

Witness Name: Bridget Clarke

Statement No: WITN3003001

Exhibits: 0

Dated: December 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF BRIDGET CLARKE

I, Bridget Clarke, will say as follows:-

Section 1. Introduction

1. My name is Bridget Clarke. I live at GRO-C Belfast, GRO-C
GRO-C I was born on GRO-C 1961. I am married and have three children, aged 37, 32 and 29. I work as an Executive Assistant to the Director of Corporate Services at the Northern Ireland Housing Executive.
2. I make this statement in relation to my late mother, Mary Theresa McVicker, who was born on GRO-C 1943 and who died on 22nd February 2014, aged 70. She was infected with Hepatitis C (HCV) as a result of receiving a blood transfusion following the births of my twin brothers, Matthew and Christopher McVicker.
3. I am the eldest sibling of eight. I have five sisters and two brothers.
4. I am aware that my brother, Matthew McVicker and my sister, Mary English, are providing their own accounts by way of statements to the Inquiry.
5. This statement is prepared without the benefit of access to my late mother's medical notes and records.

Section 2. How infected

6. On GRO-C 1971, my mother gave birth to my twin brothers Matthew and Christopher McVicker at The Mater Infirmorum Hospital, Belfast. As far as I am aware the births were normal although Mum lost a significant amount of blood and subsequently required a blood transfusion. She never discussed this with us.
7. I am not aware of what advice, if any, was offered to my mother at the time with regard to that transfusion.
8. Mum had 8 children between 1961 and my youngest sister was born on GRO-C GRO-C 1974.
9. Mum had various illnesses but when she was in her late 50s early 60s they began to get worse.
10. Mum was feeling very tired all the time but put this down to having 8 children. She had also had a couple of miscarriages. She hid a lot of her ailments from us and she just got on with looking after us. She had her gallbladder removed whilst she was in her 40s. Subsequent to that she was still feeling unwell and was taken in for an urgent hysterectomy. It was difficult for her as she had not got over one surgery and then went on to have another.
11. I remember that she struggled with general lethargy and always seemed to have some ache or pain but again, with 8 children to look after, she got on with life. Her GP at the time was Dr Colin Brown based at the Salisbury medical centre. She told him about the problems she felt outside her liver on the side of her body. She kept telling him that something was not quite right but he didn't investigate this.
12. After some time they eventually did blood tests and found that her liver function levels were raised. She was subsequently sent for a liver biopsy. As

a result of this she was told that she had contracted Hepatitis C and the doctor confirmed that it was a result of the blood transfusion in 1971.

Section 3. Other Infections

13. I do not believe my mother contracted any other infections as a result of receiving the contaminated blood.

Section 4. Consent

14. Mum never spoke of the trauma involved during the birth of my twin brothers and I was not aware at the time that she had had a blood transfusion. I am therefore not able to comment as to whether she gave consent to it or whether she was given any advice as to the risk of it.

Section 5. Impact of the Infection

15. Mum and Dad had split up in the mid 90s and Mum had just started living her life. She had moved house and had secured a job as a warden at The Fold which was a home for able bodied elderly people. She had regained some independence and was enjoying her job and her life.

16. However, she was also struggling with severe lethargy and had been diagnosed with HCV. My sister took mum to the hospital for a scheduled liver biopsy. She put her to bed to sleep of the anesthetic. Mum was wakened by a phone call from the consultant who gave her the results of the biopsy while on her own and still drowsy.

17. I received a phone call from my mother at around 4pm on that day. She was still very drowsy but said that the doctor had called to say that she had Hepatitis C. She then said to me, "what does that mean?"

18. My mind went into overdrive. I asked her what else the doctor said to her, to which she replied, "nothing". There had been no discussion, there was no follow up, nor was there any explanation.

19. My siblings and I all sat down together to discuss what we could do. We thought about seeing a private consultant to arrange for a private diagnosis. My mother's brother was a paramedic and his wife worked in a hospital we sought their advice on a liver specialist in Northern Ireland at the time so we could speak to them to arrange for a second opinion.
20. We came up with the name of a consultant privately and did seek his advice. We discovered that Mum would be seeing this consultant in any event. He explained a little more to her. She told us that he had her medical records and told her that it was the blood transfusion following the birth of the twins that had caused her to contract the disease. She was told that there were different treatments for different strains and that she had genotype 3 which they were aware did not respond well to the new treatment that was available to her.
21. Mum decided to go for the treatment anyway. She was assigned to a nurse called Karen who was the only specialised in HCV in Northern Ireland. She wasn't that experienced in the HCV condition and didn't have answers to our question. The original consultant retired due to ill health and mum was assigned to Mr MacDougal, whom we found to be inconsiderate, impatient and rude. Mum's GP had no answers and directed us to the "expert" Mr MacDougal, he didn't like us asking too many questions and directed us to mum's GP she was given no support, advice, guidelines or information. She was told at one time about possible transmission through sharing toothbrushes.
22. Karen administered her treatment and whilst I cannot remember how often I know that she was given Interferon and Ribavirin twice a week or twice a month. She was put on this treatment shortly after her biopsy.
23. She suffered side effects. Her tiredness increased and she was in constant pain. All she seemed to do was sleep outside her work. Her work seemed to keep her going. She became for irritable and was less tolerant with her grandchildren and visitors in general.

24. When people called to see her it seemed a bother to her which was not like her at all. Prior to this everyone was welcome.
25. Her health deteriorated even further and it appeared that her legs could not hold her. Her consultant, Dr MacDougall, made her feel like she was a bother and made her feel that it was her fault. Mum was a little overweight and could not exercise due to the lethargy Dr MacDougall seemed to blame this on all her issues. However, I believed at the time that she was retaining a lot of fluid and was in severe pain, which he was not taking into account at all. She wasn't able to exercise because she had no energy mentally or physically.
26. I attended these visits with Mum and found this consultant had no bedside manner and seemed to be under the impression that she had brought this on herself and not have any understanding that this had been done to her by the neglect and failure of the medical profession. On one occasion my sister Marion and I went with Mum to an appointment and we asked about the fluid in her legs and the pain and lack of movement she felt in them and that she found this frightening. I remember him saying at one stage "Oh for goodness sake, I can't answer all your questions, speak to your GP". That felt like a slap in the face and I actually welled up, it was so embarrassing to be spoken to in that manner by a senior medical consultant. Mum then continued her visits to Mr MacDougal on her own as *she* didn't want us to get upset, she was still trying to protect us!
27. When we asked about a liver transplant we were told that she wouldn't even be considered because of her *own* health and were given no further explanation. My mum did not understand the term he used, "*you need to get your own health much better*".
28. We tried to get answers as we didn't know whether all her symptoms were related to HCV. However Mr Mac Dougal gave her no help. Looking back, however, she just didn't appear to have the energy and mental capacity to push for explanations.

29. I believe there was stigma attached to her condition. I believe on at least one occasion she was refused dental treatment. I do recall that whilst she was on Interferon and Ribavirin her iron levels were very low. I recall there was complete confusion about whether she should undergo a further blood transfusion. I remember that she had varices as well and whenever she had to undergo a procedure to tie them off she was always last on the list.
30. Mum's health deteriorated to such an extent that my sister Marion moved in to care for her. She continued to do her job hanging on to a rail as she went around the home; her legs would not carry her.
31. Mum was extremely independent; she did not tell us the half of what she was suffering. She loved to go to Donegal for weekends and holidays; she had a house there. She used to drive herself but as she became unable to, she became more dependent on us. I feel sad that we didn't take her to Donegal as much as she would have liked as we all had busy lives with our own children.
32. Mum had a major fall at the end of August 2013. By this time she had retired but had continued to live at The Fold and paid rent. She was down at the common room and went to close a window. Whilst she was not employed by them anymore she still took on duties. Unfortunately the handle broke and she fell backwards and broke her pelvis.
33. She was taken to hospital but the medics did not appreciate the issues that she had with her liver condition and whilst I asked them to contact her liver specialist they said they did not need to. The orthopaedic specialists were not talking to the liver specialists and vice versa. All they did was continue with the rehab plan because all they could see was a patient with a broken pelvis and not a liver patient too. She could not lift her legs and she found that the nurses would not help her insisting that she persevered with moving on her own. I have never witnessed my mum as frightened and nervous in her life.
34. At this time we didn't recognize our own mother. She had become very erratic and nervous. She was both frightened and worried. I believed that

she could not break down the medication that the rehabilitation team was giving her and I asked for a meeting with Dr Steel and the nurse in charge to stop treating with so much medication and reintroduce it much more slowly as she was getting worse not better. Dr Steel said "I am not willing to do that".

35. Mum was initially taken to Meadowlands for rehabilitation but was then taken to the Royal Hospital for one week. She left rehabilitation against our wishes, there was no package put in place for her care.
36. She had lived in a house with her bed upstairs. When she returned home she slept for three days in a chair at her home. She was sent home heavily sedated and on morphine patches to live on her own. I tried to get her a hospital bed but there was not one available as it was the weekend. She slept in a chair and deteriorated very quickly.
37. Dr Peter Boylan was a lovely man and GP. He came out to see her and saw that she was frightened and that she did not want to go back into hospital but she needed to be in hospital. Eventually she was rushed to Belfast City Hospital. She was suffering from morphine toxicity; her body had begun to shut down and her breathing was laboured. They took her morphine patch off and her body started getting better.
38. We kept trying to bring to their attention that she had HCV. Whilst she seemed to be getting better the problem was that she was retaining fluid all over her body. She had good days and bad days. She did not sleep well.
39. She saw Dr Aflan who prescribed sodium injections and put her on a diuretic plan. She didn't sleep during this treatment and whilst we had always encouraged her to drink water; we did not realise that this was bad for her.
40. At one stage I did over hear Mum tell her brother that the nurse had given her too much of a drug to do with her sodium levels but that she did not want us to know as she did not want the nurse to get into trouble. I spoke to the hospital but mum said "Bridie, leave it".

41. She was released and Dr Boylan came out to see her again. I still thought that there was a wee bit of hope and that if got her back into hospital there would be something that could be done to help her. Dr Aflan said that if we could get the fluid under control there would be hope but she did say that the sodium overdose had undone everything.
42. Mum's condition once again deteriorated and we spoke to Dr Boylan. He said that she should be taken to the ward at the Hospital and he arranged for an ambulance. Mum's symptoms got worse and I escalated the call for the ambulance. The ambulance men came and said that they would take her to Accident and Emergency. I argued with them and said that she was to go straight to the ward on Dr Boylan's instruction. Eventually after contacting the ward and contacting Dr Boylan the ambulance men said "fairplay" to me and they took her straight to the ward.
43. I remember a male doctor spoke to me and Marion and said "you do know that these are your mum's final days". Eventually the doctor said that they could give her no more diuretics; they had lost their effect and her kidneys were shutting down. They said that they could try a shot of protein to see if it helped and it did but just for a short while.
44. I remember one time when I took her to the Chapel in the hospital. She saw her self in the mirror in the lift and was shocked at her appearance.
45. Mum died on 22nd February 2014. We all agreed that she was a tough old bird but could not fight anymore; she just had no reserves, I said mum you have done enough she had fought long and hard she didn't want to go.
46. The cause of death cited on her death certificate became a little controversial. It confirmed that she died from HCV and cardiac failure. However, when she was registered for cremation the doctor on duty advised that HCV does not kill you but you die from its complications; it is liver failure that kills you. Her death certificate however was not amended.
47. The directors at the funeral company were great. Whilst there were specific rules to follow in the Belfast Trust that her body be taken to the hospital

morgue in the Royal from the Mater; the director of the funeral company debated this with the nursing staff and they finally agreed to let her go straight to the funeral home as this was our wishes.

48. They were amazing and the funeral director took her to the parlour and then home to us to wake her in an open coffin and finally she was cremated as per her wishes.

49. Whilst I worked part time I spent a lot of time with mum at her appointments which I believe was twice a week when she was having the Interferon and Ribavirin treatment.

50. In or around 2006/2007 I began to feel really tired and it was always at the back of my mind that I could have HCV. I asked to be tested and I was negative; it transpired that I had an underactive thyroid.

51. It was frightening to watch my mum deteriorate. It was completely out of my control, no safety net, which was usually my mother. She was the rock, the one to turn to in times of crisis, an independent, strong woman and to see her not being able to control her condition was unnerving. It affected my time with her. It was the unknown that was frightening; whether and at what time the HCV would take her life. We did not know what symptoms to look out for we had no knowledge and the 'experts' let us down.

52. It was difficult for us to realise how ill she was. She didn't look ill. She always wanted to look after others and she was always the one to take charge. However, I think she also suffered from depression that she didn't recognise.

53. My children were born in 1982, 1987 and 1990. I was not only caring for my mother but also my children. Mum was very proud and independent and did not want looking after. I had to tell her that she would have to swallow her pride and let us look after her for once.

54. My mother was a strong and independent woman, so it was frightening to see her decline in health. The whole family was in total shock when she died.

Section 6. Treatment/care/support

55.As far as I am aware mum did not receive any counselling to support her condition.

Section 7. Financial Assistance

56.I believe that mum did not receive any financial assistance from any organisation or fund in connection with her HCV.

57.Mum was forced to retire because of her health and the fact that she was in and out of work due to her appointments. However, I believe that the home where she worked was reviewing their employees and that she did not fit the criteria. Two part time wardens replaced her. She lived off a small pension that she received when my father died.

Section 8. Other Issues

58.I would like to see a support system put in place for those living with Hepatitis C and for their families. I feel that the medical profession let my family down and I would not wish this to happen in future.

Anonymity

59.I do not wish to remain anonymous for the purposes of the Inquiry.

60.If the Inquiry requires it, I am happy to give oral evidence.

Statement of Truth

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

Signed... GRO-C

Bridget Clarke

Dated..... 9 December 2019