Witness Name: Anne Marie Wright
Statement No.: WITN6482001
Exhibits: **WITN6482002 - 3**
Dated:

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF ANNE MARIE WRIGHT

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 21 July 2021.

I, Anne Marie Wright, will say as follows: -

Section 1. Introduction

1. My name is Anne Marie Wright. My date of birth is GRO-C 1959. I am 62 years old and live in GRO-C Glasgow with my daughter Alison. I am a retired nurse. I intend to speak about my late partner Ian, the father of my daughters Laura and Alison. I should explain the contact name given to the Inquiry is my previous married name McKay. I have three children from that marriage. When I met Ian, he had two sons from his previous relationship. My children lived with us and his sons visited at weekends.

2. Ian was infected with Hepatitis C (HCV) following blood transfusions he received in 1981 and 1986 as a result of kidney failure. He died on 27 July 2002, aged 41, from left-ventricular failure. In particular, I intend to

discuss the nature of his illness, how the illness affected him, the treatment received and the impact it had on him and our lives together.

3. I can confirm that I am not legally represented and that I am aware of the provision for anonymity and I am happy for our story to be in the public domain.

Section 2. How Affected

4. Ian was born on GRO-C 1960, which is the day on which I provide my story to the Inquiry. He died on 27 July 2002, aged 41. I was Ian's partner for 11 years. In 1981, Ian suffered kidney failure as a result of nephritis. He was given a kidney transplant later that year at the Western Infirmary in Glasgow.

5. Unfortunately, this first transplant failed. I am not sure of the reason but it may have been a rejection. A second attempt was made in circa 1986 or 1987, which was a success. He still had the second transplanted kidney up until his death. Although I wasn't present at the time, I am aware from Ian that he was given blood transfusions during both kidney operations.

6. In April or May of 1996, Ian received a call to visit the Infirmary. I didn't go with him that day for the first time ever, because we assumed it was just a generic appointment - he was the subject of regular monitoring for his condition. I was pregnant with Alison at the time and Laura was only a few months old. He was told at that appointment that he contracted HCV from a blood transfusion that he received in 1981. I do not know who he saw on that occasion. How often have I wished I had gone along although I realise there is little I could have done?

7. Ian never received a letter prior to the appointment. He was simply called in. I had always accompanied him in the past prior to his

diagnosis. I can safely say that there was no advance indication that he had been exposed to, tested or infected with Hepatitis C.

8. Ian was never an IV drug user. He had one tattoo which was done professionally. He was never medically treated abroad. As far as I aware, he had not undergone any other major operations whereby a transfusion may have been required. I cannot conceive of any route of infection other than the blood transfusions he received following his kidney transplants in 1981 and again in 1986.

9. Following his diagnosis, Ian didn't come home for hours. I became very concerned and looked for him all over town. Eventually, we found him in a pub. Ian was distraught. He told me that he had been given a terrible disease and that his life was finished. He was very worried that he had infected me and the children. He also had two boys from a relationship before we met and was concerned that they could have been unwittingly infected too.

10. After his diagnosis, Western Infirmary Hospital did not arrange any follow-up with Ian. We did not receive any information regarding how to manage the virus, the precautions to take, including of a sexual nature, nor any information on possible treatments or what it meant for us as a family going forward.

11. I was in the midst of my nursing training at the time. I was a bit clued up and decided to take Ian to the Infectious Diseases Unit at Ruchill Hospital, which has since closed. There we were seen by the consultant, Laurence Gruer, a specialist in infectious diseases.

12. Laurence Gruer explained to Ian how the virus could be passed on and tried to reassure him not to worry. However, even if the Queen had told him, he wouldn't have listened. He had got it into his head that he was dying, and no one could reassure him otherwise. It was terrible

watching him fret about the consequences of the HCV for himself and also for us.

13. Both myself and the children were advised to get tested at the Western Infirmary, the results of which were fortunately negative. To the best of my knowledge, his two sons have not been tested. I had originally gone to my GP practice but they would not help, I believe because of the cost and if I recall that is why it was suggested by the doctors at the Western Infirmary.

Section 3. Other Infections

14. Ian, the children and I were also tested for HIV, the results of which were also negative.

Section 4. Consent

15. I do not know when Ian's blood was tested for Hepatitis C. I assume he was tested in 1995 or 1996, shortly before his diagnosis. Every time he went for appointments to monitor his kidneys, he had his blood tested.

16. He was never aware that he was being tested for HCV. When we were meeting at his clinic appointments, I would accompany him to explain what was going on as I was a nurse, and I certainly do not recall any mention that he was being tested for HCV. It was such a shock to both Ian and I when he was diagnosed.

17. I am sure that Ian would have consented to his kidney operations but I certainly don't recall him ever mentioning any explanation being given that there was a possible risk attached if he required blood transfusions.

Section 5. Impact

18. Ian was overjoyed that his second kidney transplant was successful. We met around 1991 and later started a family together. We were very happy and enjoying our lives. His diagnosis with HCV had a devastating impact on his life and the lives of our family. He was never the same again – and neither were we.

19. Prior to his diagnosis, Ian was very fit and healthy. He played volleyball and was part of a team, all of whom had been given kidney transplants. I think he felt very hard done by, that he had been the one to be handed a fatal illness.

20. In the years before he was aware of his illness, he became very lethargic. He suffered from insomnia and would sit up all night. As a result, he slept during the day. I was concerned because even with the problems with his kidneys, I knew that this wasn't normal. He lost weight too and couldn't move as quickly as he had previously as he suffered with joint aches.

21. After his diagnosis, he started smoking cannabis on occasions to relieve his pain and stress. I can recall that he experienced bouts of brain fog, a kind of 'vacancy' and sometimes had difficulty with words. However, I cannot be sure whether this was caused by the HCV, the cannabis, the use of which increased towards the end or a combination of the two. I only found out about the cannabis use in the final few months of his life but by then it was his main method of controlling his pain.

22. At the time of Ian's diagnosis, I was pregnant with Alison and Laura was very young. He became very anxious that he would infect us if he hadn't already. His anxiety reached such a degree that he contemplated leaving me in order to protect us from his illness. His paranoia about it reached such a level that the consultant, Laurence

Gruer recommended that we see a marriage guidance counsellor but that was fruitless.

23. A couple of years after his diagnosis, when Alison was young, there was an incident when I found Ian just sitting there in the house with all his clothes ripped up. His shoes were ripped up too. There was no explanation for it. Right up until he death, he was plagued with an immense fear; a sense of impending doom. I was perpetually trying to reassure him that he would be okay, but to no avail.

24. Alison didn't know until this morning, but when she was 9 months old, I found out that I was pregnant again. Because of Ian's fragile state of mind, I knew that I would be unable to continue with the pregnancy. We discussed it together and I attended a clinic on Bath Street in Glasgow and was referred to another clinic in Liverpool for an abortion. My kids had to stay at a bed and breakfast while I went to a horrible place where everyone was lined up waiting to terminate their pregnancy.

25. I lost a child because of what happened to Ian. He couldn't face it – and I knew I would struggle to cope without his support. It was enough having Laura, who was 23 months old at the time, and Alison who was only 9 months old. I was raised as a Catholic and had vowed that I would never have an abortion, but it's easy to say these things when you're not in the position I found myself in. A termination was probably the best option in the circumstances but there's not a day I don't think about what may have been.

26. Laura was born in 1995. Ian did odd jobs at the time. As his condition deteriorated, he had to give up work. His kidney though was still doing well. The next time he was due at the Western Infirmary for a check-up, he became very angry. He challenged Dr Briggs, who had been overseeing his care since he was 21, as to why he was never told about the risks associated with the blood he had been given. He trusted the doctors who looked after him and felt very let down. Dr

Briggs assured Ian that they didn't know about the risks at the time but would continue to monitor Ian's condition.

27. What didn't help was that Ian was diagnosed with HCV around the time of the AIDS epidemic when scaremongering and misinformation in the media was rife. Ian did not want anyone to know, including our daughters, Laura and Alison. He probably associated the virus with AIDS and felt acutely aware of the stigma. I promised him that I wouldn't tell them.

28. I don't recall any difference in the way Ian was treated in hospital after his diagnosis but certainly he was put to the end of the day when he went for dental treatment. It was his regular surgery in Paisley Road. The staff were also double gloved and gowned. They told him it was because of the Hepatitis which only worsened his paranoia.

29. As the girls were growing up and Ian's behaviour became increasingly erratic, I had to shield them from the truth. I would try to pass off his moods and the anguish he displayed as the result of his kidney problems, when of course I knew that it was the Hepatitis C.

30. Ian's diagnosis with HCV caused rifts within the family. He became very volatile and erratic, almost a personality change. His insomnia disrupted both mine and the girls' sleep. In the morning he would be sleeping when I would be getting the children up for school. It was like stepping on egg-shells. If one of us made a noise, he would go absolutely crazy. It wasn't a suitable environment for young children.

31. At times, the children were terrified of him. We didn't know what his state of mind would be from one day to the next. His sons would have been 16 or 17 around the time of his diagnosis. He had terrible mood swings and bouts of paranoia and delusions. If my daughter Leeanne washed a glass before using it, he would assume that she was cleaning it to disinfect the virus, despite the fact that she was unaware

of his HCV. On another occasion, he told the neighbours that we were all going to Disneyland which was untrue.

32. He did have violent outbursts, although he was not physically violent toward us. I recall in one fit of rage he smashed a door off of its hinges and his unpredictability became such that towards the end we had agreed to separate living. Ian had found a flat and the idea was that he would live there during the week and come around at weekends. We had started decorating but he passed away before he could move in. If he had not been infected it would never have come to this. I blame the HCV for the way he became and for his death.

33. When Alison was born, Ian was so proud. He took her to the Hospital to meet the doctors who looked after his kidney medication and monitoring. Ian was really deflated when he came home because they didn't hug her. It was crushing for him; he was forever suspecting that he was being treated differently because of his Hepatitis C status.

34. I spent a lot of time away from home undertaking my nursing studies. Alison and Laura were in nursery. At times, Ian would go missing and would forget to pick them up. We wouldn't see him for days at a time. On one occasion, Laura broke her elbow. I needed him to take her to hospital but we couldn't find him anywhere. As a result, I had to take on extra responsibility with childcare often relying on friends and family at short notice.

35. It was so difficult when he just disappeared. I had to make excuses to the kids about where he was. I don't think he knew what he was doing. His memory was definitely affected. On another occasion, we booked a holiday in Butlins. He told the two boys that they could come but forgot to pick them up.

36. He lost his sex drive. I think I might have withdrawn somewhat too as I didn't know much about the virus at the time. I was worried that I might

contract it through sex. I think my concern affected Ian too. He probably felt very rejected.

37. Ian had never been a heavy drinker. We were also aware that HCV affected his liver and that moderating or eliminating alcohol was advisable. But after his diagnosis, he just gave up; he didn't care anymore and alcohol relaxed him.

38. His diagnosis affected my studies. I didn't achieve the results I wanted. When Ian died, I was in my final year. The university recommended that I take a year out. However, I knew that if I took a year out, I wouldn't go back. I managed to pass the following year and become a registered nurse.

39. As a family we couldn't go on holidays abroad because Ian was unable to secure insurance owing to his Hepatitis C status.

40. Strangely, the months prior to Ian's death were probably the best time we had as a family. The girls were 5 and 6. They had just started school and things were looking good. He still had symptoms but they were more controlled at this point. With Alison being around and me starting a nursing course in 2000, I think Ian felt aware that he had more responsibilities as a father and husband.

41. In the months preceding his death, Ian often spoke about his own mortality. He seemed to be very aware that he was going to die imminently. The night before his death, he asked if I could arrange his funeral. I remember it so vividly. We had pasta and pizza for dinner. The two girls didn't finish theirs so he finished their dinner too. He went to bed with a stomach ache. I assumed that it was merely indigestion.

42. At 3am, I awoke to find him making a terrible rattling sound. He told me that he needed to be sick. When I went to fetch him a bucket, I heard a thud. I returned to the bedroom and he was on the floor. He wasn't

breathing. I tried to do CPR. I was begging for him to stay. Alison had awoken and was watching from the door – it is not something a child should have to see. I phoned the ambulance and his mother but I knew that when he fell, he was gone.

43. The ambulance team also tried to resuscitate him but I knew that it was the last time I would see him. By the time his mother and I reached the Southern General, he had passed away. The thing that gets me is that even after all that, we were told by the Hospital and the undertakers that we weren't allowed to see him because of the Hepatitis C. They just put him in a body bag. The coffin was sealed. The Funeral Directors, James Cockburn on Govan Road, Glasgow, were very apologetic about this.

44. I coped pretty well until my experience with the undertakers, because I just thought I would have one last time to say goodbye, but I was denied that. That would have given me closure. Apart from being told that he had Hepatitis C, this was a particular low point for me. I just wanted the girls to see him one last time. His mother was desperate to see him too. At one point, the undertaker had to call me to tell her to back off; She couldn't accept it. As a family, we never had the chance to see him in peace.

45. It is worth noting that Hepatitis C is not mentioned on Ian's death certificate, exhibited at **WITN6482002** but is mentioned on the coroner's report; exhibited at **WITN6482003.** I would like to know why it was omitted from the death certificate.

46. Ian's mother Jean was distraught following his death. He was her only child. For years and years, she was grief-stricken. She still goes to visit him whenever she can make it. To this day, she is still in disbelief about the circumstances surrounding his illness and death. Her health has suffered as a result. She used to be a keen swimmer and enjoyed

playing bingo. After his death, she lost her zest for life. She's 92 years old and her son died at 41. No mother wants to outlive her child.

47. Shortly after Ian's death in 2002, I became the sole provider for the family. I was forced to pay extortionate fees for childcare. I sought the help of my local DHS and MPs. My appeals for support were repeatedly dismissed. Nicola Sturgeon was the only one who offered to help. She put me in touch with the King's fund, a charity fund for nurses who covered the costs of childcare. It was a very tough time for us all financially.

48. Following Ian's death, after a short relationship, I remarried. The marriage only lasted a year. I wasn't in the right mind and needed emotional and financial security. It was a mistake. Friends and family would reassure me that I had a big family, and would be well looked after. But in the evenings and at night, without Ian, I felt very alone.

49. 11 years ago, I developed Parkinson's, for which I take medication. I wonder whether the stress surrounding the circumstances in which Ian was infected and the deterioration of his health, culminating in his death have triggered the onset of my condition. I have days where I am unable to walk and when I am particularly stressed, the tremors become more pronounced.

50. Laura has children of her own. She is aware that they have missed out on meeting their grandfather. She was often rueful that her dad missed out on the milestones in her life. He was never there to see her achieve top grades in school, become head girl or get into University to study Law. When both Laura and Alison passed their driving tests, I had to assure them that he would be really proud of them. Laura's dad would never be able to give her away on her wedding day, which I'm sure would she miss.

51. The circumstances surrounding Ian's infection have impacted my faith in the NHS. I know that Laura's trust has been affected too. This is caused not only by the fact that Ian was infected by those instituted to care for him but from the cover-up and lack of candour that ensued. As a nurse, I also witnessed a number of practises that are reprehensible. I like to think that I am more discerning and inquisitive as a result.

Section 6. Treatment/Care/Support

52. Between 1981 and 1996 Ian's care in respect of his kidneys was consistently overseen by the same team of doctors. After his diagnosis, without any forewarning or explanation, his consultants changed to a younger group of staff. I think he felt confused and let down by this as if he had been abandoned when he was most vulnerable. The new staff were always gloved up and, he felt, at arm's length and he was never able to have the same type of relationship with them as he had enjoyed with the team who were with him through the transplants.

53. After his diagnosis with HCV, neither Ian or I was ever offered any psychological support or counselling. I was always with him and do not recall this being offered, nor does his mother.

54. To the best of my recollection, Ian was never treated for Hepatitis C. I can vaguely recall that he was given a biopsy to assess the state of his liver but I couldn't comment on the outcome. He was certainly taking a lot of tablets for his dialysis. As time went on, I think Ian thought there would be a cure for HCV. He saw Interferon and other treatments on television. He questioned why he wasn't receiving any treatment. I told him that it wouldn't be offered but that we would have to request treatment. However, he wasn't in the right frame of mind for this; he had lost the will to live.

55. Ian's mother tells me that she recalls him taking treatment with what may have been Interferon. I believe that he may have been offered

treatment but that he never actually embarked on the course. He also had issues with his kidneys and I am not sure he would have coped, either mentally or physically.

56. On 26 July 2002, the Friday before he died, he had an appointment at the Western Infirmary for his kidneys. He complained about a pain he had been experiencing for a couple of months, the same pain of which he complained the night he died. They gave him an ECG. Whilst we were still sitting in the waiting room, they told him that everything was fine and he could go. He subsequently died of left ventricular failure, heart related

57. In August 2002, I consulted a lawyer, Fiona Sasan from Morton and Fraser in Glasgow. I was angry that the week before his death, Ian had been given an ECG and told that everything was fine. This is despite experiencing chest pain, the same as he experienced on the night of his death from left ventricular failure.

58. The solicitor was able to obtain some of Ian's medical records. I don't know if she still has them. After examining the ECG results, she noticed that they were definitely not fine. She also uncovered information that the HCV had enlarged his heart which exerted additional strain on the organ. It looked promising. However, when the solicitor tried to get an expert witness to examine the findings she was unsuccessful. Deep down, I knew that they would be reluctant to challenge the practise of a fellow consultant. I recall her saying something to the effect; 'no one would go against that consultant', meaning the one who had examined Ian. Needless to say, our claim did not go any further.

59. I was devasted by this as I strongly believed that mistakes were made and what was found seemed to bear out that contention. The problem is the system sticks together and ranks are closed. There was no point in pushing it any further. However, I have made a request to Morton

and Fraser to establish if they still have copies of the original papers and await the outcome.

Section 7. Financial Assistance

60. In 2015, Ian's mother Jean applied to the Skipton fund on Ian's behalf. I think his mum must have seen it on the news. I hadn't heard about it prior to then. She asked her GP, Dr Robert Ferguson of Admiral Street Surgery in Glasgow to support her in the application.

61. Mrs Jean Martin then wrote to Greater Glasgow and Clyde Health Authority to try and obtain Ian's records. She received a reply in July 2015 to inform her that all records had been destroyed in accordance with trust guidance. We felt angry and frustrated by this and for me it raised the memories of the previous attempt at finding out what had happened.

62. Nevertheless, the claim was eventually successful. She was paid £20,000 which was divided four ways between each of Ian's children. I didn't get anything; I was told by Skipton that I was ineligible because I had remarried. I think the rules on this might have changed since. I am now in communication with the Scottish Infected Blood Support Scheme for them to reconsider my position.

Section 8. Other Issues

63. I don't think the government realise how many people have been affected by this, not only the people who were given contaminated blood but all the family and friends they have left behind. For decades, we have been left alone with our grief and no one really cares or is held accountable for what took place.

64. Ian felt that his kidney transplant was akin to a double-edged sword; on one hand it added years to his life, enabling him to father Laura and

Alison, whilst on the other hand, he was left with a fatal illness. Patients were told of the risks when they were being given transplants. The same should have been true about the blood they would receive. The decision should have been left to them. If they had been informed, I don't think they would all have undergone the procedures.

Statement of Truth

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

Signed (SEE ATTACHED)

Dated ____________________________

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Signed GRO-C

Dated 3rd December 2021