

ANONYMOUS

Witness Name: **GRO-B**

Statement No: WITN1309001

Exhibits: 0

Dated: October 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF **GRO-B**

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

Section 1. Introduction

1. My name is **GRO-B** My date of birth is the **GRO-B** 1951 and I live at **GRO-B**
GRO-B I divorced my husband **GRO-B**
GRO-B: H although we maintained good contact and support right up until
H's death in 1992 and in 2003 I retired as a primary school teacher after 25 years in
the profession.
2. This witness statement is made in relation to **H** who passed away on the **GRO-B**
1996 at the age of 51 as a result of being infected with Human Immunodeficiency Virus
(HIV) through contaminated blood products.
3. This witness statement has been prepared without the benefit of access to **H**'s full
medical records.

Section 2. How affected

4. **H** was born in India on the **GRO-B** 1945 and was diagnosed at birth with severe
Haemophilia; however, I am not certain of which type. There is a history of haemophilia
in **H**'s family and his younger brother **GRO-B** also had it.

5. [H] and his family moved to the UK when he was about 10 or 11 years old in around 1955. He received treatment from blood products from 1955 until he died. Initially he received treatment from the Haemophilia Centre at the [GRO-B] Hospital in Oxford. He was later able to be treated at home by myself, as I was trained how to give [H] his treatment.
6. [H] and I met in 1969 and we married in 1972. Our only son, [GRO-B] was born 1978.
7. When we met [H] was being treated at the Lewisham Hospital. When we got married we moved to Northamptonshire and he received treatment from the [GRO-B] Hospital in Oxford, where he was receiving treatment until he died.
8. As far as I am aware I do not believe that [H] or his parents were given any information or advice as to the potential risk of infection when treated with blood products.
9. [H] also had very serious mental health issues and suffered from paranoid schizophrenia. We had a turbulent relationship and he would often live with his mother, as I was particularly concerned about the welfare of [GRO-B]. However, he visited [GRO-B] and me when he felt well, but [H] wasn't allowed to see [GRO-B] on his own.
10. I believe [H] was diagnosed with HIV as a result of being treated with contaminated blood products by the [GRO-B] Hospital in September 1985 but I don't know the details as he was living with his mother at the time.
16. I do not know if [H] was given any information about HIV and how to manage it or how the infection was spread but when [H] visited me and [GRO-B] after we found out about his HIV he thought it was like having cancer.
17. If I recall correctly, he might have also been infected with Hepatitis, as his liver was damaged; however, I am not sure.

Section 3. Other Infections

19. I am not aware of any other infections that [H] might have contracted as a result of being treated with contaminated blood products.

Section 4. Consent

20. I do not know whether [H] was treated or tested without his consent or without being given adequate or full information or for the purposes of research.

Section 5. Impact

21. I was informed of his diagnosis with HIV by his brother [GRO-B: B] in September 1985. I had been in Ireland as my father had passed away. When I returned to England [B] telephoned me to tell me of [H]'s diagnosis, it was a massive shock and all a blur. There was public awareness at the time of HIV, it was very scary and I was terrified. [GRO-B] was about 7 years old at the time. All I could think about was having [GRO-B] tested, so I took him to the hospital, but he would not let the doctors test him because he was scared of the needle.
22. I was working as a primary school teacher in [GRO-B] near [GRO-B] at the time and felt it appropriate to tell the head teacher of [H]'s diagnosis particularly as I was being tested for the virus at the time. He told me he didn't want me back in the school, I was devastated, I felt like a leper. People thought that only drug addicts and gay people were affected by HIV.
23. I spoke to the doctor at the [GRO-B] Hospital where I was being tested for HIV and he spoke to the head teacher. Following the conversation the head teacher came round to my home and agreed that I could remain in my post. However, I did not return until the results of the tests were known. I had two weeks off work waiting on the test result, it was very stressful but the test proved negative. Thereafter, I was tested every three months for a year, fortunately each one was negative. That was the way it was at that time.
24. When [B] was diagnosed with HIV [H] went completely off the rails and when [B] died on the [GRO-B] 1993 it was very hard for [H]. He didn't believe that anything would happen to him or [B]. However for the following three years [H] was very stable, he was the most normal I had seen him, he was not hearing voices or talking nonsense.

25. [H] had not been able to work for many years due to his severe mental illness. But he had a few different jobs including being a chef and an orderly at the [GRO-B] Hospital in [GRO-B]. He suffered from arthritis in his legs from his bleeds and his mental issues kept him back.
26. [H] lost a lot of weight and he became very weak. As time went on, he was getting thinner and thinner, he suffered from ear infections, which were sore and became scabby, and he had breathing problems. He left lemons everywhere in his flat and drank the juice in the belief that it was good for his chest and it would improve his breathing.
27. [H]'s condition was kept private. The only people who knew about his condition were my best friend (who was very supportive) and my sister. My sister advised me not to tell my mother due to the stigma attached to HIV. I had a relationship in 1989 which didn't work but I had to tell him of [H]'s condition. As a result of that relationship I have a son [GRO-B] who lives in England, he is 28 years old. I nearly lost him too in 2009 as he nearly died in a car crash. He was badly injured and is awaiting further surgery on his trachea which was damaged.
28. There was an incident involving [GRO-B] when he was a baby [B] and [H] came to my house [H] had a toothbrush in the living room and [GRO-B] put it in his mouth. I was petrified; I panicked, I completely freaked out. The perception through the media was that HIV could be transmitted via tooth brushes. They were scary dark days.
29. When [H] was close to the end of life he moved to a flat in Nottingham which was financed by some money he received from somewhere. The flat was really lovely; there were really expensive furnishings and an enormous television. When I went there later the television had been smashed as had the washing machine [H] had just destroyed them. There were complaints about [H]'s behaviour and the Police came to my door and ask me to go and see him. I wrote to the Council requesting help for him but I never received a reply. Consequently [H] was given a flat in Oxford near the [GRO-B] hospital.

30. I do not think that [H] had any treatment when he first found out about being HIV. I am not certain as to whether he was offered any at the beginning. There is a possibility that he was offered it but refused it, as he was very paranoid about things.
31. However, when he was in the [GRO-B] Hospital towards the end of his life, he was treated with anti-retroviral medication. He was admitted to the hospital in August and he passed away in the [GRO-B] Hospital on the [GRO-B] 1996. [GRO-B] and I were with him the evening before.
32. When [H] passed away a doctor asked [GRO-B] and I whether [H]'s body could be taken and used for research purposes. [GRO-B] was 18 at the time. It was dreadful, the doctor had such a cold manner it was so upsetting, we obviously did not agree to the request.
33. [GRO-B] and I stayed at [H]'s flat and [GRO-B] found two of [H]'s diaries in which he had written a lot of disturbing and dark entries. I have never read them; however, [GRO-B] did and it terrified him. He was deeply affected. [GRO-B] had his own issues and he was scared that he was going to be like his father. [H] had caused trouble in the area where we lived and [GRO-B] did not want to be associated with him. [GRO-B] wanted to change his name because of it. Despite receiving counselling, [GRO-B] died by suicide in [GRO-B] 2004 he was only 26 years old.
34. I had counselling for 3 years after [H] died as well as after [GRO-B] died.
35. I also had a lot of time off work due to depression and panic attacks as a result I retired from work in 2003 and I moved to Ireland where I now live. In 2003/4 I had a nervous breakdown. I didn't want to go to hospital, although I was advised to. I was not treated at the hospital as an inpatient. My work colleagues picked up [GRO-B] and brought his home from school daily. I had more counselling from a psychiatrist and was placed on medication.
36. I still have help now, my sister and my neighbour are very good to me, and I do not find it easy and am still on medication.

Section 6. Treatment/Care/Support

37. [H] and [B] had a case worker, Mary, from the Haemophilia Centre at the [GRO-B] Hospital, she visited them every couple of months. I believe she spoke to them and did blood tests, as we were all living too far away and we had no transport to travel there. Mary also travelled to my home to take blood every three months for a year.

Section 7. Financial Assistance

38. [H] received about £60,000 being the married man's allowance from the 1990s litigation; we were not living together at the time. He had to sign a waiver form to say he would not take the claim any further.
39. I was worried that because of his mental condition he would waste the money and I sought advice from a Catholic Solicitor. I was advised to apply for a divorce even though neither [H] nor I wanted one. But I was told it was the only way [GRO-B] and I would benefit from the money [H] was paid. I received £15,000.
40. I also received a payment of around £1,000 towards [H]'s funeral expenses after he passed away. I have received no other money from any of the Trusts or Funds.

Section 8. Other Issues

41. I am glad that this Inquiry is taking place and that there is far better treatment available for the various infections. However, I believe it is important for the government to understand the devastation on everybody affected. I also hope that nothing like this will happen ever again.

Anonymity, Disclosure and Redaction

57. I confirm I do wish to have anonymity and that I understand the statement will be published and disclosed as part of the Inquiry.
58. I do not wish to be called to give oral evidence.

Statement of Truth

I believe that the facts stated in this Witness Statement are true.

Signed:

GRO-B

GRO-B

Dated: October 2019