Witness Name: Christine Linda Woolliscroft
Statement No: WITN1616001
Exhibits: WITN1616002 – WITN1616010
Dated: March 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF CHRISTINE LINDA WOOLLISCROFT

I, Christine Linda Woolliscroft will say as follows:-

Section 1. Introduction

1. My name is Christine Linda Woolliscroft, known as Linda, of GRO-C GRO-C Wolverhampton GRO-C. I was born on GRO-C 1947. My only son Michael was born on GRO-C 1969 but he was not in touch with his biological father. I met my husband Paul Woolliscroft in 1976 when my son was 7 years old. We are both retired, although my husband retired early due to ill health and I am a full-time carer for him.

2. I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 in relation to my late son Michael Anthony Price. He sadly passed away on GRO-C 1995 at only 25 years of age and I attached two photographs of him before he lost weight at Exhibit WITN1616002.

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

Section 2. How infected

4. Michael was around 3 years old when he was diagnosed with severe Haemophilia A with a baseline Factor VIII level of 0% iu/ml. He kept getting bruises and swollen knees, but since we had no history of haemophilia in the family, the doctor never suspected it and instead prescribed Vitamin C. One day we saw a new family doctor for his swollen knee. The GP wrote me a letter and referred Michael to the Royal Hospital, Wolverhampton. As the Royal did not specialise in haemophilia, Michael was sent to the Birmingham Children's Hospital (BCH) where he was treated by Dr Franklin and Dr Hill until he was 17 years old, when he moved to the Queen Elizabeth Hospital, Birmingham under Dr Jonathan Wilde.

5. My son was administered Cryoprecipitate until he was roughly 7 years old. Anytime Michael had a bleed or hurt himself we would have to take him to hospital. Shortly after he turned 7, I went into hospital to learn how to administer the injections and Michael switched to home treatment. After that I believe that they changed the products to British Factor VIII Concentrate. According to the medical report dated 26 May 1990 Exhibited at WITN1616003 he was first given Factor VIII on 23 May 1977.

6. One day when Michael was approximately 13 years old, we were attending the Haemophilia Centre, when Sister Marian informed us that due to a short supply of British Concentrate in the UK they would be changing the blood administered to Factor VIII products which had come from the USA. Details of the Armour, NHS (including Scottish) and Alpha blood products that he received are included in Exhibit WITN1616003.

7. I believe about two years after having received the American Concentrate, in or around 1984 a special meeting was held at the BCH. I attended this meeting without Michael, taking my sister with me. I recall it was Dr Hill who ran the meeting in a big hall that was full of a mixture of doctors and parents of children who were being treated at the BCH. Dr Hill delivered a presentation detailing information about HIV. He went into depth saying that the outbreak was caused because the blood had been obtained from Americans who were on drugs or were otherwise diseased. It was never

explained why this was allowed to happen. The meeting was directed at letting the parents and patients know that some people may be at risk of infection. They said if you want to know whether your child was infected, to ask. This was the first time I had ever heard of HIV or AIDS so it was very worrying. They told us to look out for certain symptoms.

8. I recognised some of the symptoms and related them back to my son's physical conditions. Not long after the meeting, in or around December 1984, Michael began experiencing Glandular Fever. I was worried so on my next visit to the hospital, about a month after the meeting had taken place; I asked Sister Marion specifically if my son was alright. My son was 15 at the time. She told me not to worry about him as he was fine. Relying on that advice, for the next year and a half I thought we had nothing to worry about.

9. Some time just before Michael turned 17 I received a letter from Dr Hill stating that he wanted to discuss moving Michael to the adult hospital, Queen Elizabeth Hospital Birmingham. Michael should have moved when he turned 16 and no one ever explained why the move had never happened. We went to the meeting sure that it was about the move but instead at the end of the meeting Dr Hill dropped the bombshell that my son had HIV. My stomach just fell. We went to the car where my husband was waiting and we just sat there in shock. Nobody spoke. We were silent in the car ride home. We could not believe what we had been told.

10. I felt and still feel as though I had been lied to. Even if he was not lying, I cannot understand why, after that meeting and knowing the risks associated, they continued to give my son the American Concentrate. Furthermore, I wonder whether Dr Hill had known when I had initially asked if my son was okay, if so, why was I not informed and why no tests were performed. The first test was in 1986.

11. In the meeting, Dr Hill was very matter of fact about it. I believe that the news could have been conveyed with more empathy and compassion, especially considering we were in a children's hospital and my son was only 17 years old. Michael was not told about the risks or how to manage the infection. He

was not even told what HIV was. Michael had been dating his first girlfriend so I would imagine that it was very important to tell him about the risks. Michael had a girlfriend when he was 15, so the danger was not only to my son, but also to her and putting them both at risk because no information was unfair. Instead, we had to learn everything ourselves from what we saw on TV news.

12. I do believe that my son and I should have been told earlier. At the 1984 meeting, Dr Hill told us of the risks and that we should ask our doctor if our child have been infected. That is exactly what I did, yet two years later was when they finally decided to tell my son.

13. Before being moved on to American concentrate, no information or adequate advice was given to us about the risk of possibly contracting HIV. Had I known of this risk, I would have never consented to the change of blood products and would have insisted that he receive British Concentrate. In fact, I would have rather had the Cryoprecipitate. I assumed that they would never give my son something that would put him that largely at risk. The American blood continued being administered and I thought he was receiving it in good faith.

14. Michael passed away not knowing that he ever had Hepatitis C. I was not told either. I would never have known if I had not accidentally bumped into a young Indian lady doctor, who had treated Michael, in the Queen Elizabeth Hospital car park a few weeks after he had passed away. The doctor said how sorry she was to hear about Michael and then let it slip out by saying "*Of course he had Hep C as well didn't he*" This was another big shock to me. With all his symptoms how could we possibly have known? This was confirmed by the medical records attached to the stage one Skipton Fund application which included a Hepatitis C test report Exhibited at WITN1616004.

15. I do not know how or when Michael was infected with Hepatitis B. With all the other medical complications, it is very difficult for me to say. I also attach a document confirming that Michael was Hepatitis A positive, which is Exhibited at WITN1616005.

Section 3. Other Infections

16. Michael suffered from many medical complications. I believe the HIV made Michael more susceptible to disease. In the end he contracted meningitis and pneumonia.

Section 4. Consent

17. I believe that Michael was treated and tested without his knowledge and consent, and without being given adequate or full information. At the time when I had to give consent on Michael's behalf, I would say the same. Up until Michael learnt how to drive in around April 1990, I accompanied him on his hospital visits.

18. About a year and half after Michael was told that he had HIV, in or around July 1999, there had been a spread of influenza so he went to hospital to check he was okay. He was told that there was a new drug on the market called Azido Thymidine (AZT). Michael had the AZT which was a trial drug at the time; which he was put on even though he was not unwell, therefore, I believe that he was tested for the purposes of research.

Section 5. Impact of the Infection

19. I have retained correspondence which my son had sent McGrath & Co Solicitors who were dealing with the 1991 litigation. I refer to Exhibit WITN1616006. In this correspondence, Michael, then aged 20 described his physical and mental state. He stated that he suffered from fevers and was ill for 3 weeks with the flu for which he had been prescribed antibiotics by his GP. He experienced night sweats, diarrhoea, rashes which spread all over his body and swollen glands. He believed the rashes were his body reacting to antibiotics.

20. Michael described that when Dr Hill informed him about the HIV on 23 October 1986, he wanted to fight it. He was left in shock. He had a girlfriend at 15, but would not be able to be intimate with her. He described that he could not tell her that he had HIV as he feared his relationship would be affected, but he was not happy to hide this as he felt he was misleading her. He felt bitter about what happened as he felt like he missed out on a lot. In his letter he stated that he had contemplated suicide. Things did not work out with his first girlfriend, and he met another girl when he was about 22 years old. They even had their own place together for a couple of years but they had to be very careful.

21. Michael became incredibly poorly towards the later years of his life. Michael's other health conditions included Pancreatitis requiring admission to hospital for about a month around August and September 1994, attacks of diarrhoea, memory loss especially regarding names, weight loss, sickness, loss of appetite, fatigue and generally feeling unwell all the time. When he was at the Queen Elizabeth Hospital, his head swelled up to about twice the normal size.

22. In early 1995, unfortunately his girlfriend left him when he started getting really poorly and my son returned home to live with me. Unfortunately, he was not with me very long but he told me that he was glad to be back with me at home. His symptoms worsened and I called the GP, who said my son should be admitted in hospital. I was told by an acquaintance about a hospital named Heartlands where I insisted he be admitted.

23. In my son's final month, I stayed with him at Heartlands Hospital until he passed away. I remained there with him and I would take a liquidizer with me to build him up as he was not eating well. I washed and dressed him. I wanted to be there for him as I knew he would feel so lonely on his own. During that time we didn't see many people. Just before he passed away, Michael had a bulging eye and his eyeball was almost right outside of his head. They removed fluid from his spine which detected meningitis. I remember that a nurse had a conversation with me and asked me, "*you do realise Michael will pass away*?" I did not believe her. I remained hopeful until the end.

24. In the end, his cause of death was Meningitis, Chronic Sinusitis and Bronchopneumonia. My son passed away in the Heartlands Hospital, Birmingham a week before his 26th birthday.

25. Michael was more than a son to me. We were friends. He loved music and going to football matches. He was a full of life lad who loved life. He a wonderful person. He had a good sense of humour and was generally very happy. He coped with his haemophilia well and led as normal a life as he possibly could. His Factor VIII changed his life tremendously.

26. As I have mentioned, Michael did try AZT, I think from around July 1989 but stopped a couple of years before he passed away in around 1993 because he felt that the side effects of the drug were '*knocking him about*'. He experienced sickness, diarrhoea, weight loss and a loss of appetite. He had a discussion with me prior to coming off the drug during which he concluded that he would try without. It is hard for me to say whether the side effects were attributable to the drug or to the many other health conditions he suffered from. In his last two years, he did not receive any treatment for HIV. I did not see much of a difference in his physical state. In his last 12 months, he had a terrible headache and was on Morphine to treat this.

27. Michael was allergic to Penicillin and so they were limited in what they could give him. I would not know if there should have been treatment offered, but obviously, his Hepatitis had gone untreated his whole life.

28. Michael had lovely teeth and would go to the hospital dentist. He never even needed fillings and there were no issues here.

29. When he found out at first he did not want family members to know. After a short time we eventually told my sisters and family, all except for his Nan. Michael was very close to my mother and knew that she would get too upset and she passed away not knowing. His friends never knew as he didn't want to tell them. He was able to work around it during school, as his symptoms were not too bad then. When he got poorly, he didn't see them much due to his commitments with his girlfriend, but they would still turn up at hospital

occasionally. They would wonder what was wrong with him and asked questions. I could not tell his friends the truth until after my son passed away.

30. His funeral was the first time that I had seen so many men crying in the same room. When his friends discovered the truth, they said that they understood and if they were in the same position, they would have done the same thing. Instead of wearing black that day, his friends all wore the West Bromwich Albion shirts; our local team.

31. My family were very supportive of both of us. I never told my friends, but I never felt the need to. It was often difficult seeing my sister who at the time had 2 grandchildren. I remember that Michael apologised that I would never become a grandma. My sister now has 8 great grandchildren. I can see what I am missing out on and I do feel really down to think that that could have been me. Michael was my only child and I have been deprived of the right to be a parent and a grandparent.

32. After Michael was diagnosed with HIV at 17 years old his school work went down as he could not see the point in it any more. He had a job in an office at the Council offices. However his mind was not on his work and eventually he could not work any more. I could understand how he felt and all I could do was to stand by him and be there for him.

33. A couple of months prior to his death, I had to give up my job as a cook in a residential care home to care for my son. I never told my workplace about my son's condition as it was Michael's wishes. After his passing, my work wanted me back, but I could not go back and tell people why I had taken time off. My husband had to take an unpaid year off work after Michael passed away, as he was worried I would do something silly. As a result we had no income and we had to live off of the £10,000 Michael left us. Thankfully, my husband was allowed back to work. He was a long distance driver and travelled the continent.

34. When Michael was at the Queen Elizabeth Hospital when his head had swollen up, a young Indian lady doctor had come in during the middle of the

night to give Michael his Factor VIII following a bleed. I had been asleep at the time but as she was leaving I woke up and found Michael crying. Apparently the doctor, having seen the swelling in his head, had told Michael that he may have a brain tumour. We had to report this doctor. Her tone had obviously been very cold, and she knew the condition my son was already in. Not to mention the time of the day, I felt that it was wholly inappropriate to mention something so serious to a patient and the fact that there was never actually a tumour.

35. After the brain tumour comment Michael and I spoke all night and Michael said he was going to die. I told him that if he died I would not be far behind. Michael told me that I should live on. I never told my GP about this. I am spiritual and believe there is life somewhere else and this thought has helped me. After his death I had locked some tablets away because I thought I may need them one day when it got too tough. It was only 6 years ago that I finally let go of the tablets.

36. On Michael's death certificate there is no mention of HIV or Hepatitis C. The registry told me that they put a mark on the death certificate so that people of medical knowledge could understand what it meant. They said that they could not write down HIV as a cause of death. I was very upset at the time. It was a deliberate policy not to write down blood borne viruses. I attach a copy of his death certificate at Exhibit WITN1616007.

37. Financially it had been a struggle. Michael never had any contact with his biological father and I had to give up work to care for Michael. After losing my son, I was in no state to go back to work. I should not have had to live off my deceased son's savings.

Section 6. Treatment/care/support

38. No counselling or psychological support had ever been made available to me in consequence of what happened. I do not know if it was ever offered to Michael, although I am unsure as to whether it would have helped.

39. I know that Michael had a social worker named Jill Marks who would pay him monthly visits at home to check up on him and to assess if there was anything he needed. She resigned from her post and has since been travelling around the world. She often sent Michael postcards and Michael was very fond of her. I remember he had told me that her replacement was not as good.

Section 7. Financial Assistance

40. My son did receive something from the MacFarlane Trust. He dealt with this himself but I do know that for what my son went through he received was a pittance.

41. I have since obtained copies of these records and can see that he initially received £20 per month backdated from November 1987, which increased to £250 per month from around February 1994. He received £20,000 aged 21 years old and £23,500 in 1991. He also received grants for:- driving lessons; a deposit on a Motability car; and a payment towards a convalescence break after he had had pancreatitis, but attach a letter dated 19 January 1995, which was about 4 months before he died, chiding him for going to Antigua for his convalescence which I Exhibit at WITN1616008. He was refused a grant for new clothing after he lost all his weight.

42. I found out about the Skipton Fund on social media posts from the Haemophilia Society. When I first saw it, I did not know what to do, but I remembered the conversation with the doctor in the Queen Elizabeth Hospital car park. In order to qualify I had to submit proof that my son had Hepatitis C. When my son went to the Queen Elizabeth Hospital, he had been under the care of Dr Wilde and April Greenway, his secretary, was still there when I phoned up. I applied to the Skipton Fund around March 2011 the Queen Elizabeth Hospital sent his medical records straight to the Skipton Fund. I received the first stage payment of £20,000 on 25 July 2011.

43. A while later I was told that there was a second payment available but I did not know if I was entitled but applied around August 2013. Once again, the

Skipton Fund required evidence that my son had Hepatitis C. I had told them that they should already have the proof but they said they did not have anything. I do not know why they did not have this on record. I contacted the Queen Elizabeth Hospital again but April said that they had destroyed the records. My experience in this is not unique. The same thing has happened to my friend. I asked April why the records were available once and then subsequently destroyed to which she answered that they had moved to a smaller office and could not accommodate all the records.

44. However, I received the second stage payments of £25,000 twice in the end, despite the lack of medical records around 22 August 2013. The Skipton Fund did not make me sign anything. I attach two pages of the application form completed by Dr Wilde confirming that in the absence of medical records he assumed that Michael was infected with Hepatitis C around 1 January 1970 and with HIV around 1 January 1980 at Exhibit WITN1616009.

Section 8. Other Issues

45. Michael heard about the 1991 Litigation in the US through the Haemophilia Society. He was party to this and also signed the disclaimer. I was a party to this litigation but I never signed any waiver. Not enough was done for parents to cope with their infected children.

46. I feel that we had no help whatsoever. We struggled for a year after Michael passed away using up Michael's savings. We lost our only son. It changed our whole life. There was a black cloud hanging over me and I never got over losing him. I think about him everyday.

47. It is terrible that such a thing happened in the first place and I do not understand why somebody could have allowed this. I have always believed that it has gone on far too long and should be sorted out and attach a letter I sent to the MacFarlane Trust dated 25 August 1999 at Exhibit WITN1616010.

Anonymity

48. I do not wish to remain anonymous.

49. I do not want to give oral evidence to the Inquiry.

Statement of Truth

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

Signed... GRO-C ....

Dated..........28.3.2019...............