

Witness Name: Christina Mary Evans

Statement No: WITN6604001

Exhibits: WITN6604002

Dated: 28 September 2021

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF CHRISTINA MARY EVANS

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 04 August 2021.

I, Christina Mary Evans, will say as follows: -

Section 1. Introduction

1. My name is Christina Mary Evans ("Tina"). My date of birth is [GRO-C] 1956. I reside at [GRO-C] Devon, [GRO-C] [GRO-C] I married my husband Alan in 2011, having previously been in a relationship for ten years. We have six children. Two of our children are from my previous marriage; [GRO-C] and four of our children are from Alan's previous marriage. We have five grandchildren together.
2. I am currently working part-time carrying out housework for friends and family, which affords me the time to care for my elderly mother Rosemary Joan White, [GRO-C]. I had previously been employed in a number of roles, including working in a tax office, a jeweller's, and in administration for my ex-husbands business.

3. I intend to speak about my late father Frederick White's infection with Hepatitis C ("HCV") after having received treatment for his haemophilia. In particular, I will describe how he had learnt about his infection, how his illness had affected him, me and our family thereafter. My father had been employed in a number of roles before taking early retirement due to his ill-health. This included working as a part time fireman and in a mill producing cattle food. His date of birth is [GRO-C] [GRO-C] 1930, and his date of death is 20 January 2018.
4. I can confirm that I have chosen not to have legal representation and that the Inquiry Investigator has explained the anonymity process to me. I do not wish to be anonymous as I wish for my story to be known in full.
5. 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.
6. 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.
7. I have constructed this statement without access to my father's medical records. I had previously made enquiries surrounding obtaining my father's medical records. I have not as of yet received a reply.

Section 2. How Affected

8. My father grew up with six siblings; which consisted of two other brothers and four sisters.
9. My father met my mother in his early twenties and they married in August 1954. On [GRO-C] 1956, my mother gave birth to me in [GRO-C]. I was an only child. They did not have any other children, but did not take preventative measures, it just did not happen.

10. When I was aged around three years old, my father was diagnosed with haemophilia. As far as I am aware, he was told that he had mild haemophilia. He used to wear a chrome medallion pendant around his neck, which contained all the relevant information surrounding his haemophilia.
11. Throughout my childhood, I remember that my father would experience quite a lot of bleeds, bruises, and knocks due to his haemophilia. Early on, he would either receive plasma or blood transfusions as treatment but as he got older, his treatment was changed to Factor VIII; albeit, he did not receive much treatment with Factor VIII. He had a belief that if he was treated with Factor VIII for an extended period of time, then his body would build up a tolerance rendering his treatment not as effective. Therefore, my father would only receive Factor VIII for major bleeds. For minor bleeds, he would treat himself at home.
12. My father was under the care of Dr Lee, Haematologist at Royal Devon and Exeter Hospital ("RDEH"), Barrack Road, Exeter, EX2 5DW. Towards the latter part of my father's life; after Dr Lee retired, he was under the care of a female haemophiliac doctor; with whom I cannot recall their name.
13. As far as I can recall, my father had only experienced a few major bleeds which required treatment with Factor VIII at the RDEH.
14. Alongside Factor VIII, my father was also given a number of blood transfusions throughout his life. The main incident was that of when he was at work in the factory, and he slipped off a ladder attached to a machine, and fell back onto a truck handle which caused injuries in his buttocks. Due to the severity of the incident and the blood he had lost, my father was immediately air lifted to either the John Radcliffe Hospital ("John Radcliffe"), Headley Way, Headington, Oxford, OX3 9DU or the Churchill Hospital, Headington, Oxford, OX3 7JT (whichever was the main haemophilia centre at the time).

15. My family and I followed the helicopter to the hospital by car, where my father had been admitted to the Intensive Care Unit. I believe that my father would have been given several blood transfusions due to the volume of blood he had lost as a result of the incident. He remained in hospital for several weeks before he was discharged home to recover.

16. In relation to the treatment my father has received throughout his life for his haemophilia, I do not think that my father was warned of the risks of blood borne infection associated with blood product or blood transfusions. Whilst he was apprehensive to receive Factor VIII, this was attributable to his fear of developing an intolerance to the treatment, as opposed to the associated risks of blood borne infection. He was of the generation that if he was told to take something by a person of authority or the medical profession, he would take it. He would not ask questions.

17.

GRO-C

18. When I had four wisdom teeth extracted in my late 20s, I underwent a test to determine whether I was a carrier of haemophilia. When the test result had returned, I was told that whilst I was not a haemophiliac myself, I was a carrier of the condition.

19. Around the 1980's, my father was diagnosed with HCV. I cannot recall the exact point at which my father received his diagnosis, or by whom he was told. I presume this would have occurred during a regular face to face consultation my father had attended with Dr Lee at the RDEH.

20. I am unaware of the exact information my father was provided with when he was diagnosed with HCV. I do not know whether this information would have

been considered adequate for my parents to have been able to understand and manage his infection.

21. From the point at which my father received his HCV diagnosis, my mother and father had started taking sensible safety precautions to reduce the risk of others being infected as a result of his infection. I do not know whether these actions were attributable to advice they were given by a medical professional. However, due to my parents not having access to information on the internet or other sources, I can only assume that they were told this information in the medical setting.
22. My mother was very careful with preventing contact with my father's saliva, blood, or bodily fluids. She was very paranoid that if he cut himself, no one was allowed to touch his blood. With my father being an avid gardener, it was inevitable that he would nick himself in the garden, to which my mother would bring out the plasters and bandages. No one in our family was ever allowed to kiss dad on the lips. In addition, I recall my mother telling me that GRO-C
GRO-C I assume that this coincided with my father's HCV diagnosis.
23. I believe that the cause of my father's HCV infection is attributable to the Factor VIII or blood transfusions he has received throughout his life as treatment for his haemophilia.
24. When my father was diagnosed with HCV, he thought he was lucky that he had not contracted HIV. He was told that he was one of a few of approximately twenty haemophiliacs under the care of Dr Lee at the RDEH, with whom did not contract HIV.
25. Within the last 12-18 months of my father's life, he had received care from a number of carers who visited the home he shared with my mother. However, after experiencing a number of Urinary Tract Infections ("UTI'S") and associated delirium, he was admitted to both Torbay Hospital and the Newton Abbot Community Hospital, W Golds Road, Newton Abbot, TQ12 2TS, where

the social services decided that they would place him in a care home for a while to give him a bit of rest bite.

26. Thereafter, my father stayed at the [GRO-C] [GRO-C] for 5 months before he passed away.

27. Around 18 January 2010, the doctor in charge of my father's care had telephoned me whilst I was at home to tell me that my father was very poorly. He asked whether I wanted my father to be taken to hospital to receive care, or, remain at the care home. I had to make this life changing decision on my own [GRO-C]

28. I made the decision to keep my father at the care home for a number of reasons. That week, I had visited my father and during conversation, he had told me that he did not want to be here any longer. In response, I asked him whether he meant that he did not want to be at the care home, to which he had stated something along the lines of "*no, I would rather be dead.*" To have taken him to hospital to receive treatment, it would have caused him more pain and suffering, and would have prolonged his death.

29. For the following two days and two nights, from 18 January until 20 January 2018, I sat with my father at his bedside. It was heart-breaking to witness a family member go through so much pain, particularly as he had developed dementia at this point. I do believe that he knew that it was me next to his bedside. Cancer robs you of your body, and dementia robs you of your mind.

30. On 20 January 2018, at the age of eighty-seven years old, my father passed away. I was present when he passed away.

31. Within the Death Certificate of Frederick White, dated 26 January 2018, certified by S de Boer, Deputy Registrar, County of Devon (exhibited below, at **WITN6604002**) my father's cause of death is outlined as:

*"I (a) Pneumonia
II Vascular Dementia
Type 2 Diabetes Mellitus*

Certified by P R Melling MB."

32. At my father's funeral, due to the nature of the assistance we were afforded by the Haemophilia Society surrounding my father's haemophilia, instead of spending money on flowers, we asked our guests for donations to the Haemophilia Society.

Section 3. Other Infections.

33. Other than HCV, I do not believe that my father had contracted any other infections as a result of receiving contaminated blood product or a blood transfusion as treatment for his haemophilia.

34. He was previously tested for HIV. When the results returned, it has shown that he tested negative for the presence of HIV.

Section 4. Consent

35. I do not believe that my father would have been tested or treated without his prior consent having been obtained, without his knowledge, adequate and full information, or for the purposes of research. I am sure that my father would have always provided consent, as if a medical professional asked him whether they could take some blood to carry out a blood test, he would have agreed to it.

Section 5. Impact.

Mental/Physical Impact

36. My father's physical health had deteriorated towards the end of his life. I had originally explained this away with his old age and his haemophilia having an effect on his body. He was once a very private and independent person, but his joints and ligaments had become so damaged, that my father had to rely on the aid of two walking sticks and later a walking frame. When he went into the care home, he then used a wheelchair.
37. However, once I was contacted by one of the Infected Blood Inquiry ("IBI") Investigators, I had carried out some research into the associations between some of my father's conditions and HCV. I now believe that the decline in my father's physical health could in part, be attributable to his HCV. Albeit, I cannot say as fact, what is caused by what. As I was carrying out research, it felt as though it was a tick box exercise. With every symptom I had researched, it was *"tick, tick, tick."*
38. Not long after my father's HCV diagnosis, he had a number of face to face consultations with Dr Christie at the Derriford Hospital. He was told that the only way to be sure how much damage had been caused to his liver, would be to undergo a liver biopsy. However, due to my father's haemophilia, a liver biopsy carried an associated risk of bleeding. Due to the risks, it was decided that my father would not undergo a liver biopsy. Therefore, to date, we do not know how much damage his HCV had caused to his liver.
39. Through research, I have seen that there is a link between the onset of a number of my father's medical issues and acute symptoms of HCV. This includes my father's complexion being yellow in colour; which is indicative of jaundice, persistent tiredness, fatigue, and abdominal pains.
40. My father had also experienced a number of what I believe to be chronic symptoms of HCV. This includes an interrupted sleep pattern or disturbed sleep, very dry eyes, and type two diabetes.
41. Towards the end of my father's life, he was diagnosed as having developed vascular dementia.

42. I cannot say that my father's HCV infection had an effect on his mental health. Whilst, he had experienced a depressive episode when I was aged around sixteen or seventeen years old, I cannot say that this was attributable to his HCV. My father up until his death, was a very gentle gentleman.

Treatment

43. As far as I am aware, my father had undergone treatment to clear his HCV with Interferon, under the care of Dr Christie at Derriford. I do not recall how long his course of treatment lasted, or at what point he commenced his treatment.

44. However, my father did experience a number of side effects associated with his treatment, which included tiredness, fatigue, and a change in his personality. He became depressive and moody. In the end, my father's treatment was stopped as the doctors said it did not agree with him. Due to his failed course of treatment, my father did not clear his HCV infection.

Impact

45. The decline in my father's physical health had quite an impact on him. He was once a very avid gardener, who had a keen interest in plants and flowers. As it became less able for him to move around unaided, this made gardening difficult to maintain.

46. My father and I were very close, and we had a strong bond. The best quality time I had with dad towards the end of his life, was when I visited him in his care home. We would chat for hours about anything and everything. I loved him because of who he was, and who he was to me.

47. I cannot pass comment on exactly how my father's decline in his health, HCV diagnosis, and subsequent death had impacted on my mother GRO-C
GRO-C However, she always tells me that she misses him dreadfully.

48. I do not believe that my father experienced the stigma attached to HCV. My mother was always very open and honest about my father's HCV infection. She would self-disclose this information to all medical professionals whenever they attended either the hospital, dentist, or when his carers would visit the house before he went into a care home. I do not believe that he was treated any different due to his HCV.
49. My mother had most likely told other persons in the wider community about my father's HCV. She would not have done this to belittle my father, more, to ensure that persons would not be put at risk of contracting HCV. I would always tell persons about my father's HCV if I felt that it was necessary.
50. My father was very social. He would always look to talk to people. I would not say that the decline in his social life is attributable to his HCV, rather that of his old age and inability to get about unaided.
51. My father did not experience any work-related effects associated with HCV. He had always said that he was lucky that he had worked for a person who employed him because of his haemophilia. My father did not have a lot of time off work. He led quite a normal life. At one point, he was the only fireman who was a haemophiliac in our area.
52. Because of the impact of my father's haemophilia, he had to retire earlier than originally expected. He had quite a good quality of life because of his early retirement. If he had to work until he was sixty or sixty-five years old, I do not know he would have lasted that long.
53. As a consequence of having to retire early, this had an impact on the pension he received. His pension is significantly lower than if he worked up until retirement age. This small pension means my mother is not eligible to receive free entitlements.

54. My father's haemophilia and HCV had an impact on my family. My parents had thought about buying a house, but they were not able to do so due to worries surrounding future affordability. They expected to be met with the response "*oh you are a haemophiliac, you will not be able to afford it.*"
55. Apart from on one occasion, my parents did not go abroad on holiday as the premiums were too high due to his haemophilia. They were not able to visit my ex-husband, my children, and I when we lived in Hong Kong in around 1996.
56. I believe that my parent's financial issues also had an impact on my job prospects. When I completed my A levels and O levels at school, I had my heart becoming an Occupational Therapist. However, I was not able to accept my place at the Occupational Therapy School, Exeter for a number of reasons. The grant I was expected to receive did not cover the fees, and as I did not have the confidence in myself to pass, if my parents would have struggled financially, it would have been for nothing.

Section 6. Treatment/Care/Support

57. I do not believe that my father faced difficulties or obstacles in obtaining treatment, care and support in consequence of being infected with HCV. He had not ever been treated differently by the medical profession.
58. As far as I am aware, I would say that my father's HCV may have impacted upon the dental treatment he had received after his diagnosis. Whilst he received treatment through the private care system, this was due to the location being convenient above anything else. From what I have been told by my mother, the only thing I would say he experienced issues with, is that he had to pay an extra cost whenever he had undergone dental treatment as they had to dispose of all the equipment after they treated him.
59. As far as I am aware, my father nor my mother were offered any counselling or psychological support as a consequence of my father's HCV diagnosis. I would have otherwise been made aware if this was something that had occurred.

Section 7. Financial Assistance

60. I do not believe that my father was offered nor provided with financial assistance as a consequence of his HCV infection. If he would have received any financial assistance, my mother or father would most likely have told me. We were quite a close and open family.

Section 8. Other Issues

61. I wish to provide a witness statement to the IBI, as if my father were here now, he would want me to do this on his behalf. If I am honest, I thought that the last thing I would do for my father would be to sort out his head stone for his grave. But, providing a witness statement to the IBI is an added thing I am doing for him.

62. There are a lot of people still alive who have been infected and affected by the Contaminated Blood Scandal, and if something could come out of the IBI's findings, that would be great. Unfortunately, it has come to light where they sourced the contaminated blood, and yes, I think people should be made aware of the relevant information.

63. Whilst I have not provided a statement for monetary gain, financial assistance would be useful to care for my mother's needs, and to provide for mine and my children's futures.

64. When I think about the treatment my father had received for his haemophilia throughout his life, I expected that HCV was just something that happened as a consequence of the Factor VIII he was given. However, it depends on what side of the coin you look at. On one side, the treatment alleviated his bleeds. On the other side, his treatment gave him HCV. The same analogy occurs when you think about whether, if my father had in fact taken all the Factor VIII he was prescribed; but for his belief surrounding developing a tolerance to his

treatment. Would he have contracted HIV? Or, would he have suffered with the debilitating physical effects he had experienced up until the point of his passing.

Statement of Truth

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

Signed GRO-C

Dated 28/09/21

Table of Exhibits:

Date	Notes/ Description	Exhibit number
26 January 2018	Death Certificate of Frederick White, Certified by S de Boer, Deputy Registrar, County of Devon.	WITN6604002