

Witness Name: Laureen Joan Fargie

Statement No.: WITN4670001

Exhibits: **WITN4670002 - 009**

Dated: 7 October 2020

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF LAUREEN JOAN FARGIE

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 01 October 2020.

I, Laureen Joan Fargie, will say as follows: -

Section 1. Introduction

1. My name is Laureen Joan Fargie. My date of birth is GRO-C 1945 and my address is known to the Inquiry. I am retired and live with my collie dog. I suffer with COPD and osteoarthritis. I have a son and a daughter from my first marriage. I have two grandchildren and two great-grandchildren.

1. I intend to speak about my late husband George Fargie, who was born on GRO-C 1933 and sadly passed away on 7 March 2003, at the age of 70. George was infected with Hepatitis C (HCV), as a result of receiving a blood transfusion either during a quadruple heart bypass or for the amputation of his right leg a short while later, due to infection.

2. In particular, I intend to discuss the nature of his illness, how the illness affected him, the treatment received and the impact it had on him and our lives together.

3. I confirm that I have chosen not to be legally represented and that I am happy for the Inquiry team to assist me with my statement. I have been reminded of pertinent dates by the Investigator as they have reviewed the Judicial Review. I am aware that they have a copy of the Judicial Review already (relativity reference: RLIT0001380)
4. My daughter has assisted me with my statement.

Section 2. How Infected

5. George was my second husband. I married my first husband at the age of 18, but we divorced GRO-D
6. George and I married on the 17 November 1978 – 10 years after my divorce. He was 12 years my senior. I did not have a very good relationship with my father, so George was like a father figure to me.
7. George worked as a gardener when I met him and he became the head gardener for four hospitals in Edinburgh. He had a lot of friends and was very well regarded by people. He had a heart of gold and was the backbone of our family.
8. In the late 1980s he was prescribed tablets for angina, but still continued to work.
9. In 1988 he suffered two major heart attacks and was told that he would need a quadruple heart bypass. The first heart attack was very bad.
10. George was a moderate smoker, but he stopped smoking completely after his first heart attack.
11. The operation took place on 9 November 1990 at the Old Edinburgh Infirmary (which has now been demolished). The surgeon was Mr Campanella – he was a lovely man. A vein had to be taken from his right leg to make the new arteries.

During the open-heart surgery, he would have received a significant amount of blood – it was a major procedure.

12. I was not allowed to visit him the night of the operation, so I went the next evening with my brother. I remember commenting that George did not look very well and the nurses kept coming in to keep an eye on him.
13. George contracted septicaemia and pneumonia due to infection at the site in his leg where the vein has been removed. He was transferred to the intensive care unit and put into an induced coma. He was unconscious for 3 weeks.
14. Whilst he was still in a coma, the consultant told me that they would have to amputate his right leg – George was therefore unaware. The operation took place on 17 November 1990. Again, he could have received further blood transfusions during this procedure. The leg was taken off right across the knee, so it was like a knuckle. George later suffered with ulcers as a result.
15. George was discharged after 9 weeks in hospital, but we went back to the Princess Margaret Rose Orthopaedic Hospital for physiotherapy and for his prosthetic leg to be fitted.
16. George was very strong willed and even having a prosthetic leg did not stop him.
17. In the mid 1990s George could hardly walk and had difficulty breathing. The doctor came out to take some blood. She came back the next day and walked straight into the house (she did not knock). She said that George had to go straight to hospital for a blood transfusion. I drove him to Roodlands Hospital in Haddington, as I thought I would get him there quicker than an ambulance.
18. In March 2001, George had to go back to Roodlands Hospital to have a lump removed from his bowel. I thought it was cancer, but the doctor informed me that the lump was not cancerous and had been successfully removed.
19. During this procedure it was discovered that George had HCV. I was present with George when he was diagnosed. He broke down and felt dirty. No information was provided at this point on how to manage the infection. The

doctor explained that he would receive a letter referring him onto the Old Edinburgh Infirmary.

20. We saw a specialist at the Old Edinburgh Infirmary – a Spanish doctor. He was very solemn and provided more information about the virus. I found it hard to take in and process the information we were given. He confirmed that George must have contracted HCV from a blood transfusion either at the time of his heart bypass or during the amputation of his right leg.
21. I confirm that George did not have any tattoos or piercings and was not an intravenous drug user. He did not have any surgery before his heart bypass.
22. I have never been tested for HCV.

Section 3. Other Infections

23. My husband did not contract any other infections as a result of being given a blood transfusion.

Section 4. Consent

24. George was not aware that his blood was being tested for HCV.
25. I am not aware of George being used for any research.

Section 5. Impact

26. George certainly changed after being diagnosed with HCV. He was a very proud man, but felt degraded and dirty because of the infection. He became a shadow of the man he was before – he had always been a jolly man and enjoyed a laugh.
27. After the diagnosis, I noticed that George was often very tired and fatigued. His skin also became slightly yellow in colour. He would continually suffer with chest

infections and was generally not well. He no longer had much of an appetite and therefore dropped a couple of stone in weight.

28. My daughter recalls interferon being mentioned as a possible treatment, but I do not think that George ever received treatment – it was only ever spoken about.
29. In 2002 George became very unwell and underwent a number of tests. He was diagnosed with lung cancer in the October. I took him to the Western General Hospital for radiotherapy 5 times a week for a duration of 4 weeks and we were informed by Professor Price, that the tumour was shrinking in size.
30. On the 6 March 2003, George did not want to get out of bed. He was being sick and said that he did not feel very well. George was never a man that would lay in bed and he usually got on with things, so I phoned our GP, Dr Donaldson (from the Loch Centre, Loch Road, Tranent).
31. Dr Donaldson said George had another chest infection – he had the choice of taking antibiotics orally at home, or receiving them intravenously at the Western Hospital. Dr Donaldson thought it would be better if they were administered intravenously because George was still being sick.
32. An ambulance was called and I went with George. We arrived in A and E around 4.30pm and at first the staff were very attentive. George was taken down for an x-ray and also put on a drip.
33. I mentioned to one of the junior doctors that George had HCV and lung cancer, to which he just replied 'oh'. As soon as I mentioned this, the care immediately changed and George was left to wait on a bed in a corridor. He was shivering as he only had a thin sheet over him, so my daughter rushed to get him a blanket and pillow.
34. He was treated like an animal. No other patients were left waiting in the corridor.
35. At 9pm George was taken up to a ward that had 4 beds. The nurse that took him up on the trolley, commented to the ward nurse that he had been given too much fluid. Despite this, he was talking away and seemed fine.

36. By the time I reached home, I received a phone call from the hospital and the nurse told me to come back in because George was not so good. We raced back in to find that George had been placed in a room on his own. He was drinking a cup of tea and was in good spirits – we were surprised as we expected to see him in a poorly state. One of the nurses commented that he would be ok throughout the night and George told me that he was fine.
37. Another nurse later came in and asked us all to go outside, just before GRO-D doctor walked in with a hypodermic needle on a tray. I asked to stay in the room with George, but the doctor refused and said I would have to sit in the waiting room.
38. We must have waited between 20-30 minutes before we were allowed to go back into the room. Nothing was said about what had been administered and how George was.
39. Not long after, George started to become drowsy and did not want to finish his tea. The nurse also pointed out that his fingers were going blue and said ‘I think we are going to lose him’.
40. My daughter watched George take his last breath. Water ran out of his nose and out of his mouth as though he had been drugged. George sadly passed away on the 7 March 2003 at 35 minutes past midnight.
41. The nurse told us to wait in the waiting room whilst they cleaned him up, but when we came back in she just handed me the death certificate. There was no explanation of how he died and I did not ask any questions because I was in shock.
42. We were so confused at how George died because he only went into hospital for intravenous antibiotics.
43. The following morning, Dr Donaldson came out to see me and asked how this had all happened. He confirmed that George only needed antibiotics.

44. I made a written complaint about the way George was treated in hospital. I exhibit a letter dated 28 April 2003 from Lothian University Hospitals Trust (with handwritten notes by myself) as **WITN4670007**, along with a further letter from Lothian University Hospitals Trust dated 3 June 2003 (**WITN4670008**) in relation to the complaint.
45. My daughter and I had a meeting with about 4 doctors and a number of nurses that are not mentioned in the report, a couple of weeks after George died. They gave no explanation for his death and commented that he did not have much longer to live anyway because of his lung cancer and heart problems. We were not told anything about the injection that **GRO-D** doctor administered – the only injection he should have received was the antibiotics because he was not in any pain. I exhibit the record of the meeting on 26 May 2003 as **WITN4670009**. They got the family name wrong in this record and it should have been Borret.
46. The doctors said George was not given intravenous antibiotics because they are not administered in A and E – yet he was later taken to a ward.
47. My daughter was very angry during the meeting because we did not get any answers and were not given any proper explanation for George's death. I apologised about my daughter's reaction.
48. We did not tell anyone outside the immediate family about George's infection with HCV, because of how it made him feel. It was a humiliation for him, so he would not have wanted to divulge it to others.
49. George had dentures, so he never experienced any problems with dental care as a result of his HCV infection.
50. George confided in my daughter and told her that he no longer wanted to be here anymore and wanted to die. He never divulged this to me.
51. George used to do all of the decorating in the house, but once his leg was amputated I would have to hang the wallpaper. He also had to 'bum' up the stairs in our house. Whenever he needed a bath, I would wait at the top of the stairs with a zimmer frame and help lift him into the bath.

52. When George was diagnosed with lung cancer he assured me that he would still be here for our Silver Wedding Anniversary, but he never made it.

Section 6. Treatment/Care/Support

53. George never asked for counselling in relation to his HCV infection because he was a very proud man.
54. The treatment in relation to his heart operation and leg amputation was excellent. The doctors arranged physiotherapy sessions.
55. The only time George was not treated with adequate care and support was when he died.

Section 7. Financial Assistance

56. I heard about the Skipton Fund in the media and made an application. My application was rejected on the basis that my husband died 3 months before the scheme was introduced.
57. I appealed the decision and my solicitor put various papers together for a Judicial Review of the Skipton Fund eligibility criterion. I attended Edinburgh High Court, where the petition was heard by Lord Uist, but it was dismissed. My solicitor wanted to appeal his decision, but I told him to leave it because the process was very long and drawn out.

Section 8. Other Issues

58. It still haunts me to this day what George went through and how his life was taken away by the hospital doctors. He was murdered by the hospital and needs justice because he never deserved any of this. I never reported this to the police.

59. George's death certificate **WITN4670005**, states the cause of his death as acute pulmonary oedema, ischaemic heart disease, non-small cell carcinoma of lung chest infection. There is no mention of HCV.

Exhibit Number	Description	Date
WITN4670002	Letter from Nicholas Fish (Scheme administrator Skipton Fund) to Richard Pugh, stating that the application made on behalf of the late Mr Fargie was declined on the ground that they are not able to make payments in respect of those who have died before 29 August 2003.	20/03/07
WITN4670003	Death Certificate of George Fargie	07/03/03
WITN4670004	Medical Report of Mr Fargie by Dr Andrew J Bathgate	
WITN4670005	Page 7 of Medical Report by Dr Andrew J Bathgate. States there are no specific medical records of transfusion, but had a heart bypass which is the likely cause of the HCV (no date for this operation). Further operation in November 1990 for a large part of bowel to be removed. Blood checked as a nurse in operation theatre had a needlestick injury. George Fargie found to be HCV positive.	
WITN4670006	Letter from Richard Pugh (Drummond Miller) to The Scottish Executive with decision to judicially review the date of death criteria.	10/01/06
WITN4670007	Letter from Lothian University Hospitals Trust (with handwritten notes by myself)	28/04/03
WITN4670008	Letter from Lothian University Hospitals Trust	03/06/03
WITN4670009	Record of the meeting held on 26 May 2003	26/05/03

Statement of Truth

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

Signed GRO-C _____

Dated **7-10-2000**