

# ANONYMOUS

Witness Name **GRO-B**

Statement No: WITN1576001

Exhibits: 0

Dated: January 2020

## INFECTED BLOOD INQUIRY

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FIRST WRITTEN STATEMENT OF **GRO-B**

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

### Section 1. Introduction

1. My name is **GRO-B** and I was born on **GRO-B** I live at **GRO-B**

2. I make this statement as an affected father of my late son, **GRO-B:S** **S** who was born on **GRO-B** and passed away on **GRO-B** **GRO-B** aged only 29, as a result of receiving contaminated Factor VIII concentrates.

3. My late son was infected with HIV, Hepatitis C and Hepatitis B via his use of contaminated Factor VIII concentrates.

4. This witness statement has been prepared without the benefit of access to my late son's medical records.

### Section 2. How Affected

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5. My late son had Haemophilia A for which he was treated with Factor VIII concentrates.
6. My late son attended Lord Mayor Treloar College (LMTC) in Alton, Hampshire. After this he was treated at the Haemophilia Centre at Basingstoke Hospital, Hampshire.
7. His consultants were Dr Anthony Aronstam and Dr M Wassef.
8. I believe that my late son was infected with Hepatitis B in or around 1980 with his first positive test being in 1981 which I believe was when he was told of this infection.
9. I believe that my late son was infected with Hepatitis C (Non-A Non-B Hepatitis [NANB] as it was then known) in or around 1987 with his first positive test being in 1987/1988 which was also when he was told of this infection.
10. I believe that my late son was infected with HIV in or around 1983, which was the date of his first positive test and when he was told of the infection. I confirm that the medical professionals did not really inform us about anything; we were kept in the dark.

### **Section 3. Other Infections**

11. As far as I am aware my late son was not infected with or exposed to any other infections.

### **Section 4. Consent**

12. I do not know whether my late son was tested for infections without the medical professionals telling us what they were doing. I can confirm that the medical professionals did not talk to me.

**Section 5. Impact**

13. My late son suffered terribly as a result of being infected with HIV, Hepatitis C and Hepatitis B through no fault of his own.
14. He lost his job and his social life and he could not drive due to the medication he had to take for the three infections.
15. He suffered from extreme tiredness and lethargy. He was also physically very weak.
16. He suffered with depression and he was very angry about what had happened to him. He also split up with his partner as a result of the infections.
17. I have been very upset and hurt about the cards my son was dealt. I suffered with very bad depression as a result of what happened to my son.

**Section 6. Treatment/care/support**

18. Neither my son nor any member of my family was offered any counselling or psychological support.

**Section 7. Financial Assistance**

19. I cannot recall many details about this but I believe that my son had support from the Macfarlane Trust and the Skipton Fund.

**Section 8. Other Issues**

20. I want this Inquiry to find out what really happened and who was to blame. I want the truth and justice for s
21. I also want justice for everyone who lost their lives.

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## Anonymity

22. I wish to apply for anonymity and I do not wish to give oral evidence to the Inquiry.

## Statement of Truth

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

Signed

GRO-B

Dated... 4-1-2020