outcome of treatment, has been good.

Section Six - Treatment / Care / Support

50. As previously stated, I have never been denied access to any form of treatment as a result of my having been infected with Hepatitis C.

Section Seven - Financial Assistance

51. A scheme was created to provide financial assistance to those people in Scotland who had become infected with HIV and / or HcV as a result of them having been given contaminated blood and / or contaminated blood products. I cannot now remember its name, but believe it to have been something like The Macfarlane Trust.

52. The scheme operated a two-stage payment system. I applied and received a Stage One payment but apparently didn't qualify for the second stage as, according to my Haematologist, this was intended for patients who were terminally ill who were believed to only had a year to live.

53. I didn't challenge the Stage Two payment having been denied me, and can only say that I found the 'form filling' aspect of the application process relatively simple. It was a simple case of filling in the forms, and sending them in, which I did.

54. I had learned of the scheme through the ARI, and it was staff there who encouraged me to apply as they believed I qualified for a payment in light of the manner in which I had become infected – which they knew better than I, as they had called me in to tell me of the infection in the first place.

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55. There may have been some strings attached to the application, but I cannot now remember what they were or how I dealt with them.

Section Eight - Other

56. I am unrepresented and have no desire to be legally represented whilst providing a statement to The Infected Blood Inquiry.

57. Many years have now passed since the time of the events with which the Inquiry is concerned, and over the years my memory of these has diminished. As a result, I find that I cannot now provide as much information as may otherwise have been possible.

58. However, I have previously made a witness statement to The Penrose Inquiry (under their reference PI118SC). This was made much nearer the time of the events with which we are now concerned and at a time when I had access to other information (from relatives) and documents (medical record extracts) to assist me. This is a clearer account and should be read in conjunction with this statement, for clarity. I now produce this article as my Documentary Exhibit WITN0665002.

59. I made a statement to The Penrose Inquiry because I felt that it was the right thing to do, and do so now for the same reason – I believe that it is important for people such as me to tell others of what happened, so that the appropriate bodies may learn from these experiences and ensure that it does not happen again.

Statement Of Truth

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

Signed: GRO-C

Dated: 23·08·2022.