

# ANONYMOUS

Witness Name: **GRO-B**

Statement No. WITN2495001

Dated: 25<sup>th</sup> February 2019

## INFECTED BLOOD INQUIRY

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FIRST WRITTEN STATEMENT OF **GRO-B**

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I provide this statement in response to a request under Rule 9 of the Inquiry rules 2006 dated 12<sup>th</sup> December 2019. I adopt the paragraph numbering in the Rule 9 request for ease of reference.

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

1. **Introduction**

1. My name is **GRO-B** my date of birth is **GRO-B** 1948 and my address is known to the inquiry.

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2. I am married to [GRO-B: H] He is a retired General Medical Practitioner. I am a retired [GRO-B]
3. I was born in [GRO-B] Wales but my family moved to [GRO-B] Wales when I was a baby.
4. I attended Aberystwyth University. I qualified as a [GRO-B]
5. I met my husband through family friends. He told me he was a haemophiliac. My mother was a nurse so medical matters such as this were not a mystery to me.
6. We married in 1973. At that time we both lived [GRO-B] where he was in Medical School and I was working.
7. Between 1975 and 1978 my husband worked in Birmingham in Haematology and General Medicine [GRO-B]  
[GRO-B] I followed him when we moved and I was able to obtain [GRO-B] positions. He was then working at University Hospital of Wales and Cardiff Royal Infirmary in Haematology, [GRO-B]  
[GRO-B] During this time we had two sons. My husband's consultants were Dr Hutton and Dr Whittaker, and Professor Arthur Bloom was the Head of Department.
8. We returned to [GRO-B] Wales in 1983 where my husband did GP training. I was a fulltime mother at this time. I returned to part time work in 1989. I went full time in 1992 after my husband was diagnosed with Hepatitis C.
9. My husband became a partner in a GP Practice in [GRO-B] 1984.
10. My husband retired from the practice [GRO-B] in July 1994. In 1997 he joined the Appeals Tribunal Service [GRO-B]  
[GRO-B] He started doing locum work in General practice and in

1998 went to work for the Royal Army Medical Corps for 1 year in [GRO-B] Barracks in Germany. He did some locum work on his return to [GRO-B] Wales in 1999, and in 2000 took a full-time salaried GP post in [GRO-B]. He worked again for the Royal Army Medical Corps in [GRO-B] Barracks in Germany from 2005-2008, when he retired and returned to live in [GRO-B] Wales

**2. How infected**

1. There was a history of Haemophilia in my husband's family.
2. When we first met, he didn't allow the condition to hold him back at all. He might bump himself and have a bleed requiring treatment. He was able to administer cyroprecipitate intravenously to himself at that time.
3. He was infected in 1976 when he was working at Queen Elizabeth Hospital in Clinical Haematology in Birmingham. I can recall we were living in a flat near the hospital at that time. He suffered a bleed and had one Factor VIII treatment which was supplied by the Hospital where he was working at the time in the Haematology Department.
4. He became yellow and jaundiced and was said to have suffered from non-A, non-B Hepatitis following treatment with American Factor VIII for a bleed from his pelvis into his leg.
5. He suffered from lethargy, slept a lot, had no appetite and was thirsty. I was working so had to leave him all day. He was very poorly, and was off work for about three weeks.
6. He suffered a bleed in 1983 and had asked for Lister Factor VIII as it had become clear that there was a problem with imported Factor VIII, and the possibility of to being connected with HIV.

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7. We started using condoms even though I was on the pill, because of the possible risk of HIV.
8. My husband was tested for HIV in September 1988 and April 1989, and both tests were negative. This was a relief, and I thought that he was now alright.
9. He had somewhat recovered after 1976 but subsequently suffered from recurring joint pains and lethargy. He thought he had a bleed into his joints, and he was referred to a Consultant Physician, and in August 1992 was diagnosed with Hepatitis C.
10. I had to have a test then as well but was negative. I was concerned by his diagnosis but at that time the full implications of having Hepatitis C were not known. I thought that as people seemed to get over Hep A and B, the same might be true for my husband.

### 3. Other infection

1. In 1991 my husband was diagnosed with Yersinia, a bacterial infection which probably occurred because his immune system was compromised.

### 4. Consent

1. I am not aware of my husband ever being asked for specific consent to administer blood or blood products to him.

### 5. Impact

1. The consultant who diagnosed my husband with Hepatitis C had been in college with Professor Howard Thomas and knew that he was doing research on Hepatitis C at St. Mary's Hospital, London so my husband was referred there.
2. He was part of a clinical trial. He started on Ribavirin for six months,

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starting at the end of 1992, and then was seen for 6 months to review his condition. At the end of the study his Hepatitis C status had not changed, so he was offered further treatment.

3. In January 1994 my husband started treatment with Alpha interferon and Ribavirin for six months, followed by 12 months of Alpha Interferon, and then 6 months of Alpha Interferon and Ribavirin. He had to inject myself in the stomach every other night for two years. His stomach was very sore and I was not even able to give him a hug. I found him crying one night, because he was afraid he might have infected me or our sons. He was advised that the Interferon might cause flu like symptoms.
4. The effect of the treatment caused him to be sleeping for most of the day. He would fall asleep involuntarily.
5. In February 1994 he had been advised he could not work, and went on sick leave. That should have been in the prime of his working career. However he had to retire in July 1994 because of ill health.
6. It impacted on our boys who were then young. He wasn't able to come on holiday with us as he was so poorly. He couldn't do anything around the house or help out with the boys. Fortunately, my parents lived a few miles away and could help out.
7. There were tensions in the household. He became withdrawn and depressed. You could cut the atmosphere with a knife.
8. Our elder son developed migraines and then was diagnosed with ulcerative colitis the week after my husband was told that he was PCR negative. It is likely that stress contributed to both conditions. He went away to University in September 1998 and when he came home for Christmas his father was not there. A few months later my father, to whom my son had been close, died. He was advised to come home from University and he had to repeat the year. Even

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today his relationship with his Dad seems strained. Our younger son, who became a doctor, seemed to have coped better with the situation.

9. It took my husband about 2 years to get over the treatment.
10. He was advised that it was safe to practice medicine again and in 1997 started to do Tribunal work and locum General Practice work.
11. I can remember him telling me a Practice Manager in GRO-B told him that, because of his medical history, he could not be a locum GP for them. He was very upset.
12. The only way forward in terms of a career was to do something totally different, and in 1998 he applied for and got work for a year with the Royal Army Medical Corps. He spent a year in Germany.
13. During that time he began a relationship with a German woman. He told me of this and I said that he should not come back to me if he was still in that relationship.
14. When he returned to GRO-B Wales, he stayed with his mother.
15. At that time there were no salaried GPs in Wales so he was appointed as a salaried full time GP in GRO-B West Midlands, and moved to live and work there in 2000. Meanwhile, in 2002 I asked for a divorce.
16. He married the German woman in 2005 so re-applied to the Royal Army Medical Corps and went back to Germany where he worked until late 2008.
17. He became unhappy and decided to retire from the Corps and return to GRO-B Wales. I believe he had sought some psychiatric help and was told there was nothing clinically wrong, just that he was very unhappy.



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18. He lived in rented accommodation for 12 months when he came back to Wales. A couple of months after his return I was diagnosed with breast cancer. He was very supportive. By now he had divorced his German wife. We became closer and closer. He moved in with me at the beginning of 2010 and we remarried in the May of that year.
19. My husband suffers permanent side effects from the treatment received, including deafness, numbness in his hands and feet diagnosed as a neuropathy, scalp tenderness, erectile dysfunction, hypothyroidism, feeling cold, lethargy and impaired immunity. We have to have the central heating on all the time and at a temperature that I do not always find comfortable.
20. He cannot walk very far and he walks very slowly. Indeed, he does everything slowly. If he has a 9 o'clock appointment he would have to get up at 6am.
21. When he was diagnosed with Hep C (HCV) he gave up alcohol to try and protect his liver. He used to love fine wines.
22. His financial position is much worse than would have been the case had he continued as a GP in partnership until normal retirement age. His GP pension is much reduced.
23. He was informed that financial assistance was available from the Skipton Fund and received a payment from the Skipton Fund in 2004.

### 6. Treatment/care support

1. Supportive treatment and care were given to infected patients, which consisted mainly of advice to rest during the period of jaundice, dietary restrictions relating to fatty foods and to eat a high carbohydrate diet. Blood tests were taken to check on the non-A, non-B Hepatitis diagnosis, and patients' GPs were advised to carry out serial liver

tests. At the time no psychiatric or counselling support was offered.

**7. Financial assistance**

1. In 2004 my husband received a stage 1 payment of £20,000 from the Skipton Fund. Since November 2016, he has received £3000 regular annual payment, plus a winter fuel allowance of £500. The annual sum was increased to £4000 plus winter fuel allowance in April 2018, since when it has been paid by the NHS Business Services Authority. He is paid under the England Infected Blood Support Scheme.

**8. Other issues**

1. At the time that my husband was diagnosed with Hepatitis C little was known about the disease, and he had to make regular trips to London for treatment which was experimental.
2. It was not realized at the time that the treatment could cause depression. Later patients on this treatment were given anti-depressants.
3. My husband's partners had little insight into his condition at the time.
4. The holding of the Public Inquiry is a good thing as it is hoped that lessons can be learned. However the downside is that preparing for the inquiry is causing a lot of stress and it is bringing back bad memories. Some people do not want to become involved for that reason, such as the parents of my brother-in-law's nephew who died in his early twenties after being treated with infected blood.
5. It has become clear that my husband is lucky in that he is still alive. Because of his training he was able to obtain a diagnosis and treatment for his condition when it first became available as he was keeping an eye on developments in the field. Sadly this is not true for many people.



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## Statement of Truth

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

Signed,

GRO-B

Dated.....

25 February 2019