Witness Name: Roger Foster
Statement No.: WITN1878001 Exhibits:
WITN1878002- WITN1878015
Dated: 2 December 2019

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# INFECTED BLOOD INQUIRY
# FIRST WRITTEN STATEMENT OF ROGER FOSTER

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## Section 1. Introduction

1. I, Roger Foster, will say as follows. My date of birth is GRO-C 1943 and my address is known to the Inquiry.

## Section 2. How Infected

2. I was given blood in August 1985 at the then Old Bromley Hospital. I had severe anaemia caused by bleeding piles and required a haemorrhoidectomy operation on 19 August **WITN1878002**. I was given transfusions on several occasions leading up to the operation to boost my blood levels before the operation, and then the following day to assist with recovery.

3. There is a handwritten note in my records stating that I received blood transfusions on 10 August 1985 (4 units), 11 August 1985 (4 units), 12 August 1985 (3 units), and 13 August 1985 (4 units). **WITN1878003.**

4. There is also an infusion therapy chart which states that I received 4 units of blood on 10 August and 4 units on 13 August, before having the operation on 19 August. **WITN1878004.** The batches corresponding to those dates are as follows:

   - 10 August: 1 unit each from batches 702142, 413263, **688700** and one unknown batch;

   - 13 August: 1 unit each of batches **311642**, **311641**, 713273, and **669628**.

   My records also contain copies of the original identification cards attached to each bottle of blood, pertaining to the batches in bold above, as well as further identification cards which are not recorded on the chart. **WITN1878005.**

5. There is another infusion therapy chart pertaining to 20 September 1985, which states that I received 5 blood transfusions on that date **WITN1878006**. The batches corresponding to that date are as follows:

   - 20 September: 757344, 728974, 728957, 688142, and an unknown batch.

6. I also had a colon cancer operation in 1988 **WITN1878007.** I am not sure if this required a blood transfusion but it may have.

7. I was infected with Hepatitis C (HCV) as a result of these transfusions. I am not sure which transfusion was infected.

8. Since having these transfusions, I was becoming increasingly tired over the years but did not know why. I felt something was going wrong in my body but couldn't figure out what it was, and kept returning to the GP for investigations.

9. In 1993 after a colonoscopy, my doctor noted that based on recent liver function tests my liver enzymes were "playing up a bit". **WITN1878008.**

10. In November 2000, I developed pain in my side and started vomiting, and one of the investigations conducted was an endoscopy. The pre-endoscopy check form has 'no' circled under 'liver problems or hepatitis', despite the abnormal liver enzyme results from 7 years earlier, and the fact that I now know I did have hepatitis at that time. **WITN1878009.**

11. In March 2004, I saw a cardiologist as I was having symptoms that I believed could have been indicative of heart problems. The cardiologist arranged for a series of tests, including blood tests and liver function tests, and asked for a review after 2 months' time. **WITN1878010.** This was never followed up.

12. I continued to feel unwell, but it wasn't until around June 2010, when my regular GP was unavailable one day and I was sent to see a different, newer GP at the practice, that I discovered what was wrong. I described my symptoms to the new GP, and she told me that she had had patients with similar symptoms before, and that it would be a good idea for me to have some more blood tests. She sent me for blood tests, and the results came back shortly afterward that I had the antibody to HCV.

13. There is a note in my GP records from 22 September 2010 that says "letter found in files from 1985, transfused prior to haemorrhoidectomy, adv to file. Official request to the practice to have photocopy. Chasing old records re blood transfusions in the pas[sic] (? Linked to hep c inf)". **WITN1878011.**

14. I was not provided with any information about the infection at the time, but referred to the Princess Royal Hospital in Bromley for further investigations.

15. At the Princess Royal Hospital, I had further tests and it was confirmed that I did have HCV. I was not given any further information about the infection there either, but was sent back to my GP, who then referred me to Kings College Hospital, where they had a specialist hepatology team. I am still under the care of Kings College Hospital.

16. The information and care provided at Kings College Hospital was excellent. An assessment was completed which identified my only risk factor for hepatitis (the blood transfusions), what investigations had been done thus far, and noted the symptoms I had been experiencing. The assessment form contained a checklist of possible symptoms of HCV that was completed, which included cardiovascular, respiratory, neurological, musculoskeletal, metabolic, skin and psychiatric symptoms. **WITN1878012.**

17. After further investigations I was diagnosed with cirrhosis of the liver, and given a full explanation about the risks of infecting those in my family, such as through sexual contact with my wife GRO-C. I was also told about the risks of transmission to the public, and to my three children, GRO-C GRO-C I was told about the prognosis of the disease, which was that the odds were that I would develop liver cancer at some point so would require further monitoring.

18. I don't think any information could have been provided sooner. The care provided by Kings College is first class. I feel I was given adequate information by the team there, including Dr Kosh Agarwal and a nurse specialist.

## Section 3. Other Infections

19. I do not believe I was infected with anything other than HCV.

## Section 4. Consent

20. I do not believe I was treated without my consent.

## Section 5. Impact

21. I now realise that many of the symptoms I had for years before being diagnosed were linked to the HCV. I know now that when your liver is affected it can have

knock-on effects on other parts of the body, and this may have been the cause of my tiredness, lightheadedness and general feeling that something wasn't right.

22. The physical impact of having untreated HCV for so long is that I am now still extremely tired 24 hours a day. My concentration is not good, I find it difficult to concentrate on reading and form filling, and I do not sleep well at night.

23. In terms of mental health effects, I have also had periods of depression and anxiety about my illness. I worry mainly about what could happen to my liver, and find it very stressful going to the hospital every six months to find out if everything is still okay. I know at some point my liver damage will develop into liver cancer, and I worry about when this will happen and if it will be caught early enough for me to survive. The operation I had that required the blood transfusions was for bowel cancer, which was caught by doctors in its early stages. At the time that cancer was diagnosed I was told that if it had been discovered 3 or 4 months later I wouldn't have recovered. I was very lucky. You never know how quickly cancer can develop in the course of 6 months, so even if my most recent scan is all clear, I worry that by the time the next appointment comes it will be too late.

24. Shortly after being referred to Kings College Hospital, I was given a trial of 12 months of pegylated interferon and ribavirin treatment starting in July 2011.

25. The treatment required me to inject myself regularly with interferon, which was very strong. The side effects of the treatment were severe. I developed treatment related anaemia, requiring more blood transfusions, and eventually had to lower the dose of ribavirin.

26. There is a document dated 19 December 2011 in my hospital records called "Clinical Management Plan (CMP) for the Treatment of Chronic Hepatitis C Patients for use by Pharmacist Supplementary Prescribers at King's College Hospital". It consists of a template form created in March 2010, filled in by clinicians to indicate the most likely side effects and complications of interferon treatment for each patient and plan which medications to treat these

complications with if they occur. In my case, the form notes my most likely side effects as "ribavirin and pegylated interferon induced anaemia", "pegylated interferon induced neutropenia", dry skin, and insomnia. The document also provides guidance to clinicians about how often to monitor patients on the treatment, when to refer them to an independent prescriber and what records to keep. **WITN1878013.**

27. I cleared the virus at the end of my treatment in 2012. However, I continue to feel fatigued, have hypertension and get migraines. I also still require ongoing monitoring every six months in case I develop liver cancer, due to the extent of my cirrhosis. **WITN1878014.**

28. In 2013 I was asked to sign a consent form allowing the research team at Kings College Hospital to use the samples they obtain from me during my monitoring appointments for the purposes of HCV research. I agreed to do this. I was not told exactly what the research was looking into but I am happy for my samples to be used if it helps doctors learn more about the disease. A copy of the research study information sheet is included in my records. **WITN1878015.**

29. I have had no difficulties accessing treatment from other health professionals, i.e., the dentist, chiropodist and optician. I always notify them first of my condition so they can take appropriate action and have no problem accessing treatment after this.

30. The biggest impact of the HCV has been on my family and social life and my mental state. I was always a laid back person, but since the diagnosis I have found I do get quite snappy and quick to react. I have had to apologise to my wife for my behaviour sometimes and it frustrates me because I know I never used to be that way.

31. My physical symptoms have also had an effect on how much I can get out and socialise with family and friends. I am probably more tired than I let on to the family. I can get around normally in the morning, but by the afternoon I am too tired to move around too much. If I go out for 3 to 4 hours I get worse and worse

over that time. I am rarely able to do an afternoon activity for that long. I used to like gardening, but now an hour of light gardening is as much as I can do. I can certainly not do anything active in the evening. My tiredness has been gradually increasing but has really become quite bad in the past 6 to 12 months.

32. I have two daughters, one son and an 11 year old grandson GRO-C. Because of my fatigue and related symptoms, I feel I can't take my grandson out on my own because I don't feel fit enough to manage him. My wife and I do go out a fair bit, but usually just to have coffee or breakfast but we never go far.

33. I also don't feel I can go a few hours down to the coast for a break, as we used to do, because I would get too tired and have to come back. We have relatives down there who we used to take day trips to visit, or even stay overnight at the Premier Inn, but I no longer feel I am up to taking the trip in one day or staying overnight away from home. I certainly would not be able to travel further; to take a plane somewhere or go for a longer drive. As a result we never see those relatives anymore, we only speak to them on the phone. We haven't visited them for at least a couple of years. People can come to us, and we are lucky that our children all live very close by. But in general my illness has made our lives more isolated, and our social circle much smaller than it otherwise would have been.

34. My family and friends were very supportive of me when I was diagnosed. However, I do feel that the constant worrying that something will happen to me has taken its toll on my daughters especially. I feel it has affected them particularly in the last couple of years as my mobility and energy has become more limited.

35. I don't feel I have really experienced much of a stigma against HCV. I don't tell everyone about it; I am carefully about who I tell, and when I had to tell my family and friends that wasn't very nice. But for the most part I didn't get any negative reactions to it; people said it was okay and it wouldn't affect our relationship. I was less concerned about others' reactions and most concerned about ensuring

I carried supplies around to protect other people if I got hurt out in public. I had to become more careful and vigilant about that than I otherwise would have been.

36. I have never had any trouble getting dental treatment. When I was first diagnosed I called the dentist and told them that I had gotten HCV and asked if they could still treat me, and they went to check with someone but came back and said yes that's fine. They now take more precautions than they would normally take, to ensure they don't get infected.

37. Before becoming infected I was working as director of a timber company, which involved manual lifting. I was having lower back and leg pain before becoming infected, but afterwards this worsened. I had a fall at work and hurt my back, but didn't do anything about it. I carried on working for a year and then knew something wasn't right, so had a scan and it was discovered that I had fractured some vertebrae. I went to see a specialist and they advised me to stop working, because if I injured myself again in the same place I could end up in a wheelchair. I was about 63 then, so I decided to retire a few years earlier than I otherwise would have.

38. I took cash from my pension fund early to see us through until I could get my state pension. I do think the infection has affected me and my wife financially, because if I had been able to retire two years later I would have gotten my full pension. At the time I would have retired normally, rather than feeling I could be comfortable and relax, I was still assisting my children financially and trying to make ends meet for me and my wife with my state pension.

## Section 6. Treatment/Care/Support

39. I did not have any difficulty obtaining treatment for HCV. I was offered treatment very shortly after my diagnosis by the team at King's College Hospital.

40. I have never spoken to a counsellor about my HCV. I would be prepared to do so if I felt I needed to, but I have never sought that out. When I had the cancer

operation years ago, I did speak to psychologist a few times on the ward after the operation. We discussed how it was normal for patients to feel depressed after an operation as they come to terms with the physical limitations of recovery and realise they are not exactly as they were before the operation.

41. I do think it would be useful for hepatitis patients to have a similar service, and I do think that there is a facility for this in the hospital if I needed it. It may not be a trained psychologist but I'm sure I could speak to a hepatitis nurse there who could advise me.

## Section 7. Financial Assistance

42. At the time of my diagnosis with HCV I was told about the Hepatitis C Trust and the Skipton Fund by my clinicians.

43. I then applied to the Skipton Fund for a Stage One payment of £20,000 and Stage Two payment of £50,000. I received both payments.

44. I also started receiving annual payments in 2011 starting at £13,000 a year. This has gone up recently and I receive the payments monthly.

45. I also received a one-off payment toward a funeral plan from EIBSS in August 2018, at a total of £2,195.

46. I had no difficulties completing the documentation to apply for my payments from Skipton or EIBSS. I obtained an application form and phoned them up for advice and found them helpful on the phone.

47. There were no preconditions for applying for financial assistance other than confirming that I had HCV as a result of my blood transfusions and had cirrhosis of the liver, and supplying my bank details.

48. Although what we have received is welcome, I do believe that in view of the fact that the government and NHS knew there was a problem with blood supply coming from dodgy areas, more should have been paid out.

## Section 8. Other Issues

49. I was able to obtain copies of my GP records, which had confirmation of my blood transfusions. I supplied this to the Skipton Fund and to my consultant at Kings College Hospital to show proof of my transfusions for the purposes of my financial assistance application.

50. I am concerned that I was initially not able to obtain copies of my hospital records from the Princess Royal Hospital. When I was gathering information for my Skipton application I phoned the hospital and asked for a copy of my records, and they said my records were only available back to a certain date which did not include the transfusions. But this year, when I went to one of my monitoring appointments at the hospital, the consultant who saw me was reading a copy of the early notes. I am not sure if the early notes were stored in a different place and the person I spoke to wasn't aware of this, but in any case I wasn't able to get a copy. However, since then my solicitors have obtained copies of my hospital notes from both the Princess Royal and Kings College, and my GP records.

51. My main hope for the Inquiry is that it is thorough and can interview as many people as possible who were involved at the time and may still be alive today, and obtain paperwork from when problems were thought to exist. It is important to me that we get to the truth.

52. I hope someone who is still alive who had dealings with it in the past, holds their hand up and admits responsibility for it. I would like someone to say, "Yes, we knew about this but we decided to carry on because of a shortage of blood," or whatever the reason is. If at any point they knew there was infected blood, they

should have destroyed it. I know they would have struggled to have enough supply, but they should not have used blood that posed such a risk to the public.

53. I also think there are a lot of people walking around today who are infected that don't know they're infected. It was only because I had to see a different GP than usual, who happened to have more experience of HCV than my regular GP, that I was diagnosed when I was. I hope that enough awareness is spread by the Inquiry that everyone who is suffering from these symptoms knows to get tested.

## Statement of Truth

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

Signed ....... GRO-C .......

Dated ...5/12/2019............