Witness Name: Peter Frith
Statement No: WITN4118001
Exhibits: Nil
Dated: 13 November 2020

# INFECTED BLOOD INQUIRY

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# WRITTEN STATEMENT OF PETER FRITH

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 1st September 2020.

I, Peter Frith, will say as follows: -

## Section 1. Introduction

1. My name is Peter John Frith, my date of birth is GRO-C 1957 and my address is in GRO-C, Shropshire. I am a Chartered Architect and I've had my own architectural firm since 1988.

2. I am originally from Liverpool, but following redundancy we moved to Barrow-in-Furness where my father had been offered job in the ship yard. Following my O Levels, I left home to go to Preston Polytechnic where I did an OND in Building, rather than taking my A levels locally near home. Following my OND, I moved to Birmingham to study for my Architectural Qualifications at the Birmingham School of Architecture. When I qualified in 1981, architectural careers were in short supply and I took a job working for one of my tutors in Birmingham. My career path has been such that I live and work in Shropshire.

3. I live with my wife Sue, who is a Town Planner. We have two adult children who are 23 and 27 years old. Both of them are living away from home at the moment. Our son lives in northern Italy. He's a performance engineer for the Ferrari Formula 1 racing team. Our daughter is away travelling, and is currently in Fiji.

## Section 2. How Infected

4. In August 1974, as part of my OND in Building, I was on a work placement in an architect's office in Barrow-in-Furness, when I experienced a nosebleed which wouldn't stop. I was subsequently admitted to North Lonsdale Hospital in Barrow-in-Furness. I was confined to bed and told to minimize all movement until the bleeding stopped. I was subsequently taken down to surgery for investigation. Following the investigation, I was told that the surgeon, Mr Potter, wanted to see me with my parents. When they came in we were told by the surgeon that I had a tumour in my post nasal space on the left side of my face and that it was a Nasopharyngeal Angiofibroma. We were told that the tumour was benign but it had to be removed. I was 17 at the time.

5. I had an operation about a week later to remove it. The surgeon, Mr Potter, seemed to be very good and he prioritised seeing me over his private patients.

6. During the operation I had a blood transfusion, it was 8 units of blood. I recall they operated through the roof of my mouth and through my nose. I was informed by Mr Potter after the operation that he had not removed the whole of the tumour to try and avoid any external disfigurement to my face, and advised that due to the nature of the tumour he hoped that what remained would shrink away by itself.

7. I was in hospital for about 2 weeks, after which I went home. I returned to college in Preston in September that year. I was living away from home and going to college in Preston.

8. Later that year, in November/December, the nosebleeds started reoccurring and I was readmitted to North Lonsdale Hospital for another operation. Again, I was operated on by Mr Potter, and received blood transfusions a second time. I think I was given 8 units of blood then too. I know that there was a lot of blood involved because the nature of removing the tumour is that you lose a lot of blood.

9. Following this operation, Mr Potter cross-referred me to the Christie Hospital in Manchester. He asked them if they could use radiotherapy to tackle the remainder of the tumour. But the consultants there were reluctant too as they were worried about the side-effects of the radiation. They were of the opinion that I should be operated on externally but Mr Potter did not agree. It was decided that I should just be monitored to see if the remainder of the tumour would reduce by itself.

10. I finished my course at Preston Polytechnic in July 1975 and then went to the Birmingham School of Architecture to undertake my architectural qualifications. In my first term at Birmingham the nosebleeds started recurring again.

11. In December 1975, I went to see the student doctor, Dr Richard Wittington who happened to also be the Birmingham Coroner at the time. He referred me to the ENT Department at Steelhouse Lane Hospital in Birmingham.

12. Following the previous operation, Mr Potter had issued me with a letter about the tumour. So, I gave the consultants at the Steelhouse Lane Hospital this letter and following an examination they said I would need further surgery.

13. The surgeons at Steelhouse Lane were quite surprised to learn about my condition. They hadn't seen this before in Birmingham and told me that it is a rare condition, with an incidence of about 1 in 5 million. They were very keen to operate in Birmingham but I asked if they would mind transferring me back to my home at Barrow. They contacted Mr Potter at North Lonsdale and arranged for me to be seen there.

14. I went home and I was operated on within days. It was the same procedure as before, and I believe that I was given the same amount of blood again. Mr Potter was my surgeon for the third time.

15. Again, following the operation Mr Potter referred me the Christie Hospital in Manchester to see if radiotherapy could be used to shrink the remainder of the tumour, and again they were reluctant to try radiotherapy.

16. Mr Potter was of the belief that the tumour would shrink over time and go away on its own. So it was decided that he would just closely monitor me over the next few years.

17. Mr Potter would see me every time I was home from college over the next 3 to 4 years.

18. There has been no subsequent reoccurrence of the tumour.

19. Prior to the nosebleeds and the discovery of the tumour, I was generally in good health. I was a regular squash player, an active fell walker and climber of the Lake District mountains. I would often go potholing in the Yorkshire Dales.

20. It wasn't until many years later that I found out that my health was not all that great. I run my architectural firm with my business partner and we have cross-partnership life insurance through the business. In 2009, we decided to try to reduce the premium we were paying. We approached the insurance company

and they agreed to reduce the premium but requested that we both get medical checks.

21. I went to see my GP, Dr Fitzgerald Frazer at Wellington Road Practice, Newport. He carried out my medical check, and said everything was fine except my liver seemed enlarged. He told me not to worry about it. He asked me if I had private health insurance, and suggested referring me to a liver consultant.

22. I was referred to Dr Gillian Townsend at Princess Royal Hospital, Telford. She took a detailed medical history, conducted an examination and took lots of blood. Following this I received a letter, saying that the test had indicated the presence of HCV antibodies, and I was asked to have another blood test to ensure that this was not a 'false positive'. I "googled" the contents of the letter which inferred that I had tested positive for Hepatitis C.

23. At this time, I had never heard of Hepatitis C, so I found what I read very upsetting, worrying and concerning.

24. I cannot remember the exact sequence of events following my second blood test, but I do know that I was phoned, at work, by my GP who asked me to come down to the surgery immediately, and when I arrived to tell the receptionist that he had rung me and that I was to see him immediately. Up until this point I had been feeling fine physically. But at this point I realised that there was something very wrong. This is not the sort of telephone call anybody wants to receive, and it is difficult to describe the range of emotions that I suddenly stated experiencing. Needless to say, I was extremely nervous, anxious and worried.

25. I went and saw my GP. He explained that he had received a telephone call from Dr Townsend. She had apologised for not asking me to go down to the hospital as she was on holiday, but she thought that I should know as soon as possible that I had tested positive for Hepatitis C. He told me that he did not

know much about this condition, but Dr Townsend would see me as soon as she returned from holiday.

26. I saw Dr Townsend when she returned. She explained that I had tested positive for Hepatitis C (HCV) and that from the medical history she had taken, it was her opinion that I had probably acquired it as a result of infected blood transfusions in my late teens. As I have never taken drugs intravenously or otherwise, nor do I have any tattoos, this was considered to be the most obvious source of the infection.

27. I think it is worth re-stating that apart from the issue with the tumour in my late teens, I have enjoyed good health and kept reasonably active. I have had no other operations, I have never smoked and, as I previously stated, I have never taken drugs intravenously or otherwise, nor do I have any tattoos.

## Section 3. Other Infections

28. As far as I am aware, I have had no other infections besides HCV.

## Section 4. Consent

29. I was not treated at any stage without my consent, at least not to my knowledge.

30. I remember signing the normal forms consenting to an operation, but it did not go as far as mentioning the consequence of receiving infected blood.

## Section 5. Impact

### Physical and Mental impact of Hepatitis C

31. When I first received that initial letter advising me that the blood test showed HCV antibodies, I did not know what to think. Up until that point I had never

heard of Hepatitis C so when I looked it up on the internet, I really did not know what to do. I was shocked and extremely worried. I was terrified.

32. I tried not to show how worried I was as I didn't want to upset my family and have other people worry about me. It wasn't until sometime after my diagnosis was confirmed that I told my elderly parents, as I knew they would be very concerned and would take it badly. In the end I had a discussion with my brothers and we decided that it would be easier if one of them explained the situation to them. My father in particular took it very badly, he became very upset that I was likely to die before him.

33. With the treatment coming up, I didn't know how I would survive the year ahead. Sue was working full-time and we had young children. I was terrified.

34. I find I get severe coughs and colds that last the whole winter, much to the discomfort of my family and work colleagues. I have been to see what the doctor can do about these colds but he has advised that there is nothing he can do. That's why I contacted the Hepatitis C Trust earlier this year to ask them for advice.

35. On diagnosis I was advised to give up drinking to help prevent any further deterioration of my liver. I've been tee-total ever since. When in company or out at a meal and I find myself having to explain why I don't drink, as I will generally get quizzed, because most people (especially my friends and family who knew that I previously enjoyed a drink) want to know why I have stopped. I find myself having to explain in detail for fear of them thinking that I am a recovering alcoholic.

36. Even having completed the treatment, I find that I'm not as fit as I was previously and am unable to maintain any level of fitness. For example, prior to treatment, I was a keen tennis player and was a regular league player for my local tennis club. Since completing the treatment, I cannot get back to the standard required to compete for the club.

37. During treatment my sense of taste was disrupted and has never returned to normal. I can't drink tea, and it has completely destroyed the taste of vegetables, now they taste like rusty iron. I can't eat them.

38. As I'm an architect, part of my work takes me onto building sites. Building sites are dangerous places, where it would be easy to cut yourself or in the worst case scenario, have an accident. I therefore have to ensure that the contractor is aware of my condition and explain about HCV, just in case anything happens. I'm always very careful, I am very conscious of cutting myself and always carry a small first aid kit.

39. I missed out on some opportunities. I had planned to do a Master's Degree in Conservation, but that was put on hold until I had finished the treatment.

40. Following treatment, I was monitored by the hospital and had regular scans on my liver, spleen and gall bladder. I have subsequently had my gall bladder removed. I was in pain so they removed it last year. I don't know why.

41. I miss out on the pleasures of life. I used to enjoy a pint of nice beer, glass of wine or a scotch whisky. I was a member of the Scotch Malt Whisky Society and I had an interest in the history of it all, I had a book collection on it. Socially I can't engage in that anymore. Effectively I have become the taxi driver! There is only so many soft drinks you can drink. I'm not saying that not drinking has stopped my social life but it definitely has had an impact. And it's a nuisance explaining why I don't drink.

42. Both during and following treatment, I have had bouts of depression, and sometimes I have these feelings of incredible loneliness. I don't show it on the outside but I don't know how successfully I conceal this. I also find that I am much more emotional and get upset very easily.

43. Even now, it is constantly in the back of my mind. I try not to think about it, but I worry really. I'm worried that it will return or that there is a consequence of it that I'm not aware of. No one has really managed to allay that fear.

## Physical and mental impact of the treatment

44. Following my second consultation with Dr Townsend, when she confirmed that I had tested positive for Hepatitis C she recommended that I move from private medical care to the NHS because the Princess Royal Hospital in Telford had a Hepatitis Unit. She didn't go into a lot of detail, but she believed, that from the history she had taken, that I had probably contracted the virus from infected blood. She told me to talk to the specialist team. I was transferred across to the specialist team in the summer of 2009. There I was under a consultant called Dr Mike (who I never actually met) and a specialist HCV nurse called Sandra Taylor. She was wonderful.

45. I got an appointment to see Sandra and she explained everything. I was told, "You're in good health now, and you could go the rest of your life and maybe nothing would happen. But at the same time, you are getting older and you could get cirrhosis of the liver and be dead by this time next year."

46. For 30 odd years leading up to my diagnosis, I appear not to have been affected at all, or at least I did not attribute any issues to it. I was rarely ill. I definitely hadn't noticed any adverse effects. Had the insurance company not asked me to have a medical examination, I would not have discovered that I had Hepatitis C and I could well be dead by now. A fact which does pray on my mind.

47. I do wonder if it could have been diagnosed earlier. We went to Kenya for a holiday in 1991. Before getting the inoculations, they gave us a blood test to check if we needed a jab for Hepatitis. They said that Sue needed it and I didn't. They said I had the antibodies. That was at the GP in Codsall near Wolverhampton. I didn't think anything of it at the time, but it has made me reflect back on it. When I later asked my GP for a copy of my medical notes to help with my application to the Skipton Fund there were no notes in relation to this incident.

48. I was never offered or given a liver biopsy as it wasn't deemed necessary. I received numerous ultrasound scans and MRI scans, and the hospital were happy to proceed based on these results. These results showed that I had an enlarged liver and spleen, and something was wrong with my gall bladder. They said they were all signs of HCV.

49. I think Sandra was the person who told me about all the infected blood. I answered all the usual questions when I went in to see her. I have never taken intravenous drugs, I don't have any tattoos, and I haven't had any operations other than those I have mentioned.

50. Sandra told me there was treatment available but it was not guaranteed to work. I had HCV, genotype 1A, which she told me was the hardest to eliminate. She told me that due to the amount of blood I had been given during my operations, I had a high viral load.

51. I was given some booklets by the drug companies. We had several meetings about the treatment and Sandra outlined what it involved. Initially we didn't speak about the nature of how it was administered, but I was worried it would be injections. Sandra warned me that the side-affects could be painful and extreme. She said it was my choice if I wanted to do it. She told me to go away and read about it.

52. In the meantime, Sue also got tested. We must have been married for about 30 years by then. On the one hand, the doctors said, "it's very unlikely Sue will have it," and they told us not to worry. But on the other hand, they also said, "don't share toothbrushes or nail scissors." It was confusing. But we got lots of advice. Sandra was great. They identified it and I received good treatment.

53. We gave the kids the option of getting tested and they wanted to. We are quite open with them. Our daughter was about 12 and our son was 17 at the time. GRO-C.

54. I decided I wanted to undergo the course of treatment. Sandra suggested that I didn't start it until the New Year, since the dark and damp days would make me get more depressed.

55. We had 3 or 4 meetings before I started the treatment. Sandra told me it would be Ribavirin tablets and Interferon injections. I got quite stressed about the idea of injecting myself as I hate needles. There was a choice on what type of Interferon I could have, and she gave me various types of syringes to try out on oranges. I assumed I would be taking the injections in the leg, so I would be imagining it like that in the evenings. I was getting very worked up about it.

56. Then I found out I was going to have to inject myself in the stomach. I did not like that idea. But eventually I decided it had to be done. I chose the EpiPen type of syringe.

57. I called the GP and asked if I could come in for them to give me the injections, and they agreed. However, on the first occasion I had to inject myself in front of the nurse. She did offer to do it but I said, "No I have to do it."

58. It was a 12-month course of treatment. I was given 4 weeks supply of drugs at a time. For the first month I went in every week to have blood tests.

59. Sandra gave me her personal telephone number and told me I could ring her anytime, 24 hours a day. There were 2 occasions that I called, one of which was when the EpiPen failed. She told me what to do then.

60. Sandra was very matter of fact and down to earth. She was calm and nothing fazed her. It took a lot of the uncertainty away.

61. The treatment was very hard, but I was determined to do it. It did knock me around, both mentally and physically.

62. I had to keep working or there wouldn't have been a business to go back to. I would have the Interferon injection on a Thursday so that the worst side-effects would occur over the weekend. On most Friday afternoons I would end up going home and going to bed. I was surviving I suppose. I did what I could. If I hadn't made myself go to work, I could have quite easily rolled up in a corner.

63. I have met people who gave up work during the treatment. Sandra said I was the only person she knew who worked all the way through. My business partner carried me. I had one project on-site which I managed to focus on.

64. At home Sue, my wife had to do everything, she could not rely on me to be able to do anything at home.

65. The same year that I went through the treatment, we were running our son down to university interviews. I couldn't function. On one occasion I remember just lying under a tree in main drive at Southampton University.

66. Towards the end of the treatment, Sandra managed to buy a Flick test machine for the hospital. It sends a wave and monitors the condition of the liver. The test negates the need for a biopsy. She managed to get one on trial, and then persuaded the hospital to get one. They were clearly on top of it. I think she treated everyone the same. I never met any of her other patients but I know there were drug abusers. I offered to set up some sort of support group, despite having acquired it differently. I also went on a local radio with her once to speak about the subject.

67. Towards the end of my treatment, Sandra retired. I saw a doctor after that. The next HCV nurse I saw was nowhere near as good as Sandra.

68. We would look at a graph of my viral load and see how it was affected by the treatment. You could see it going down. I had the treatment for 12 months and it was successful. The viral load was reduced.

69. I had regular check-ups for 2 years. Initially they wanted to discharge me entirely, but I asked to have check-ups. I was scared it would come back. They just told me the viral count was low. I've never been told that I've been cured and I'm always worried about that. It was never made clear that it had fully gone.

70. Today, in addition to the comments I have already made about the depression etc, I don't feel that my levels of concentration are the same as they were previously and I now think that I won't get that back. That is an effect of the treatment.

71. Despite trying, I don't feel that I have been able to regain my fitness levels back to where they were. I get very tired. I can play tennis but it's not the same. It is not as if I haven't tried.

72. I suffer from itchy skin which is apparently a side-effect of the treatment. I have seen a dermatologist about it who has prescribed some creams to reduce the itch.

## Impact on Family Members

73. During the treatment, I wasn't aggressive but I was fragile and impatient. I would get very overwhelmed and emotional, which isn't like me at all. I couldn't cope. It put a lot of pressure on my family.

74. Lots of things were put on hold, for the whole family. It was very difficult.

75. We couldn't make any plans to do anything. My family had no idea what state I would be in. We had to say no to lots of family events and weddings because we didn't know if I would be well enough on the day.

76. From the diagnosis point onwards, it was very frightening for Sue. She was carrying it all. She didn't know if she was going to keep working. She was offered time off but she said, "I can't be the one to have time off when he is managing to work."

77. The children were teenagers, they were involved with lots of sports and activities. Sue couldn't rely on me to take them anywhere, so she did all of that. Our son was undergoing university interviews, and she would take him to these most of the time.

78. Our daughter was a very keen swimmer. I had been roped into becoming a swimming referee and hoped to get the opportunity to train to become a referee for the 2012 Olympics, but that had to get cancelled. So I missed that opportunity.

79. Mentally, I was very fragile, and it was very difficult to make a decision on anything. It was hard for Sue to maintain normality for the kids.

80. My elderly parents were extremely worried and concerned. They were worried that I was going to die before them.

## Financial Impact

81. Money was a big worry during the year I was having my treatment. In the end I managed to work a lot more than we thought. If not we would have probably ended up having to sell the house.

82. The worst thing was not being able to do my work properly and develop the business. I was the Principal Director and couldn't carry out my usual

responsibilities. My business partner, whilst a very good architect was not too interested in developing the business, so that went by the board while I was ill. I suspect we missed out on a lot of work as a result, as it would have gone to other architects.

83. Some clients knew about the HCV because I had to tell them if I couldn't take on the work.

84. When the business co-director decided to retire in 2012, I had to pay him to purchase his share-holding. One of his arguments in valuing his share-holding was that he had to support me and the business during my period of treatment.

## Stigma

85. I told my work about the HCV because of health and safety. My business partner was his usual hypochondriac self about it, but there were not many other adverse reactions.

86. Dentists were generally very good. Doctors tend to don gloves if I go for blood tests, but I guess that's normal.

87. There weren't many bad reactions in general. When you properly explain it, people are very understanding. I think at some point I did feel that people didn't understand it and confused it with HIV.

88. Insurance companies are very bad about it. It is prohibitively expensive for me to get travel insurance and life insurance. We do have a family package, but I am not covered by it.

89. It doesn't bother me that people know as I am of the firm belief that the subject of HCV should be more widely known about. However, people's reactions when they find out can vary. For example; my business partner

Geoff is a bit of a hypochondriac, so he was very weary of me. I did cut myself in the office once, and inevitably he panicked. However, my other colleague, Simon, was very supportive as he had his own medical conditions.

## Section 6. Treatment/Care/Support

90. The HCV treatment was free and very keenly offered. The best treatment was available to me. I googled it and I saw that I was having the only thing on offer.

91. I can't praise my HCV nurse, Sandra Taylor, enough. If it hadn't been for her support, I don't think I would have got through it.

92. Shrewsbury and Telford Hospital have recently been getting bad press over their treatment of maternity patients. But I have had the opposite experience there.

93. I was not offered any counselling. Looking back I don't know, it might have been a good idea at the time.

## Section 7. Financial Assistance

94. Sandra made us aware of the Skipton Fund and supplied us with the forms. In 2009 Sandra, the GP and I completed the forms. The application was made and then rejected. They said there wasn't enough evidence to show that I had blood transfusions.

95. The disappointment was mostly that the rejection made me feel dirty in some way. It suggested that I wasn't telling the truth, or that I was a drug addict, or that I was applying for something that I was not entitled to.

96. I had to lodge an appeal. It wasn't heard until 2010 as the appeal panel only meets at certain times.

97. I contacted North Lonsdale for my medical records. They were very hesitant in supplying them. In fact they actually said, "You're not going to make a claim against us are you?" They supplied very little information but they did confirm one of the operations that I had. The Christie Hospital was quite helpful, they cross-referenced some other information.

98. I paid for a private consultation with an ENT surgeon at the Princess Royal Hospital. I asked him to provide a statement about what would have been involved in such an operation.

99. I also researched a lot about the operations. A lot of articles online said how much blood is normally used during an operation like that. I went the extra mile to gather all the information.

100. When I appealed, I went overboard with the information I supplied about operations. I understood and knew what I had to do. I was also in a position where I could pay a private consultant to give evidence. I think it must be very difficult for a person not as fortunate as me to make a successful application.

101. The appeal was then accepted. I received the initial £20,000 in 2010. Between then and 2018, there may have been another payment of about £6,000. All of these have been referred to as ex-gratia payments. I was also told that I could get my prescriptions paid for.

102. Now I qualify for the £18,000 per year. In the last 2 years, I have been getting quarterly payments.

103. I don't think my application should have been rejected in the first instance and I still don't understand why it was. I think when it was rejected they should have at least told me what was required to make it successful. The burden of proof seems to have been set very high. I would have thought the initial support of the HCV nurse and my GP should have been enough. At a time of great worry this was all I needed. It didn't help my overall mental state.

104. It was hard work to start with but once I got onto the list, everything came through automatically. Getting on there was the problem. And the Skipton Fund wasn't advertised. I wouldn't have known about it if Sandra had not mentioned it.

105. I found out about the Hepatitis C trust myself, not long after I was diagnosed. I asked them for help with the Skipton application and they told me to make an appeal. They were, in my view quite London-centric when I got in touch. They tried to do the best they could for the sufferers. It was someone to talk to. Last year, I asked them about the persistent colds and coughs and they said, "Yes people do have that issue." They also suggested that I make a statement to the Inquiry.

106. I got invited to give a talk at one of their events and I was involved with a Christmas Do. They had a campaign to try to make your local MP aware of the infected blood scandal, it was mentioned in a newsletter. I met with my MP, Mark Pritchard. He wasn't a great help. I spoke to him about the infected blood but he was too busy taking phone calls while I was there.

## Section 8. Other Issues

107. I want lessons to be learned so that things like this don't happen again.

108. I think people need to take responsibility for their actions. I take responsibility for mine. But it has all been hidden, by MPs and by the medical profession. They don't want it to break surface because it's going to reveal a lot. But that's the reason this Inquiry is taking place.

109. When you look at other countries, they have dealt with it. Our government has ignored it. It doesn't make me respect people in the medical profession or MPs very much.

110. I wonder whether enough is being done to alert people to the risk. There are people who don't realise they have been infected. I think there should be a look-back and there should have been a proactive approach to tell people about what happened.

**Statement of Truth**

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

Signed GRO-C

Dated 13 | NOVEMBER | 2020

Statement of Peter Frith . WITN4118001