Witness Name: Linda Ewen
Statement No.: WITN5397001
Exhibits: 0
Dated: 23/9/21

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF LINDA EWEN

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 1 March 2021.

I, Linda Ewen, will say as follows: -

Section 1. Introduction

1. My name is Linda Ewen. My date of birth is GRO-C 1957 and I reside in GRO-C with my husband. I am originally from GRO-C and we have lived here since 1983. My husband is originally from GRO-C.

2. I still work and I am currently self-employed as a bookkeeper at Sunny Hill Motors. I have worked there for 20 years. I also work for another car firm, providing bookkeeper services for them.

3. My husband was made redundant from his job in June 2020. He was a group parts manager for a company that sold agricultural machinery parts. He tried to find other employment after he was made redundant,

but was unsuccessful as there were more firms making people redundant than there were hiring. He therefore decided to retire last year.

4. My husband and I have been married for 43 years and we have two daughters, Laura and Angela. Laura was born in 1983 and Angela was born on the GRO-C 1985.

5. Laura is 38 years old and is married with 2 children. Angela died on 30 October 1999 after a battle with leukaemia. Angela was infected with HCV as a result of receiving contaminated blood after having blood transfusions as part of her leukaemia treatment.

6. I intend to speak about Angela's infection with HCV. In particular, the nature of her illness, how the illness affected her, the treatment she received and the impact it had on her and our lives together.

7. My husband was present with me during my meeting with the Investigator and he has contributed to this account about Angela's illness and its impact on us as a family. He has chosen not to provide his own statement to the Inquiry.

Section 2. How Affected

8. Angela was born 2 weeks early, but I had a normal birth and she was a normal baby.

9. In August 1988, when Angela was around 2 years old, we went for a day out at the annual GRO-C show. The show usually takes place during the first 2 days of August each year. Angela was usually a live wire and very active, but on this day I noticed that she slept all day in her buggy. It would be normal for her to have been up and about.

10. When we returned home I went to bath her and noticed spots all over her body. I spoke to my neighbour who said that it could not be measles as the spots seemed to be under the skin. He thought that she might be suffering from malnutrition because she had an extended tummy.

11. The next day when I got her up her lips were blue so I made an appointment with our GP right away. She was so bad when we got to the GP that he knew without even doing a blood test that there was something very wrong with her. He took her blood sample and sent us straight to the Royal Aberdeen Children's Hospital. We were lucky that our GP was a leukaemia doctor and had just come from working on a leukaemia ward.

12. We attended the Royal Aberdeen Children's Hospital on 3 August 1988 and Angela saw a Consultant, Doctor Derek King. By 10pm that night, Doctor King had diagnosed her with leukaemia. The full name of the diagnosis was 'acute lymphoblastic leukaemia'. Angela received her first transfusion of red cells on that day and the first transfusion of platelets was on 4 August 1988. This was before she was sent to theatre for a bone marrow and lumbar puncture. After this Angela had a number of transfusions of red cells and platelets during the course of her illness.

13. We were not given any information about the risk of Angela contracting any infections from these transfusions.

14. She was treated by Doctor King at Royal Aberdeen Children's Hospital for around 2 years. She underwent intense chemotherapy and radiotherapy to start with and they did not expect her to acheive remission because of the high white cell count when she arrived. After 2 years she went into remission and went back to school.

15. When she was initially diagnosed Doctor King thought she would only last for 6 months, but she lasted 11 years. After going into remission, Doctor King gave her a 50/50 chance of recovery.

16. In 1992 Angela relapsed and in 1993 she was sent to the York Hill Hospital in Glasgow for a bone marrow transplant. At York Hill she was put under the care of Doctor Gibson. At the same time, she was still under the care of Doctor King, and continued to see him up until she passed away. The bone marrow transplant took place on 22 April 1993.

17. Angela was in York Hill Hospital for the bone marrow transplant for about a month. She continued to receive treatment after the transplant. Because we were there for a short period of time, we didn't really get to know the doctors at the hospital. As I mentioned previously, Angela was also under the care of Doctor King at the Royal Aberdeen Children's Hospital throughout her whole illness, from day one to the very end, so we trusted him with his ideas, decisions and treatments.

18. As I mentioned previously at paragraph 12, Angela continued to receive transfusions during the course of her illness. She continued to receive them during her treatment at York Hill Hospital.

19. Angela relapsed after the bone marrow transplant. It is a commonly held belief that a bone marrow transplant is the cure for leukaemia. I assumed, in my ignorance, that the bone marrow transplant would be the final step. I thought that if she survived it she could be cured. I didn't realise that she could suffer a relapse after that.

20. The doctors did not tell us that relapse was a possibility. I went to Glasgow thinking that she could be cured. Looking back, I am not sure whether HCV was the reason for Angela's relapse. We just don't know. Nothing was said about whether it played any role at the time. I have a

feeling that they did not want to tell us anything as they feared they would be blamed.

21. Over the course of her illness, Angela relapsed a lot. In 1995, Doctor King diagnosed Angela with HCV. He told us that Angela could not be given any treatment for HCV because her leukaemia treatment would be compromised. Doctor King told us that it was most likely that Angela had contracted HCV as a result of the bone marrow transplant. We were not given any further information about it and the subject of HCV was never brought up with us again.

22. When he diagnosed her, Doctor King told us that he had already known for a couple of years that Angela was infected with HCV. He was of the opinion that he was doing the right thing by not telling us about the HCV diagnosis as in his view he was trying to protect us, but it shocked us.

23. Angela's initial diagnosis with leukaemia had devastated us anyway, but waiting until she finished her leukaemia treatment and then to be told that she had HCV, killed all our hope. If we had known from the beginning about the HCV it would have been easier for us to deal with. At the time, we were angry, but we didn't want to argue with any of the medical professionals about Angela's HCV diagnosis, the delay associated with it, or the lack of treatment, as we didn't want to put her leukaemia treatment at risk, so we kept quiet.

24. I met with Doctor King around 6 months after Angela's death. He wanted to know what we thought about Angela's treatment. I asked Doctor King why he didn't tell us about the HCV earlier. He said that he was trying to save us from more worry. I told him that it had caused me a lot of grief and that where I had trusted him implicitly before, I now thought 'Is he telling me everything?' He was such a professional and we were surprised that he acted in this way. There were a lot of

questions as to why we were never told. He should have told us upfront. It would not have made much of a difference to us, it would have been just another thing to add on to everything else we were dealing with.

25. These days there has been a change in the view of the medical profession and doctors are afraid to not tell you about things. They are so risk aware. My mother had a triple bypass when she was 83 years old and the Doctor told her everything that was involved in the surgery. He was upfront with her and said that of course if the operation was successful then everything would be well, but was clear with her that there was a chance that she may not make it off the operating table. He went into very graphic detail about the procedure and the risks involved.

26. Aside from the delay in notifying us about the HCV, we were very happy with the treatment Angela received, we had no qualms about it. The staff at the Royal Aberdeen Children's Hospital were very dedicated and Doctor King couldn't have done more for Angela. We have total respect for him. He did everything he could, including taking days off to attend to Angela.

27. Angela wasn't showing any symptoms at the time, although I am not sure what the symptoms of HCV are.

28. It was a bit of a bombshell for us when Doctor King told us about the HCV. It was a shock. He did not go into any details about the disease or how it would affect her at all. Very little was said about it, we were not told whether it would be a contributory factor to her wellbeing. We were just told that she had it. We had heard about HCV before, but we did not have much knowledge about it. We knew that it had something to do with blood, but we thought that it was more to do with people who took drugs.

29. As I have mentioned previously, we were upset that they had known about the infection for 2 years, but hadn't told us. HCV is infectious and Angela had been going to school and playing with her friends. She could have infected them, as well as others. We were upset to learn that we were putting other people at risk for all of that time without even knowing. There was also the added concern that Angela bled easily because of the leukaemia, so this compounded the risk.

30. I describe their delay in advising us of the HCV diagnosis as a bit like closing the stable door after the horse has bolted. They should have told us earlier, we should have known because of the risk factor of infecting others, if nothing else. We thought, 'can we trust anyone? And If they didn't tell us about HCV for 2 years, what else were they not telling us? We really lost trust in the medical profession going forward. It was like suddenly that trust diminished after knowing that they knew about it all that time, and they knew that Angela was at risk of transmitting the infection for all that time.

31. We know that they screened Angela's blood during her treatment, but we don't know whether she was being tested for HCV. She was always in hospital or in clinics getting treatments and it is strange that it was not picked up as she was always getting her blood tested when she was having the blood transfusions. In addition to this, Angela would have been infected around the time period in which HCV testing was meant to have first been implemented.

32. Once she was diagnosed with HCV, the next time that Angela relapsed she was not given the full chemotherapy treatment for leukaemia because of the HCV. So she went from complete treatment to a maintenance treatment. The treatment was becoming less and less effective as time passed. She relapsed again 2 years after the bone marrow transplant and died on 30 October 1999. At that point, she was

losing lots of blood. She was bleeding internally and they were giving her platelets and blood. This wasn't working so they had to stop the treatment.

Section 3. Other Infections

33. As far as I am aware, Angela did not receive any other infections besides HCV.

Section 4. Consent

34. I do not believe that Angela was ever treated or tested without our consent, or without being given adequate or full information, or for the purposes of research.

35. I recall that for anything major like the blood transfusions Angela received as part of the Leukaemia treatment, we would usually be required to sign a document stating that we gave the hospital permission to go ahead with them.

Section 5. Impact

36. My husband and I have forgotten a lot that went on during Angela's illness as it involved a lot of up's and down's that went on over a period of years.

37. Because we were not really given any information about HCV and the symptoms, and due to the fact that Angela was suffering with leukaemia at the same time, it is difficult to establish whether the impacts on Angela's health were as a result of HCV.

38. We don't know whether receiving treatment for HCV would have made any difference to Angela's wellbeing or helped her in any way. We are also not sure whether it played a major part in her decline either. We just don't know, as we were not given any information about the condition, and we are not medically qualified so we are not able to give an opinion on it. We think that the Doctors should have given us a better explanation of HCV and its effects.

39. We know that Angela had liver problems, but we cannot establish whether or not it was HCV that caused this.

40. Angela suffered terrible muscle spasms and her legs would go rock hard. She would scream in pain as her legs were so sore. She was on morphine to relieve the pain for around a year before she died. We did not hear any other leukaemia patients on the ward complain about sore legs so it may have been a side effect of the HCV, but as I have mentioned previously, we were not able to differentiate whether it was caused by the leukaemia or the HCV.

41. She lost her hair. Her wellbeing in general was greatly affected by her illness. When she was well, we were well, but when she relapsed we would go back to square one.

42. Sometimes Angela would go to the pool after school with her friends. The next day she would be on the sofa for the whole day as her energy levels had been depleted.

43. Angela had very bad teeth as the chemotherapy she was receiving destroys the enamel on the teeth. Before she was diagnosed with HCV, the school dentist did a scale and polish and ruined her teeth as they removed all the remaining enamel. When she came home from school we could hardly see her teeth.

44. Eventually she had to have all of her teeth removed in hospital. I remember the day that she had her teeth removed, she haemorrhage in her bed at night. This was because the leukaemia caused excessive bleeding. When I found her she was lying on the floor covered in blood and the bed was soaked with blood. If you saw the bed, the blood was so bad it looked like someone had been murdered. It was so bad I had to cut her night dress off. We ended up having to go to Aberdeen so that Angela could have a blood transfusion.

45. Whenever Angela relapsed, the doctors knew just by looking at her. When I would sit next to Angela to talk to her I could smell the leukaemia. I would tell Doctor King that she had relapsed as I could smell it. The family dog also seemed to know when she had relapsed and would just lie at her feet. It seemed to know that she was ill again.

46. During the last months of her life Angela was an adult and she was fully aware of what was happening, whereas when she was diagnosed with leukaemia she was only 2 years old so she could not comprehend it.

47. In relation to her HCV diagnosis, Angela was told that she had contracted the virus because she needed to know just in case she bled at school or anywhere else. She would have to tell people to put on gloves if she was bleeding as back then people did not routinely wear gloves if they were dealing with a child that had grazed themselves on the playing field.

48. I can't really say how the diagnosis with HCV affected Angela mentally. All I know is that she was just so matter of fact. It was just 'oh well, something else to deal with', 'what else am I going to get?' I didn't really know what she was thinking.

49. Her moods did fluctuate. The amount of treatment she was on for the leukaemia affected her. She would lie in bed with the covers up and

she said that she did this as she couldn't deal with the light. Sometimes I would go into her room and she would tell me to get out, that she wanted to be left alone. It was a horrible thing to witness.

50. When she was fit and well enough she had no fear. She would climb up on anything in sight. If someone told her that she could jump off a cliff she would have tried it. If you told her not to, she would have still done it. She once touched my cooker and then asked whether it was hot. If it had been, she would have been burnt.

51. She was pretty amazing most of the time. She was quite a character with a good sense of humour, but I think she put a lot of it on to hide how she really felt. I know she was scared, but she behaved the opposite to how she felt. I think that it was a bit of a bravado act.

52. Angela had a great imagination. I recall one occasion where we had an appointment with Doctor King. I remember it was around New Year and Doctor King asked Angela how her New Year celebrations had gone. She said something like, 'It was ok, I just had a few Bacardi breezers'.

53. I remember when she was around 10 years old, she started leaving notes everywhere around the house. At one point there was a note under each of I and my husband's pillows apologizing for something she had done earlier. On mine there was a picture of a face with tears and it said 'I'm really sorry, I won't do it again'. Her dad's note read, 'I meant it'. She was a real character.

54. We did a lot of fundraising for leukaemia charities.. My husband had a band at the time so they would play for leukaemia charities. People got to know Angela through attending these events. She was an outgoing child, but I think that she used this to mask the pain.

55. We took Angela on a family trip to Florida and Disneyland Paris during her illness. We tried everything possible to do what a normal family does.

56. When Angela died, some of the teachers at her school were shocked that she was so ill. Because of her illness, Angela took a lot of time off school. They threatened to take legal action if she did not attend school. I went to a meeting with the Head Teacher and some others and they said that it was very important that Angela attend school as she would be getting her GCSC's the following year.

57. At this point, we were told that Angela would not live long, and the school knew that she was very ill and on treatment. Angela was on morphine and the school nurse had to administer it, so they would have known how unwell she was. We thought, 'what part of she won't be here don't you understand'. We found it bizarre that they knew how unwell she was but they were concerned about her attendance.

58. The school also knew that Angela had HCV, as we told them about it. I felt that I couldn't live with myself if Angela fell at school and her blood contaminated someone. I also told the school that if any students had an illness such as measles they would need to inform me as I would need to remove Angela because the treatment she was on caused her immune system to be compromised. The school failed to do this on many occasions. I would find out a fortnight later from other parents whenever a child was sick.

59. None of the kids in town or at school ever tormented Angela about being bald as a result of her leukaemia treatment. She took not having hair or eyebrows in her stride. She would wear lots of hats. She didn't mind not having hair. As I've said before, she was a real character. I remember we went on holiday and there was a performer who was dancing. The performer accidentally tipped Angela's hat off. The

performer started crying and Angela then started crying because he was crying.

60. Angela's illness prevented us from doing things as a family. We couldn't really go on many outings as a family because Angela was always on treatment and her immune system was very low. We couldn't be around crowds because of the risk that she may catch something like measles or chickenpox and this would be very dangerous for her. People were confused about this and they thought that we didn't go out because Angela was contagious, however what they didn't understand was that it was actually dangerous for Angela because of the risk of infection.

61. We were generally happy with the treatment Angela received, however I watched over Angela's treatment at hospital with a critical eye. I remember one occasion where a doctor came into Angela's room with 3 syringes. I knew that the drugs she was given needed to be given intravenously, and told him this. I was a diehard when it came to looking at the medical charts in Angela's room and I knew that they definitely stated that the drugs were IV drugs.

62. We argued and argued and the Doctor eventually administered the drugs by injection. He came back half an hour later and told me that the drugs were in fact meant to be IV. As a result of this, he had to flush them. There were no consequences and Angela was fine, but it could have been more serious. After this, I would always check what drugs she was being given and why.

63. When Angela was initially diagnosed with leukaemia we were devastated. We didn't know much about it and we felt helpless, especially being told that she only had 6 months to live. As I have mentioned previously, when Angela was well we were well, but when she was unwell we were devastated.

64. As time went on, we had to face everything for her. As she got older, she understood more and sometimes she would ask us when she was going to die. She would have been around 10 years old when she started asking these questions.

65. I threw myself into my work to distract myself from thinking about Angela's illness all the time. Work saved us in a way.

66. I was more directly involved with Angela's treatment and I often stayed with her in hospital while she was being treated. This involved long periods of time at hospital and a lot of overnight stays. I had to travel back and forth when Angela was in hospital, and I had to travel back and forth to relatives' homes to leave Laura with them while I was staying at the hospital. I would pay a lot for fuel for these trips. It was often easier and made more sense financially to just stay at the hospital rather than do the 60 mile round trip to the hospital and back home. Often my parents would help me out with finances for all of these trips.

67. In addition to this, if I left Laura at a friend's house for a week because I was staying in hospital with Angela, then I felt as though I needed to contribute some money toward food expenses for the week.

68. When I stayed at the hospital I also spent a lot of money on buying food from the hospital canteen and vending machines. I therefore had to work a lot to cover all of these travel and food expenses. The expenses I was incurring were never discussed with the hospital, and they never provided any support. We just got on with it.

69. During the intense periods of treatment I would be on the ward very early, sometimes 1am, sometimes 7am. This all depended on how badly Angela was feeling. It also depended on the staff who were

available to be with Angela at the time. She liked some staff more than others as some staff were more fun than others. In situations where there was a staff member she didn't like, she wouldn't go to bed and she would not want to be left alone with them. On these occasions, I would have to stay with her until she fell asleep. Sometimes she would not fall asleep until 1am, and I would have to stay with her until then, go home, and then come back to the hospital at 7am when she woke.

70. I remember one occasion, a few weeks before Angela died, where I was up all night with Angela. The hospital had offered to provide Macmillan nurses to be with her through the night, but I wouldn't allow it because I knew that she would wake in the middle of the night and she would have wanted me there and not a stranger. I also knew that she was at an age where she would have known that the Macmillan nurses being there meant it was the end. So even though I was shattered that night, I wouldn't allow the Macmillan nurses to take over. I think that if the hospital had offered the Macmillan nurses earlier, and Angela had got to know them, they would have been more useful.

71. As a result of my husband and I being at hospital all the time with Angela, we had less time for Laura. When we were at hospital we did not have the time to think about the impact on Laura, but when we did have the time, we would realise how it had affected her.

72. Angela's illness had a detrimental effect on all of our lives, especially Laura's. As I have mentioned previously, I would stay overnight at the hospital with Angela a lot. I would be away for days at a time. There would be occasions when Laura would go to bed at night and would then not see me for a couple or a few days, sometimes even a week. That would have a detrimental effect on any child's life.

73. Any complaints Laura had were superficial because of Angela's illness. She was made to grow up very fast and she did lose a lot of her

childhood. I think she had to grow up alone because all the focus was on Angela.

74. Because Laura acted so grown up, we often forgot how young she was. I think the fact that she was separated from Angela, and spent most of her time growing up among her grandparents, may have caused her to mature faster.

75. Laura spent time with her grandparents, who lived 30 miles away, and my sister, who lived around 20 miles away. When Angela was in hospital in Aberdeen, she went to stay at my sister's for around 5-6 weeks. We had to take her out of school and put her into a school close to my sister for this time. She didn't miss any of her schooling and she enjoyed the new school. I think that we were lucky that it happened when she was in primary school as it was easier to make friends at her new school. I think it would have been tougher for her to make friends if she was in secondary school.

76. Angela died when Laura was around 16. The disappointing thing was that Laura wasn't in the country when Angela died as she was away for a short holiday with her Aunt. Their plane had just arrived at Aberdeen at the time that Angela passed away. When the plane landed Laura and her Aunt had to be kept on the plane until all of the other passengers exited. They were then taken to a room set aside for them and we had to break the news of Angela's death there. She was devastated and it was a very traumatic experience for her.

77. After Angela died, Laura refused to go back to school. She had always done very well at school and she originally wanted to go to university and be a teacher. However, after leaving school she did not do this. She didn't know what to do after leaving, and we were terrified that she would get depressed if she stayed at home with nothing to do, so I

made her give her CV to every business in Turriff. She got an interview with the Royal Bank of Scotland and has been with them ever since.

78. As I have already mentioned, Laura continued to do well at school during Angela's illness, but she was quite rebellious as all of our time was taken up with Angela. We tried to treat them both equally, to devote equal time to both of them, but we could not do this because of the attention Angela needed due to her condition.

79. Laura married not long after Angela passed. It was about 5 years after her death. She was 21 when she married. The marriage only lasted a couple of years and then they divorced. I feel like Laura married at this point because she just wanted someone for herself. I don't think that she married for the right reasons.

80. I think that she lost a lot of her childhood, as we were not always there for her because of our focus on Angela. She was reaching out for someone of her own. I think that Laura thought that marriage would be her solution and that it would make life better. Although it didn't last, and the divorce was traumatic for them, we are glad she is more settled now. She has remarried and we have 2 grandchildren.

81. As I have mentioned previously, Angela's illnesses prevented us from going on outings together as a family. We couldn't go to many places as Angela was on treatment and her immune system was very low. She couldn't be around crowds as it would be dangerous if she was infected with measles or chickenpox.

82. We couldn't do the things that normal families could do. We tried to pack in as much as we could when she was well, not only for Angela herself, but for Laura as well. I think we probably had better outings than other families because of this. We went to Florida and we really spent a lot of quality time together. We would take the children out to

less populated places on the coast where they could play, when a lot of families would just take their kids to a packed fairground and put them on a ride. I'm glad we got to have this quality time together.

83. When Angela was in hospital in Aberdeen we could only take her out for a few hours then bring her back. There were not many places we could visit in Aberdeen, so it was nice when we were able to get out to the coast.

84. My husband expressed how he always hated Sundays at the hospital as there were not a lot of people around. The recent COVID-19 lockdowns remind him of being in the hospital. We would spend hours and hours there, and there were many times when we would fall asleep at Angela's bedside.

85. COVID-19 has also reminded him of having to wear full PPE when Angela had the bone marrow transplant. We remember at one point we stopped wearing masks when visiting as we were advised that bacteria would build up on the masks and this could contaminate the room. Looking back, I can't imagine Angela wearing a mask now during COVID.

86. It made us anxious and frustrated that even if we had a million pounds we could not have helped her more. The helplessness of the situation made us very calm and it helped us to deal with a lot more that we were faced with in life.

87. When Angela was ill, I dealt with it and I got on with it. I never questioned anything that I did for her. We were just swept along by it all and we had to deal with it. We were always on hand to make sure that Angela wasn't alone and that she got the best treatment possible. We had to adapt as we were the only ones who could be there for Angela. There was no support for us at the time. I think that in the present day

there would be a lot more help available. I felt as though I was the one who had to deal with it as no one else would.

88. We found that our friends did not understand when Angela was diagnosed with leukaemia. Many of our friends stopped visiting us after Angela was diagnosed. Some of them had the impression that Angela's illness was infectious. Other friends stood by us, but they were few and far between.

89. I recall one couple who we were very good friends with. We would be at each other's homes every weekend. When Angela was diagnosed, that was it, we didn't hear from them anymore. It was very hurtful.

90. What was upsetting for us was this loss of close friends. My husband has recalled how we sometimes felt very alone. My husband says that the way people avoided us gave him the idea that the way they looked at it was, they were glad that it wasn't them going through what we were going through. It was as though they closed their door and thought, we don't need to deal with them.

91. GRO-C is a small town with a population of about 5000 and everyone knows each other. I found that when walking around town some people would cross the road to avoid us. Some said that they didn't know what to say to us. We would have just preferred it had people acted normally around us.

92. My husband's work colleagues knew about Angela's illness. Constantly being asked by his colleagues how Angela was eventually got him down. He felt like he would rather not be asked at all.

Section 6. Treatment/Care/Support

93. Overall, I do not feel that Angela faced any difficulties or obstacles in obtaining treatment, care or support in consequence of being infected with HCV. As I have mentioned previously, we were mostly happy with the care she received from Doctor King and from the York Hill Hospital for her leukaemia, and we have no idea whether or not receiving treatment for HCV would have improved Angela's condition. However, as I have mentioned we were very unhappy with the 2 year delay in informing us of Angela's HCV diagnosis.

94. Initially Angela had a dedicated nurse at the York Hill Hospital, but as time went on it was just the senior nurse on duty who attended to her, it became more casual.

95. We were not really offered any psychological help. We used to get a Macmillan social worker who was an ex-nurse. She came before Angela died. She was like a liaison officer between the hospital and ourselves. Her role was more focussed on giving us support and advice about Angela's care and treatment. For example, I had to regularly flush Angela's Hickman line at home, so if I had any problems with that she would help and advise me.

96. We had a social worker on the ward at Aberdeen sometimes but he went off work with depression. There was no support offered by the hospital. There were some families in the ward who got some financial help, but in those days there wasn't any support. The effects on family were not spoken about much at the time, you had to just grit your teeth and get on with it.

Section 7. Financial Assistance

97. I wasn't aware that the Skipton Fund existed until about 2010. Around that time, I went to see a doctor as the medication I was on at the time

was affecting my liver. After examining me, the doctor said words to the effect of, "It's not the big C, and it wouldn't be the other one".

98. I assumed 'the other one' he was referring to was HCV. I informed him about Angela and her diagnosis. He asked me what kind of compensation we had been given. I told him that we hadn't received any and that it had never been mentioned by anyone. He informed me that we should have been fully compensated.

99. After finding out about Skipton from this doctor we made an application to the fund in 2011. We were awarded the first stage payment of £20,000, but we were refused any further payments on the grounds that Angela did not receive any treatment for HCV. As I have mentioned previously, the reason why Angela's HCV was not treated was because treatment for the infection would have compromised her leukaemia treatment.

100. I did supply Skipton with Angela's death certificate which lists HCV as one of the causes of death. We thought that HCV being on the death certificate would surely mean that we qualified for the further payment. Our view is that it shouldn't have mattered whether or not Angela received treatment. The fact that HCV is on her death certificate should have been enough for us to receive the further payment.

101. The wording of the correspondence we received in relation to the second payment was that if we were not granted the payment then we should not re-apply. Therefore, we did not reapply as Angela had not received treatment for HCV.

102. In any event, we did not have the fight left to re-apply. We thought, why should we have to fight again.

103. When we initially applied to the Skipton Fund for the first stage payment they wanted us to provide medical records to confirm that Angela had received blood transfusions as part of her leukaemia treatment at the Royal Aberdeen Children's Hospital. This was despite the fact that I enclosed an email from Doctor King who confirmed that Angela received the transfusions.

104. He specifically set out that he was able to see from his notes that Angela had received the first transfusion of red cells on 3.8.1988 and the first transfusion of platelets was on 4.08.1988, before she went to theatre for her bone marrow and lumbar puncture. He was also able to confirm that after that she had a number of transfusions of both red cells and platelets during the course of her illness.

105. In addition to this, I knew a lot of the dates on which Angela was given transfusions as my mother kept a detailed diary referring to many dates on which she received blood. She kept the diary until Angela died and has not written in it since she passed. The diary was supplied to the Skipton Fund.

106. One portion of the diary records some of the transfusions Angela received. It states that after receiving the bone marrow transplant on 22 April 1993 she had full body chemotherapy then received blood transfusions on the 28th. It goes on to say that on 6 May she was removed from the sterile cubicle and taken onto the ward where she was given more transfusions.

107. I think that Skipton should have been able to obtain the medical records themselves. They should have been the ones who followed this up earlier. I feel that the onus was on Skipton to undertake some sort of look back exercise to find out who supplied the contaminated blood and to contact those who received it.

108.They should have apologised to us and we should not have been made to seek out Angela's medical records. It would have been fairly easy for Hospitals to collect the records and forward them to the Skipton Fund. It would have been far easier for them to do it than us doing it on our own.

109.Compensation is not going to bring Angela back, but it's the principle. It shouldn't have happened. The infected blood scandal has been on TV and in the media over the years and people assume that we have received compensation. They think, you're ok, you've been compensated, but we never really have been fully compensated.

110.We feel that if we had received compensation when Angela was alive, it would have made a huge difference as we would have been able to do a lot more with her. We feel that everyone should have been treated equally regarding compensation, whether they received treatment for HCV or not. We also feel that Laura would have benefited from the compensation, as she has suffered a lot. We feel as though she could have benefited from the money now.

Section 8. Other Issues

111.We hope that this Inquiry brings out the truth and ensures that the situation with contaminated blood never happens again. It's people's lives we are dealing with here. They should have never been given contaminated blood products.

112.My Husband feels that a lot has been hidden from the general public, a lot has been withheld about this scandal. I think that there must have been a cover up as doctors say that giving patients the blood products was for the best, but they would have known that they were infected. Surely, they would have been trying to eliminate the infected blood rather than giving it to patients.

113.There was a stage in Angela's treatment where they wanted Angela to participate in a clinical trial of a new leukaemia drug. She would either be given the actual drug or a placebo. They asked our permission for Angela to participate but we declined. Angela had just relapsed another time and we did not want to take the risk that she could be given a placebo drug that was having no effect on the leukaemia. We did not want to risk her life as she had relapsed a couple of times already, and we wanted her to have the best possible treatment.

Statement of Truth

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

Signed GRO-C

Dated 23/9/21