

Witness Name: Christine White

Statement No.: WITN0905001

Exhibits: Nil

Dated: 8th June 2019

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF CHRISTINE WHITE

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 21st March 2019.

I, Christine White, will say as follows: -

Section 1. Introduction

1. My name is Christine White. My date of birth is GRO-C 1956 and my address is known to the Inquiry. I am married to Martyn White, my second husband and we have been married for 29 years. We have a 27-year-old son. My husband and I are both retired. I intend to speak about my first husband, Michael Salmon, he died in 1988 aged 37 of an AIDS related illness. I will speak about his life with haemophilia and how he came to be infected with HIV. In particular, the nature of his illness, how the illness affected him, the treatment received and the impact it had on him, our lives together and how it continues to affect me to this day.
2. Michael Salmon was born GRO-C 1950 and died GRO-C 1988.

Section 2. How Affected

3. Michael and I met in a pub in Portsmouth through a friend of a friend. We started dating and while I knew he had haemophilia it didn't seem to matter to me. He had told me about this soon after we had met.
4. We were married on the 6th December 1975, I was 19 years old and Michael was 6 years older than me.
5. Michael suffered from severe haemophilia A, so we couldn't do normal everyday things and attending hospital regularly was just part of our lives.
6. When we got married we didn't go abroad for our honeymoon, we stayed locally because we didn't want be somewhere where Michael wasn't able to get the help if he had a bleed.
7. After we were married, we rented a flat and our main goal was to keep Michael at work. He worked as an optical technician and when he first started his job his mum used to go to his work whenever he had a bleed and take over and help in any way she could, so that he wouldn't lose his job. We did everything we could to ensure he could continue working.
8. Not long after getting married, we began discussing how we could manage having a family, given Michael's haemophilia. We saw a consultant at St Mary's Hospital in Portsmouth who invited students, all in white coats, to listen in on our discussion. They had never had to discuss a situation like ours before. We wanted to know whether if I became pregnant with a girl, we would be able to terminate the pregnancy? We wanted to be certain of having a baby boy because a girl could be a carrier of haemophilia and may continue the condition down the family line. Michael had an older brother who died as a toddler before Michael was born. It wasn't until Michael's mother was pregnant

with him, that they found out that his brother had haemophilia. Michael also had a younger brother, who died but he was not a haemophiliac.

9. During the appointment with the consultant he questioned whether we would personally, emotionally be able to terminate the pregnancy, even if we had permission. In the end, we never got around to having to make that decision as we had to move with our jobs. We just wanted to know what our options were and have it on our records that a consultant had given us permission so that if we one day decided to have a baby, wherever we ended up, we would be able to terminate a pregnancy under those circumstances.
10. Michael managed his haemophilia by wearing bandages on both of his knees and if he thought there was anything wrong he would go straight to St Mary's Hospital in Portsmouth. If we went out for the day and Michael had walked too much his knees joints would bleed, or if he did something that would cause a bleed he would phone me from work and say we have to go to hospital. If we went for two to three weeks without Michael needing to go into hospital that was considered good.
11. Going to the hospital was always stressful and often Michael had to explain what was wrong with him and prove to the medical staff that he needed Factor VIII. While they often kept him at hospital to monitor him, on many occasions we would have to go back more than once because they didn't think he needed Factor VIII. They would do things such as measuring the size of his neck to see if he had any swelling in order to determine whether he needed Factor VIII.
12. Around 1981/82 he attended Nuffield Hospital in Oxford and had his knee cap removed due to damage caused by constant bleeding into the joint. He stayed in hospital for this twice, for a month each time. The operation was a success.
13. Around May 1980 it had become possible for Michael to self-administer Factor VIII at home. This was a major change to our lives and our

lifestyle. We were able to move around more freely and go further afield with more confidence, as Michael was able to take Factor VIII when he needed it and without having to justify why he needed it to medical staff. If our friends were going out somewhere we were able to go with them and not worry about the possibility of spending hours in hospital if Michael had a bleed.

14. Due to Michael's job changing, we moved to a rented flat in GRO-C and his treatment was moved to Lord Mayor Treloar College Medical Centre in Alton. We met other people who had Haemophilia and on a Friday night, we would meet for social and light sports and we became friends who supported each other.
15. Michael and I decided to try and buy a house near to Treloar's, so we could attend easily when Michael needed to. We did everything up to and including completion on a house but unfortunately the day we collected the keys Michael was made redundant (December 1985) and we therefore put the house straight back on the market and made arrangements to stay in our rented flat. The house was eventually sold and Michael managed to find another job, this time in Southampton. We stayed in the flat in GRO-C and travelled to Southampton for work for a while.
16. I kept a record of Michael's Factor VIII usage. I have a notebook with a handwritten contemporaneous record that starts on the 12th May 1980, the date that I believe is when Michael started using Factor VIII at home.
17. There are entries for each time he had Factor VIII, over 52 pages with on average six entries on each page. Some of them are from multiple bottles and there are batch numbers in most cases. I will retain these as I have done, since starting nearly 40 years ago, should the Inquiry want to see them.
18. On the 19th February 1983 we were at a family wedding in Portsmouth and Michael had an accident with his thumb and the lid of a camera case.

This caused an internal bleed and we were advised by the hospital to give him 100% cover. This means that he should take three to four bottles of Factor VIII in order to give him 100% clotting, which is the amount someone who doesn't suffer from haemophilia would have.

19. The bleed in Michael's thumb as a result of the camera case accident, continued for another month. It was during this period that Treloar's Medical Centre, who we used to get our Factor VIII supplies from, called us to recall batches that they had issued Michael with. However, because of the amount of Factor VIII that we had used as a result of the camera case incident, we had none left to give back. Treloar's would not give us a reason as to why the Factor VIII was being recalled. It was heart sinking.
20. The batches that I've recorded during this period came from HL2945, HLA3014 and HLB3042. That was the only time Treloar's had ever recalled a batch and for this reason I believe that these batches could be the Factor VIII that infected Michael.
21. It was around this time during the mid '80's, just when self-administering Michael's Factor VIII was changing our lives for the better, that we sat down to watch a Panorama documentary on television; it was an investigative programme that had found that blood products being used in the UK had been contaminated by the AIDS virus. We had read that it was a programme about blood but we watched in horror when they mentioned Factor VIII and the fact that it could be contaminated, it 'stopped us dead'. While we didn't know a lot about AIDS back then, it was before the infamous falling 'AIDS tombstone' public information ads, I never thought it was something that we were ever going to have to deal with. Michael and I were also under the impression that the Factor VIII he was receiving had all been screened. We were devastated and seriously worried after watching the programme. It also took the new found feeling of freedom and optimism away from us, knocking us back further than before Michael started getting his own Factor VIII.

22. We contacted Treloar the next day to ask about this programme and its contents. They had little or no information to give to us, but this was the start of our lives drastically changing.
23. At the time of watching the Panorama programme Michael's health was quite good. We had his bleeds under control and we were moving on with our lives like any normal family. This revelation shattered our lives.
24. Following the programme, we were left wondering whether Michael had been infected. Treloar's had asked for that batch to be recalled and had said it was no longer a problem and that the next batch they gave us would be fine. However, we knew that Michael had used the whole of those three batches and so there was a very strong chance that if they were being withdrawn because they were contaminated, he could be infected.
25. It seemed to me that once the problem with the blood supplies had been established, all of a sudden Michael was needing to have blood tests on a regular basis. This hadn't happened before because clearly, taking blood from a haemophiliac has its own problems. So, we associated the increase in blood tests with the fact that there was a problem with the blood supply.
26. Subsequently, in October 1984 after having blood tests at Treloar's, Michael was diagnosed as being HIV positive.
27. We used to go to Treloar's every Friday to pick up Factor VIII supplies so I believe we were told about Michael being HIV positive during one of those visits. We weren't provided with any information or advice on how to manage Michael's HIV or what it would be like living with HIV. I remember both of us knowing that Michael was going to be ill, but we didn't understand just how ill he would get or that he was going to pick up illnesses all the time due to his now defective immune system.

28. Minimal information was given to us about the risks of others being infected, other than being told Michael could pass it on through sexual contact and that we should use condoms.
29. No information or advice was given to either of us about the risk of being exposed to an infection through Factor VIII.
30. After Michael was diagnosed with HIV, in late 1986 he caught pneumonia and was in Frimley hospital for two 2 weeks and then in January 1987 he contracted mumps.
31. Outside of medical visits, we continued to try and live our lives as best we could. We could not tell anyone what was happening because we were afraid of what they may say and how they would react.
32. Our personal lives changed, there was no more intimacy, we just became good friends, as Michael was afraid of passing the HIV to me.
33. During this time, we both tried to keep working to pay the mortgage. Michael was really struggling with his health and we attended Treloar Medical Centre more often. From around January to May 1988 he suffered from Thrush, weight loss, Diarrhoea, Chest infections, fatigue and eventually in April 1988 an appointment was made at Royal South Hants hospital, Southampton for tests. He had come out in a rash and no-one knew what it was.
34. Eventually Michael was admitted into Southampton General Hospital, in the infectious diseases unit. This was towards the end of April 1988. His eye sight was starting to fail and it turned out that he had Encephalitis.
35. All this time I felt like I could not talk to anyone. I attended work in the mornings while he was in hospital and went to sit with him in the afternoons. Michael was gradually shutting down, as he could not fight the virus. It was clear that there was a timeline in place for Michael's

longevity. He couldn't eat himself and I was told that if he didn't have 'food' given to him via a tube, he would have about two weeks left.

36. The doctors offered to operate on Michael's brain to remove the infection and said they could give him another six months. Bearing in mind he was a severe haemophiliac, I didn't think it was a good idea and decided with Michael that his risk of bleeding was too high.
37. The pressure of having to make the decisions on his treatment is still haunting me to this day, did I make the right decisions? Every day I was watching him deteriorate, he was bleeding from his kidneys and I asked for Factor VIII to be administered, but was told I would have to bring in his own Factor VIII if this was to be done. This was carried out, which made me feel better but he died a few days later.
38. In the end, the Encephalitis is what killed him on the 15th May 1980, just over two weeks after he had first been admitted.
39. During these last two weeks, on the 3rd of May 1988 Michael had phoned me from the hospital, while I was at work to tell me he had just been diagnosed with 'full blown AIDS.' The medical staff had told Michael this news during one morning, while he had been alone. Michael phoned me to tell me. When I found out I was at work and I went to pieces. I did not know what to do with myself, I could not talk to anyone.
40. I couldn't stop crying but I didn't feel like I could tell any of my colleagues because of the stigma associated with AIDS. I thought they might not want to work with me if they knew. I ended up telling my manager and he couldn't believe it. He was ok with it though and reacted quite well.
41. Due to the HIV affecting Michael's brain, he couldn't eat or drink properly while he was in hospital. I took him home for a Sunday dinner but he asked to be taken back to the hospital as he wasn't feeling well. His muscles then became very rigid and he was given morphine to relax so

they could remove his clothes. He then fell into a coma. During this period, he looked emaciated and he would lie there doing nothing. We were lucky as both of our parents were brilliant, however I wouldn't wish that upon anyone. Having someone with AIDS is stressful beyond belief.

42. The Funeral Directors phoned to say I could not see Michael due to his condition. He had had an autopsy on his brain to help the doctors try and find out what had happened. I am not sure whether it was the AIDS appearance or the look of him after the surgery. The autopsy did show that his brain was very much destroyed (see para 54).
43. On Michael's death certificate it notes that he was killed by (A) Encephalitis and (B) Haemophilia. Next to the 'A' is an 'I'. I believe this denotes that his death was AIDS related, without it being explicitly recorded on his certificate. People who need to know will understand from that, that it was an AIDS related death.
44. People who I worked with and most friends never knew what had happened. I spoke to the GP about how I was going to cope. I had lost a lot of weight and was I was struggling.
45. The impact of Michael's illness continued long after his death. After Martyn and I were married and we decided to buy a house together, the insurance company wanted to know about my AIDS test before they would give us mortgage insurance. After Martyn spoke to them a number of times the insurance company eventually gave us cover for the mortgage.
46. The next big problem was when I became pregnant with my son. I was told I had to be clear for 5 years from AIDS and so the GP had to inform the hospital of my situation and so added in handwriting on my letter to the maternity hospital, that I had had contact with a person who had died of AIDS. I really thought I could start a new life, but after having had the baby, a nurse asked about the handwritten note.

47. I am still living with this secret from a lot of people. Obviously my family and close friends know, but I am still scared to mention it.

Section 3. Other Infections

48. In 1971 Michael was diagnosed with Hepatitis B when he was 21 years old. I don't know where he got it from or the status of that particular infection, as it was before I knew him. I don't know whether it was treated, eradicated or whether he still had it when he died.

Section 4. Consent

49. As far as I am aware, Michael was never treated or tested without his or our knowledge or consent.

Section 5. Impact

50. Michael's HIV diagnosis had a large impact on both of our lives. When we found out about his HIV we were planning to start a family. After the diagnosis Michael shut down and we never spoke about having children again as he knew there was a danger he could pass on his infection. Our relationship became a lot less intimate and it ended up more like a friendship. Michael became very quiet and he would worry about infecting me. He felt like he had been given a death sentence.

51. Inevitably, Michael's HIV diagnosis impacted me too. When I needed a blood test and they found out my husband had HIV they would treat me differently.

52. Only those immediate members of our families knew of Michael's true diagnosis and within the family there was a mixture of levels of supportiveness. Michael's GRO-D took it badly. He worked in a post office and somebody had said something to him and they ended up

getting into an argument about it. He never came to see Michael in the hospital and my [GRO-D] never came either. They wanted to remember Michael as they knew him, not how he looked towards the end. Both of our parents were incredibly supportive though and they were never worried about going in to see Michael.

53. We never told anyone else of Michael's diagnosis, not even close neighbours in the street where we lived, including Martyn who later became my husband. They came to Michael's funeral but they didn't know what he had died of, believing it to have been a cancer. We kept it a secret because of the stigma and we were frightened of being hated if people found out.

54. In January 1989, 18 months after Michael had died, I met Martyn. Martyn and I have been married for almost 29 years now. For a long time, I never told Martyn about Michael's true diagnosis. As time went on and we began to speak about marriage I finally told him. I decided to have an AIDS test done as well so that I could inform Martyn I was not infected and we could eliminate the risk from our marriage.

55. After Michael passed away, I was asked if for research purposes, bearing in mind that Michael was an early AIDS death, whether they could perform a post mortem examination to better understand how AIDS impacts the body. I allowed them to look at Michael's brain and I received a letter shortly afterwards telling me that they wouldn't be sure of the exact cause of death for about three months. They were able to tell me that his brain was very much destroyed, presumably by a viral infection. I point this out merely because we never heard any more about his post mortem examination, or anything else they found.

56. In 1991 when I was pregnant with my son Alex, I had two tests for AIDS. Dr [GRO-D] was away on annual leave so when I saw a nurse for one of the blood tests she became very worried saying she couldn't do an AIDS test on me as I had to be spoken to about the ramifications. I became very upset and told her she could use three pairs of gloves if it

would make her feel more comfortable. In the end she made even more of a scene by saying she wouldn't use any gloves at all. Dr GRO-D later apologised and conceded that he should have spoken to the staff before he had left. It had got to a point where I stopped mentioning AIDS as I didn't want to face that reaction again.

57. Another time during my pregnancy, I went to see Dr GRO-D who apologised but informed me that because I had lived with someone who had died of AIDS within the last five years, he would have to disclose this information to the Princess Anne Hospital where I was giving birth. He said he would hand write the note at the top of the letter so it did not have to be typed into my medical records, but so that they could take necessary precautions during my labour. After I had given birth, when Martyn was not in the room, a nurse had noticed the handwritten note and proceeded to ask me a lot of questions about the AIDS diagnosis. Even during the birth of my child, I still wasn't able to get away from it. It was very unprofessional, I thought.

58. My relationship with Michael and the problems we both faced as a result of his diagnosis had an effect on other parts of my life too. GRO-C

GRO-C
GRO-C
GRO-C
GRO-C

GRO-C	To this day I am on antidepressants and I take another drug because of my nervous and anxious stomach.
-------	--

59. Before Michael's HIV diagnosis we used to go to the pub and we were quite social, but after his diagnosis we withdrew. We made friends with other people who would also go to Treloar's as they were going through the same experiences as us. There was a commonality that we could not get elsewhere, it was more comfortable. We had social nights on a Friday where we would play volleyball with a soft ball, use the pool and we would have such a laugh. Since Michael's death however, I have

withdrawn from our group of friends within the Treloar's community because I couldn't face continuing like that, you can only take so much. I am aware of a couple of friends from within the group who have died due to contaminated blood and others who were infected with the Hepatitis C virus.

60. Every time I seem to take a step forward with my life, something comes and snaps back at me. Before all of this, I was excited if something was happening, but now I'm always too worried about the 'worst-case scenario'. I am angry at the world and I will always wonder why. My mum told me after Michael died that I wouldn't be able to get close to people anymore because I'm too worried something bad will happen to them. You don't want to get close to people after something like that happens because you think they will die.

Section 6. Treatment/Care/Support

61. After relocating in April or May 1987, we had to register with a General Practice (GP). We went to Testvale Surgery in Totton and I was upset with how we had previously been treated when registering for medical treatment and services, so I told the GP, Dr [GRO-D] that Michael had HIV and I asked very directly whether he wanted us at his practice? Dr [GRO-D] who was a senior partner of the practice had to check with the other partners before stating that they would look after us. I don't mean to criticise Dr [GRO-D], I was shocked at his negative reaction and that he had to speak to the other partners, however over the years he has been a very supportive and good doctor to our family.

62. When Michael was ill, he was treated differently in hospital because he was seen as contaminated. We were put in an isolated room that made it feel like we were in quarantine and made you feel like you had a really bad disease.

63. On one instance, I visited Michael in hospital and I was told by a nurse that I couldn't see him and I'd have to go home as they still had more tests to do on him. I became so upset and sat in the corridor at the hospital and cried out of frustration.
64. During Michael's final days in hospital, I noticed that his urine in his catheter bag was red. I asked the nurse to give him Factor VIII as it was clear he had a bleed in one of his kidneys. I was told that Michael was too ill and he wasn't going to last much longer so if I wanted to give him Factor VIII I would have to get our own Factor VIII from home. Once I gave him the Factor VIII his bleed stopped, however he died a few days later. Was it really that they didn't want to 'waste' their own factor VIII on a dying patient?
65. After Michael was diagnosed with HIV we found that he could not go to our original dentist and had to attend Southampton Hospital Dental Unit for check-ups and treatment.
66. At no point has counselling or psychological support ever been offered to either Michael or me when he was alive. After he had died I was offered general bereavement counselling but this was useless because I didn't want anyone to know what Michael had died from, so I refused it. I was never offered counselling directly related to dealing with Michael's illnesses that were a result of the contaminated Factor VIII.

Section 7. Financial Assistance

67. Subsequent to Michael's death in May 1988, I became part of a group litigation and Pannone Napier Solicitors acted for me and numerous other parties, similarly affected.
68. In 1989 the legal proceedings stopped when the government agreed to make payments to those concerned via The MacFarlane Trust. This amounted to a number of payments being made to me. These payments

equated to £32,000, plus £2,350 reimbursement of fees that I had paid to Pannone Napier Solicitors.

69. I had no knowledge of any other Trusts of Funds and I have no idea if financial assistance was or is available to me.

Section 8. Other Issues

70. After you read this, you will understand why I would like Michael to be known to the Inquiry and I would like to know how this mistake by the Health Authority happened and why they did not inform us as soon as it was known that there was a problem with the Factor VIII.

71. Recalling all of this and looking at notes, has made me realise that I am not over this tragedy and I am still hiding from it and I am not strong enough to stand up in public to put my case forward.

72. I would like someone to explain exactly what happened. I would like the Inquiry to uncover when the Health Authority knew about the contaminated blood, why they decided not to do anything about it and what they've done since to put it right. I want the government to know how many people they've killed.

Statement of Truth

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

Signed _____

GRO-C

Dated 8/6/19