ANONYMOUS
Witness Name: GRO-B
Statement No.: **WITN5487001**
Exhibits: **WITN5487002-007**
Dated: 14 April 2022

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF GRO-B

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 14 February 2022.

I, GRO-B will say as follows: -

Section 1. Introduction

1. My name is GRO-B My date of birth is GRO-B 1960. I grew up and lived in GRO-B London before moving to GRO-B in 1993. I now reside in GRO-B Spain with my husband GRO-B and my full address is known to the Inquiry. I started working as a Carer in the London Borough of Barnet in 1989. I later obtained an NVQ qualification in Social Care in 1999. I later received a warden's certificate in social housing from the Chartered Institute of Housing (CIH) after studying at Exeter University.

2. I spent the subsequent years working in the care sector. I enjoyed working with elderly people and writing their care plans and putting them into action. I carried on working in the care industry in Devon. In 1999 I transferred over to GRO-B for GRO-B Council as a sheltered housing resident scheme manager. I took voluntary redundancy in 2005 as a direct result of my HCV infection and treatment.

3. I have a daughter and son from my previous marriage, and a daughter and a step-daughter with my husband GRO-B We have 12 grandchildren and 3 great grandchildren.

4. I intend to speak about my Hepatitis C ("HCV") infection, transmitted via a blood transfusion. In particular, I will discuss how I came to be infected, the nature of my illness and the impact it had on my life, my family and our lives together.

5. I can confirm that I am not currently legally represented and that I am happy for the Inquiry Team to assist with my statement. I also confirm that the Inquiry Investigator has explained the anonymity process to me. I wish to be anonymous as I wish to protect my family.

6. The Inquiry Investigator has explained to me the 'Right to Reply' procedure, and I understand that if I am critical of a medical professional or organisation, they will have the right to reply to that criticism.

7. I wish to acknowledge that naturally as time passes, memories can fade. I have been able to provide approximate timeframes for matters based on life events. However, these timeframes should be accepted as 'near to' rather than precise dates in some instances. I have also used some of my medical notes in constructing this statement.

Section 2. How Infected

8. My ex-husband and I married in GRO-B shortly after discovering that I was pregnant at the age of 16. I told my mother and

because I wanted to keep the baby she thought that I would have to get married. The night before the wedding, I was told by my father that I did not have to go ahead with the wedding and that he would support my baby and I, but I told him that it was too late. Our son was born in [redacted] 1977. My first husband was not a very nice person and we had a difficult relationship. All of my ex-husband's behaviour points towards him being a narcissistic sociopath.

9. I was raped two hours before the birth of our daughter. I phoned for an ambulance and arrived at St Bartholomew's Hospital, London at 6.55am i[redacted]978. Our daughter was born screaming at 7.05am, but I was just relieved that she was born safely.

10. After our daughter's arrival, my ex-husband and I split briefly for 4 weeks. He came to visit the children and bought me gifts during this time. We eventually reconciled on the proviso that he would never to anything like that to me again. He could not fully grasp that his behaviour was wrong. Things were good for a while, but I eventually suffered a fractured left cheek bone and eye socket. To this day, over 40 years later, I still have a lump there which swells up.

11. I suffered mental and physical abuse from a violent, manipulative, controlling, evil monster and constantly feared for my children's lives. My nose was broken at least 4 times during our relationship and I have old fractures in my right arm from defence wounds. He threatened that if I attempted to leave, he would cut me to pieces and force me to watch him kill my children.

12. For a long time, I was not aware that my ex-husband had been injecting heroin. I knew that he smoked weed but did not realise he had moved on to other illicit drugs. On one particular occasion, when I caught my ex-husband injecting when I walked into the bathroom, I went ballistic. He picked up our son and threatened to stick the needle into his neck unless I took it myself. I did not take drugs willingly, I was forced and this happened on a few occasions over a couple of weeks. My ex-husband

would stab me with the needle and the injection site would balloon up. He used this as a weapon against me. To confirm, I did not intravenously administer drugs again after this period.

13. In 1980 my husband had a short-lived episode of jaundice, which shortly after I experienced myself. I was married and on birth control, so I was having unprotected sex. At this point I had absolutely no idea that my husband had been injecting heroin. I did not go to my GP at the time – my mother told me to drink lots of water to flush it out and the yellowing of the skin went within a week. I experienced flu like symptoms at the time but I had no sickness.

14. In later discussions with my consultant, Dr GRO-B at GRO-B Hospital, he presumed my earlier episode of jaundice to have been probably caused by Hepatitis B. The jaundice never recurred.

15. After separating in 1981, I had to have 7 of my top teeth capped, 2 of which were bridges as my ex-husband knocked them out completely.

16. We did not divorce until 1984 as my ex-husband would not sign the divorce papers. He only agreed to sign if I promised not to ask for maintenance for the children. I was given sole custody of our children. My son has memories of his father, but my daughter cannot recall anything and is in denial about his behaviour. My children were 7 and 6 at the time of the last visit from their father.

17. At the time of the divorce he was still in prison for cruelty and neglect of our son, who fell from a third-floor window whilst in his father's care. The window was 4 feet off the interior floor with a tiny windowsill that a 3-year-old could not reach, it was a sash window and was nailed so the bottom would only open about 8 inches. I had been sleeping in the bedroom, I was aware that my husband had got out of bed and then returned shortly after. Not long after I heard a loud banging on the front door. I went to check on my children as I thought it would have scared them. The window was open and my daughter was sitting on the bed

but my son was missing. I looked out of the window and saw a group of people standing around my son who was lying on the floor. The ambulance arrived and took him to the hospital. We went to the hospital where we were questioned by the police. The policeman told me that my husband had said that I had done it, I didn't know what he was talking about and told him they needed to speak to my husband because of his violent nature. I told him to speak to my husband as he had been looking after him at the time and that I had been asleep. They arrested my husband but let him come home that night. The social workers came the next day and took my children. The children were taken into social care for 6 months, after which they lived with my mother. My ex-husband was not allowed near me and did not have any knowledge of my whereabouts for safety purposes. My son suffered with curvature of the spine as a result of this incident but is now fine.

18. My ex-husband was in and out of prison – including 6 years for a rape charge, but as far as he was concerned it was never his fault – someone else was always to blame. I presume he must have informed the police about others as he never received the maximum sentence.

19. My ex-husband died in 1998 at the age of 38. I was told by his family that he died of liver failure due to HCV, but on his death certificate it states the cause of death as Di-hydro codeine poisoning and Hepatitis C positive, with a verdict as drug dependency.

20. On 27 October 1984, on the way home from meeting a friend, I fell down a metal staircase which led to my basement flat, hitting every step on the way down and landing on concrete. It had been raining heavily and I slipped at the top of the stairs. I ran in, got out of my wet clothes and went to bed. I woke up during the night in agony, I had extreme pain in my back and shoulder and what felt like air bubbles going up my back to my shoulder (which I had never experienced before). I took some painkillers and went to sleep. I got up in the night to go to the toilet but I

wasn't able to pass water which I thought was odd, but I went back to bed.

21. The following morning on 28 October 1984, I could not stand up. I phoned my sister later that afternoon, to see if her boyfriend could drive me to the hospital which she said he would do later that day when he was back from work. I got dressed and he took me to University College Hospital (UCH), now referred to as UCLH. At the point of being admitted to hospital, my stomach felt as though it was full of water and my blood pressure was sky high. I was informed that I had ruptured my spleen and that they would need to operate.

22. On 29 October 1984 I underwent a splenectomy at UCH, during which I received a blood transfusion of 4 pints. I was later informed that I suffered internal bleeding from the ruptured spleen.

23. I was discharged from hospital on 1 November 1984, with a nasty scar 8 inches long and a hernia caused by the actions of a physiotherapist on the second day of my hospital stay. She decided that I needed to be sat up in bed and proceeded to pull me up, yanking both of my arms. I screamed from the pain as I thought my scar had ripped open. A nurse rushed over to check everything. A lump had pushed through my rib cage on my right side. Two days later another physiotherapist instructed me to hold my breath whilst she sat me up. This was a great relief and enabled me to sit up without pain whilst the staples were still in. The staples were removed on 1 November 1984 after which I was discharged to go home.

24. A discharge summary was sent to my GP stating a ruptured spleen as the reason for my hospitalisation and instructing that I would need a new anti-pneumococcal vaccine. I was not given any anti-biotics at any point.

25. I was not informed that I had undergone a major operation and that my immune system would be compromised as a result of my spleen being removed. I was not aware that I would be susceptible to infection.

26. I was not made aware about the use of antibiotics or vaccinations until an appointment with my GP at GRO-B in 1993.

27. Whilst at the GP surgery I read a notice on the board saying that if you do not have a spleen, please inform your doctor. After doing so, I was told that I would need antibiotics and was prescribed a course of 250mg to take 3 times a day for a week and then once a day for the rest of my life. I was given a vaccination for pneumonia at the GP surgery. A few weeks later I was admitted to hospital with suspected pneumonia.

28. I met my second husband GRO-B in 1987 and we got married in GRO-B and lived in GRO-B London. We later moved to GRO-B in 1993.

29. When I became a GRO-B, the role came with the use of a 2-bedroom apartment, so my husband and I sold our house. In 2001 I took on another scheme as well as the existing two schemes I had responsibility for and we moved into a house onsite.

30. During 2001 I started to feel unwell with flu like symptoms, I was constantly tired, fatigued and became nauseous after eating fatty and spicy foods. I have never been a heavy drinker, but if I occasionally consumed a glass of wine, I felt awful and would frequently be sick and I put on a lot of weight for no apparent reason.

31. Within this time period, the GRO-B GRO-B s from GRO-B Council and recommended employees were vaccinated for Hepatitis A and B. I became extremely ill after the first dose was administered and had to take time off work due to the severity of the side effects. I did not take the second vaccine due to the adverse reaction. Interestingly, none of my colleagues experienced any adverse reaction to the vaccine.

32. I was constantly going to my GP at the GRO-B about my ailments and ill health, to which I was repeatedly told that I had a virus. This went on for nearly a year, until I said that I had had enough of feeling unwell as I had a job getting out of bed and had been struggling to work. I asked for a referral to be made as I held private medical insurance with GRO-B at the time, which I was able to have through my husband's policy.

33. At the end of 2001, I was referred to Dr GRO-B Gastroenterologist at GRO-B. My insurance plan paid for a consultation and blood tests, which confirmed I had HCV Genotype 1. I was first told of my diagnosis over the phone by someone from the hospital, but I had requested a phone diagnosis as it was near Christmas and I needed to know. I said that I wanted to be told by Dr GRO-B so he phoned me straightaway within minutes. He was on the phone for about 30 minutes and he explained everything to me including about treatment.

34. The diagnosis came shortly before Christmas 2001 and in early 2002 I went in for another consultation with Dr GRO-B. He explained everything in person and stated that I would need a liver biopsy to determine the extent of damage from the HCV infection because they couldn't treat without knowing the extent of the damage to my liver.

35. Dr GRO-B recommended that my husband and children should be tested so they were tested for HCV and the results were negative. Dr GRO-B discussed the testing of my daughter in relation to her young age. My youngest daughter did not want to be tested at the time of my diagnosis (she was 13 years old), but she agreed to being tested when she reached 16.

Section 3. Other Infections

36. I do not believe that I have received any infection other than HCV due to being given infected blood. My husband GRO-B and I were tested for HIV

when I was pregnant with our daughter and we both tested negative which I mention in more detail later.

Section 4. Consent

37. I gave consent to my splenectomy operation in 1984, they told me I had a ruptured spleen and that I needed an operation to save my life. However, there was no mention that I had to have a blood transfusion. I remember them taking blood tests to match my blood.

38. I was not told at any point of any risks concerning infections, either before or after my operation.

Section 5. Impact

39. After I was referred to GRO-B by my GP, at my request. Dr GRO-B told me that he thought it could be Hepatitis C. He carried out blood tests and the results came back as positive. I was informed that I would be unable to start treatment until a liver biopsy had been taken as they needed to see if there was any damage to my liver as this would influence what medication I was given to treat the HCV. I was told that I would have to wait 8-12 months to get a biopsy on the NHS. The treatment could only be given by the NHS and they only took on 2 new patients each month for treatment. As mentioned earlier, I didn't want to wait this long for the biopsy and that is why we paid to go privately.

40. My GRO-B health insurance did not cover this procedure and the NHS wait time was between 8-12 months. My husband and I therefore decided to pay for the biopsy on our credit card, to the cost of £1,600. We felt as though we had no option but to pay privately as I felt so ill and could not wait in line for a biopsy with the NHS timeframe as it stood. I was terrified and I was in that much pain and so ill. My husband commented that my life was far more important and it was necessary to fund the procedure ourselves.

41. The liver biopsy was conducted in early 2002 and detected chronic HCV, but no damage to the liver.

42. Treatment for HCV was only offered through the NHS, who only took on 2 new patients a month. No medical professional ever mentioned the cost of the treatment, but from my own research I discovered that it was approximately £31,000 back then. I asked if it was a lifelong cure, but was told that they did not have enough information then, as the medication had only been used for 5 years and there had been no long-term research conducted at that time.

43. I started a course of Interferon and Ribavirin on 8 April 2002. I was asked beforehand by the specialist nurse, GRO-B if I had ever suffered from depression, to which I replied no, because I hadn't. The nurse specialist then went on to explain that depression was known to occur frequently as a side effect with Interferon therapy.

44. I was given a demonstration of how to inject the Interferon and given an orange on which to practice on as apparently it is the nearest texture to skin. I don't like needles so I just stuck it in to the orange quickly. I recall the liver nurse commenting that I had done a good job, to which I thought to myself it will be different when I have to inject my own skin.

45. I was told not to drink any alcohol whilst on the course of treatment and I do not drink now.

46. I had to inject the Interferon 3 times a week on a Monday, Wednesday and Friday, alongside taking daily oral tablets of Ribavirin. For the first 4 weeks of the treatment I was monitored weekly, after which it became monthly monitoring.

47. At the time of the treatment, my husband was working away in Europe, so it was just myself and our 13-year-old daughter at home. I am terrified of needles and I bruise easily, so I was black and blue all over. I would dread injecting myself. I cried, I screamed and I shook like jelly. All of

this upset my daughter, she would corner me in the house and beg me to administer the injections of Interferon. It was as though we switched role and she assumed the parental responsibility. I find it very upsetting reliving these painful memories. My husband and daughter have provided a personal statement which outlines the impact my HCV infection had on them, please refer to **WITN5487002** and **WITN5487003**.

48. The Interferon injections fitted around my working pattern. I took them on Mondays, Wednesdays and Fridays as Tuesdays and Thursdays were my intercom days at work which meant that I did not have to drive to any of the schemes unless there was an emergency, so they ended up being my recovery days. However as the treatment progressed, I required time off sick.

49. The side effects of the treatment meant that my daughter had to drag me out of bed so that I could drive her to school. Most days I was unable to get out of my pyjamas, I did not eat, I did not shower. I could not see anyone or speak to anyone. I experienced a complete exhaustion and felt incredibly ill. My daughter would go out to do the grocery shopping, she cooked for us both and encouraged me to eat. I lost my appetite and ended up dropping to a size 8-10, having previously been a 14-16.

50. Some of the side effects of the treatment were light headedness, dizziness, anxiety when driving, I would be going up a main road and would see two cars coming out and would be anxious that they wouldn't stop. I developed a fear of dying.

51. For two nights running, I lined up every tablet in the house. I had thoughts that I had to end it as I could not cope with the treatment. The only thing that stopped me was the thought of my daughter finding me, I could not do that to her or my husband. It makes me so upset and sad that I had no idea what I was doing and was unable to control what was being forced on my husband, our daughter and the rest of my family. My husband says that because he was away working, he hadn't appreciated the full impact of the treatment and medication on my mental health.

52. The next morning, I asked my daughter what to do – this was very out of character for me. I had always been a strong and confident individual, but I now felt like a worthless failure who cried, who screamed and who wanted to curl up and die and I had no control over my emotions. I experienced a personality change – I would become angry for no apparent reason, and the smallest thing would trigger an outburst.

53. My daughter contacted GRO-B the liver specialist nurse at GRO-B to explain what had been going on. She arranged an appointment for that day, which my daughter also attended. I was diagnosed with depression and it was recognised that I had been suffering panic attacks due to the Interferon therapy. I was prescribed 20mgs of Fluoxetine to take daily and advised to continue with the antidepressant medication until the end of my HCV treatment. I have been on it ever since and I now take 40mgs.

54. I have been on different antidepressants since the Interferon therapy and whilst I have tried to wean myself off them over the years, my mental health is too fragile for me to stop.

55. At the time of the treatment, I was totally unaware of the pressure that was placed upon my husband and my 13-year-old daughter. My children from my first marriage were oblivious to what was happening – my son was in the army and whilst my daughter lived locally, she had 3 young children to take care of.

56. On one occasion but I am unable to recall the date, my youngest daughter called an ambulance for me at 2 am one morning, she also called her sister because she panicked, so she came out to stay with us. It was thought that I had a gallbladder issue, but I was later diagnosed with IBS. This is directly linked to HCV.

57. Upon finishing the 6-month course of treatment, I was informed that my viral load was undetectable. My liver function test results came down

markedly 3 months post treatment. Following the completion of the treatment I saw Dr GRO-B once a year until we moved to GRO-B in 2011 whereby I was told to get back in contact with him if I had any problems.

58. I ended seeing Dr GRO-B in GRO-B Hospital regarding my high white blood cell count which I will address in more detail later in my statement. I was informed that they had detected HCV but this was later retracted (as recorded in my medical notes on 24 September 2012). During another hospital visit, I was sat down by a practice nurse who took my hand before telling me that I had cancer. They thought I had Leukaemia because I had too many white blood cells, but this was also retracted is when I saw Dr GRO-B

59. I attempted to go back to work after the Interferon and Ribavirin treatment ended, but I was continually exhausted, suffered with depression and found that I could no longer focus on my job. Before I moved to GRO-B I had responsibility for 69 properties across 3 GRO-B requiring visits 3 times per week and each resident required a daily report along with emergency call outs. I was diagnosed with post viral fatigue, then chronic fatigue and more recently ME. I had a sleep test at Royal Papworth Hospital in either 2016 or 2017 and the consultant remarked, "Do you know you have ME".

60. I was no longer able to take on everyone else's problems at work. I found myself waking up in the night because I had forgotten to check on residents and on one occasion, I was abrupt in a response to a query from a resident and I recognised this as being extremely out of character for me. I received advice from an occupational health advisor for a long period after my absence from work, but eventually I came to the realisation that I could not continue working. I had so much time off that I decided to take voluntary redundancy in 2005.

61. It broke my heart that I had to stop working there because I loved it and I had to move out of the house that came with the role. The Council were

fully aware that my husband and I had sold our property when I started the role at the housing trust, and assured us that we would be rehoused by the council should I hand in my notice. Unfortunately, this did not happen as the council had sold all their properties, hence why my employment was taken over by the GRO-B and my husband took on more hours at work so that we could rent a small bungalow, with the option to purchase.

62. The HCV infection and subsequent treatment has affected every area of my life. I lost my home as well as my job, destroying my mental health and my confidence. My physical health also deteriorated after the combined Interferon and Ribavirin therapy and I have found myself susceptible to many infections including pneumonia, swine flu, urine and bladder infections. Medical professionals have put this down to smoking, but I believe it is directly linked to the fact that I lost my spleen and contracted HCV.

63. I no longer drive as I have lost my confidence; I do not socialise and we no longer go out as a couple. I do have good days, but these are rare. Occasionally, I will go shopping but only at night time because I am scared about contracting infections. I used to love clothes and shoe shopping. The COVID-19 pandemic has exacerbated this worry. I received a letter from the UK Government advising me to shield and I feel uncomfortable around crowds of people.

64. The chronic fatigue prevents me from living a normal life and I sleep up to 18 hours a day. If I start any housework, I often do not end up finishing it as my body starts to ache and I am overcome with tiredness. Even going for a walk drains me of all energy.

65. I completely lost my appetite post treatment and I have lost a lot of weight and my body is no longer able to tolerate spicy and fatty foods.

66. I am so grateful for my husband, GRO-B We met in 1987 and have been married since GRO-B I do not think I would be here today if it was not for

his ongoing support, he does most things around the house. I am surprised that our relationship has survived considering the amount of health ailments brought on by the HCV infection.

67. Our daughter was born on GRO-B 1988. Once we found out that I was pregnant, we both decided (due to my previous forced intravenous drug use and GRO-B job as a Prison Hospital Officer where on one occasion he was bitten by an inmate) to have HIV tests. If either of us was positive, we would have aborted the child. However, I do not agree with this unless it is for medical reasons. Thankfully, we were both negative but I was unaware at the time of my positive HCV status. Our daughter has been diagnosed with ME and a number of autoimmune diseases and I attribute her illness to the fact that I had been infected with HCV.

68. In 1993 GRO-B and I moved to GRO-B He was medically retired from the prison service and I was able to obtain a mortgage for a house as I secured a role at a care home in Paignton. After the home shut down, I moved to the sheltered accommodation role.

69. In 2011 my husband and I relocated from GRO-B to GRO-B, Cambridgeshire. My husband had set up his own telecoms company, which meant that he had to regularly travel into London for meetings and it therefore made sense to move somewhere, where he could commute to and from London.

70. I suffered a heart attack on 11 June 2015, shortly after my father passed away and I had a stent put in at GRO-B I had been experiencing chest pain from when we moved to GRO-B I brought this up with the doctors at the GP surgery many times and a chest X-ray and ECG was conducted, after which I was given a 5% chance of having a heart attack in the next 10 years. I suffered a second heart attack in 2017 and saw Dr GRO-B privately at GRO-B

71. Living in Spain and without a property in the UK, means that we are away from all our family. I love them all to pieces, but I cannot cope with all of their problems on top of my ill health and chronic fatigue. The distance does help me to manage this, but I do worry about my youngest daughter and her immune diseases.

<u>Stigma</u>

72. I do not recall being told to inform my dentist about my HCV status. Nevertheless it is not something I have hidden and I have never experienced any difference in my dental treatment.

73. When I was in labour with my youngest daughter, I was put into a room on my own. The midwife mentioned that I had a red sticker on my notes that was indicative of HIV but made a comment that I looked remarkably healthy. I explained that I had a HIV test prior to my daughter being born, but that it was negative. In response to this, the midwife ripped the sticker off the notes in front me and said it was not needed.

74. Due to my role in the care sector, I felt that I had to explain to my employer about my HCV infection and treatment. My line manager was very supportive and understanding, but whilst I was off sick, I was told not to tell any of the residents as they may wrongly assume that I had HIV. I therefore told people that I had a problem with my liver and they all presumed that I was an alcoholic so there was stigma attached to this.

75. Typically in elderly sheltered accommodation people talk and gossip, so the only stigma I experienced was from the residents. Whilst I had been signed off work as a result of the Interferon treatment, if I went out of the house (if I was feeling up to it,) the residents would assume that I was not unwell. Some would even ignore me if they saw me in the shop opposite the scheme, which I found very upsetting and made it hard for me to continue living on site.

76. The HR manager at the GRO-B was concerned about menstrual bleeding and if there could be a risk of infection if I used the

scheme's facilities. I had a total hysterectomy in 1990, so this was not an issue, but I felt uncomfortable that it was raised.

77. On page 38 of my iGPR report, it states that HCV was detected on 24 September 2012. I was assured this was not HCV, but antibodies by Dr GRO-B of GRO-B Hospital. I found this incorrect entry to be worrying, misleading and confusing.

78. On 29 March 2022 I had a series of blood tests at GRO-B Hospital as I have all of the signs of HCV again. I have further blood tests booked for 26 April and a consultation on 17 May. My white blood cell count is well above average and my face, neck and hands are totally covered with spider naevi, which I experienced before treatment in 2002 and which is associated with HCV. My hair is falling out in hand falls so I tend to tie it up and I have also started to experience pain in my liver, which I first noticed 6 months ago. My tongue has also been swelling on and off for the past year. I first put this down to allergies, however Nystan was prescribed but with no effect.

79. If the tests come back positive for HCV, then I would have relapsed 20 years after treatment. I have been told that it is very rare to relapse, so I am sure they will say that it is a re-infection. I am not sure that I even want treatment again as I am scared that I will become more unwell than I am now. If I do choose to go ahead with further treatment, it will not be done in Spain as this would exonerate the NHS of all responsibility. The responsibility to provide treatment lies with NHS England.

Section 6. Treatment/Care/Support

80. I cannot fault the treatment and care I received from Dr GRO-B and the nurse specialist, GRO-B They were both fantastic and I knew that I could call GRO-B at any time during the 6-month treatment or after.

81. I have never been offered counselling or psychological support during or after my HCV treatment or in relation to receiving infected blood and

contracting HCV as a result. However, GRO-B was very supportive and would explain things to me.

82. I have since discovered from reading my medical records which I obtained in 2018 that my GP in GRO-B Dr GRO-B diagnosed me with a personality disorder in 2011. This was written in my notes but I was not aware of this diagnosis. This was a false labelling. At the time I was so unwell that I was going into his surgery 3-4 times a week. Somewhere in my medical records it states, "Same thing, different story today, I NEED A HOLIDAY" (written in capital letters!) Despite this incident, he was a good doctor with a sense of humour and continued to see me even though I drove him mad. I am not in any way complaining about my GP as he was a good doctor and I would not want him to have to justify this comment.

Section 7. Financial Assistance

83. I first became aware of the Skipton Fund during a conversation with Dr GRO-B in 2002. He completed and submitted the application form on my behalf. Within the paperwork it states how he believed the source of my HCV infection to be the blood transfused during my splenectomy in 1984. My application was received by Skipton Fund on 9 July 2004.

84. I was informed by the Skipton Fund over the phone, that they required medical evidence in order to process my application. I phoned UCH and asked for copies of my medical records, to which I was informed that they had been stored on microfiche. They proceeded to tell me that the reader was broken and that they had no intention of replacing the machine.

85. I later asked Dr GRO-B during GRO-B GP appointment if the surgery held any documentation regarding my splenectomy and blood transfusion in 1984. He commented that there was just a note from a previous doctor

recording the operation. It is very suspicious that my medical records and proof of blood transfusion are not retrievable.

86. I discovered during my statement interview that a letter was sent on 7 September 2004 from the Skipton Fund, returning the application to my medical practitioner as further medical information was required. Despite the letter being address to myself and stating that no further action was required on my part, I never received this personally. Please refer to **WITN5487004**

87. In a subsequent letter written from Dr GRO-B to the Skipton Fund administrator, dated 10 September 2004 (stamped 14 September 2004) he states that my notes reference a blood transfusion. He also raised the question as to whose responsibility it was to obtain my medical records, expressing that he did not think that it was his. He wrote, "Whose responsibility is it to chase up these records, as I do not think it is mine?" I make this letter available to the Inquiry. **WITN5487005**

88. I did not receive any further communication in regard to this and I was caught in the middle with no avenue for recourse – the hospital was unwilling to access my notes, and Skipton would not continue processing the application without them. **WITN5487006**

89. I reapplied to the England Infected Blood Support Scheme (EIBSS) in 2021. Dr GRO-B signed the paperwork, ticking the box to state that he believed I was infected with HCV from the transfusion in 1984 and this was sent on 1 November 2021. EIBSS confirmed receipt of my application on 10 January 2022. Once again, my application was refused on the basis that there was a lack of medical evidence to prove that I received a blood transfusion. I sent witness statements from family members along with documents regarding the splenectomy, but I do not believe that the application was reviewed by a medical practitioner. Again please refer to **WITN5487002; WITN5487003**.

90. In 2002 I was told by my consultant that he was 99.9% sure that the source of my infection was the blood transfusion and not the brief forced intravenous drug use. It would have been an NHS standard procedure to conduct a full blood count before operating. Had I have been infected 4 years prior to the operation, my white blood cells would have been elevated and suggestive of an infection.

91. On 18 February 2022 I requested a copy of my EIBSS application forms and evidence, along with a copy of the assessor's full report. The EIBSS assessment record acknowledges that, "the nature of the injury makes it highly likely that she lost substantial amounts of blood and would be likely to have been given a blood transfusion at the that time." However, an assumption is made regarding my ex-husband and suggests that needles were shared when I was forced into drug use. This was not the case.

92. I made an informal complaint to EIBSS as I found the wording of my refusal letter upsetting, insulting and demeaning in regard to my relationship with my ex-husband and how he forced me into intravenous drug use. I watered down my experiences with my ex-husband because I did not want to relive any of the horrific violence that I was subjected to. As a domestic abuse victim, you feel ashamed going into detail about your experience and I omitted details about sexual assault.

93. In applying for financial assistance, I have had to relive the most terrifying and difficult period of my life, some 40 years later because the NHS has not kept any medical evidence to prove that I received a blood transfusion.

94. I previously held health insurance with GRO-B but this was cancelled. Due to the depression caused by the HCV treatment, I had to take time off work and was asked by the insurance company if I had previously suffered from depression. They also asked for copies of my medical records. When I was 16, I had been to the doctor as I had been feeling down, and it turned out 4 days later that I was pregnant. The GP

wrote 'depressed' on my medical records, again this was a mislabelling. In response in, GRO-B cancelled my policy and refunded the premiums totally £4000 rather than providing a pay-out. I was informed that I could appeal this decision, but there was no point as the GP had since passed away.

95. Furthermore, as the insurance company knew that I had HCV they insisted that I had an HIV test. I knew it would be negative because I had already been tested when pregnant with my youngest daughter, as mentioned previously in my statement.

96. My husband sold his business and we move to GRO-B in 2018. As part of the move, I received copies of my GP records to take with me (due to my complicated medical history) and I found documents relating to my splenectomy.

97. After getting in contact with the Inquiry, I again requested my medical records from UCH. Having been informed that there was no medical evidence before, I find it strange how a theatre note was discovered after all these years later, please refer to exhibit **WITN5487007**.

Section 8. Other Issues

98. Last year in around October or November 2021, my husband read about the work of the Infected Blood Inquiry and I made contact to provide a statement.

99. At the time of receiving a blood transfusion, the NHS was importing blood from prisoners in America, which they failed to screen before use on patients like myself. The NHS had a duty of care to ensure that blood and blood products were safe before they were administered. Whilst I am grateful that they saved my life, I am not grateful for what has come after – it has taken away the quality of my life.

100. I cannot understand why the rest of the United Kingdom has admitted their failings and have properly compensated those infected and affected, but England is yet to do the same. I think it is a disgrace that the government has lied and denied.

101. It is impossible to describe the colossal damage the contaminated blood scandal has had on those infected and affected. People have died and many have lost loved ones. I hope that by sharing my story with the Inquiry it may help others.

Statement of Truth

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

Signed GRO-B

Dated 14th April 2022.

Exhibits

Exhibit Number	Date	Description
WITN5487002	Undated	Affected Statement of GRO-B (husband)
WITN5487003	Undated	Affected Statement of GRO-B (youngest daughter)
WITN5487004	7 September 2004	Letter from Keith Foster, Scheme Administrator, Skipton Fund to GRO-B GRO-B stating the application had been returned to the medical practitioner as further medical information was required.

WITN5487005	10 September 2004	Letter from Dr GRO-B Consultant Gastroenterologist to Keith Foster Scheme Administrator, Skipton Fund regarding responsibility of obtaining medical notes.
WITN5487006	1 October 2004	Letter from Keith Foster, Scheme Administrator, Skipton Fund to GRO-B GRO-B returning application for lack of medical evidence.
WITN5487007	29 October 1984	Theatre Register Entry for Laparotomy, Splenectomy.