

18 MAR 2019

Witness Name: **GRO-B**

Statement No.: WITN07790001

Dated: \_\_\_\_/\_\_\_\_/2019

**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 7<sup>TH</sup> January 2019.

I, **GRO-B** will say as follows: -

**Section 1. Introduction**

1. My name is **GRO-B** I am 44 years of age having been born on **GRO-B** 1975. My home address is known to the Infected Blood Inquiry. I am a single woman living with my partner. I am currently a full-time student undertaking a degree in Speech and Language Therapy as I am re-training to become a Speech and Language Therapist. I have two children,

# ANONYMOUS

both aged under 6 years.

2. I am providing this witness statement to tell the Infected Blood Inquiry about my mother, **GRO-B: M** (nee **M**), who was born on the **GRO-B 1947** and who died on **GRO-B 1987**, at just 40 years of age.

3. My mother died as a direct result of her having received contaminated blood. This happened when she was given a blood transfusion at the Manchester Royal Infirmary (also referred to as the 'MRI') in 1982 when I was just seven years old. I do not know or recall the exact dates.

4. Having been given contaminated blood, my mother subsequently developed HIV and died. I was then only twelve years of age and my younger brother about to turn ten. We were living with our parents.

5. I should like to tell the inquiry of the manner in which my mother became infected, the nature of her illness, how this impacted upon her before she passed away, and the impact her illness and subsequent death has had on my family and I.

## **Section 2. How Affected**

6. My mother was a loving, caring, woman and the centre of my world, who at times had to look after both my brother and I on her own, as our father worked abroad on a regular basis.

## ANONYMOUS

7. My mother was a morally-upright woman, someone who didn't engage in any health-hazardous activities, such as intravenous drug use, self-tattooing or promiscuous sexual activity, if she had, despite my age, I would have known.

8. She trained as a Midwife, worked latterly as a District Nurse, and took her career and family life very seriously. She was also a religious lady, coming originally from Protestant Northern Ireland where there is a strong religious community – we were regular attendees at church and engaged in its related activities.

9. She was suffering from a condition known as Lupus, although it was not diagnosed until later in her life - Lupus was not widely understood or diagnosed at the time, from what I now understand. At one time, doctors believed that she may have had rheumatoid arthritis.

10. Lupus made her very tired, although she was determined to continue working part-time in the evenings and looking after her young children. She protected us from her illness and tiredness as much as possible, and so we were shielded from it.

11. In 1982 she had been feeling unwell, due to the Lupus, and she was referred to Wythenshawe Hospital in Greater Manchester. I do not remember all the details except that her condition deteriorated, and she had to be transferred to the Manchester Royal Infirmary (MRI).

## ANONYMOUS

12. Shortly after admission to the MRI, she was transferred to the critical care unit as she had lost, I believe, eight pints of blood and almost died. It was on this day that she received a blood transfusion contaminated with HIV.

13. My mother had a rare blood group (B Negative) and apparently, finding suitable donor blood was problematical, as there was less of it available for use than with other types.

14. My mother received a blood transfusion in the hospital theatre.

15. I do not remember exactly, but I think it took her a while to recover post-transfusion, but then she was back to her normal life.

16. Post release from hospital, following the blood transfusion, she was monitored by doctors, for her Lupus, but I cannot remember any of their names or other details.

17. What I do remember, is that my mother was a regular outpatient of the MRI, as I remember waiting with her and my brother for long periods in the hospital during school summer holidays.

18. I can remember her telling me that the doctors and / or consultants were not exactly sure what her illness was, or how to treat it. I know she had her blood tested there on occasions.

## ANONYMOUS

19. As a young child, I did not notice a deterioration in her ill-health, as I was shielded from it, until just a few months before she died, when she started to look unwell, and had a swollen cheek, due to the Lupus. Following admission to Wythenshawe Hospital, she was again transferred to the MRI just a week or two before she died.

20. On **GRO-B** 1987, my mother died in the MRI despite her not having been in there for that long. From what I understand, she lost some function in her brain towards the end stages.

21. As this was now 1987, I believe that it was at this point or shortly after her death, that it was found from the MRI doctors that she had HIV/AIDS, but personally, I was not informed of this until a couple of years later.

22. Although we learned at some time between the transfusion and her death, that she had Lupus, as a family we were all unaware, including my mother, that she had been infected with HIV.

23. In later life, I learned from my father, that my mother had fallen pregnant again, but that they had been advised by doctors to have a termination due to her Lupus – I very much doubt that she would have tried to get pregnant at all, had she known that she was HIV positive, and knowing that she could have passed the virus on to the baby, and her husband.

**Section 3. Other Infections**

24. I am unaware of any additional infections my mother may have contracted through the contaminated blood transfusion she was given at the Manchester Royal Infirmary.

**Section 4. Consent**

25. From what I understand, my mother would have been too weak to have been able to make any decisions concerning any emergency blood transfusion. My father was with her, and he may well have agreed to it in lieu, but I cannot say if this would have been verbal or written.

26. As my mother was a trained nurse, she would have been aware of general risks, but knowledge of HIV had not been publicised at that point, certainly not to the general public. Had my parents been aware of the risks, I am not sure anything else could have been done as she was about to die, and so would have had to accept a blood transfusion. As a nurse, my mother held great faith in doctors and other medical professionals.

**Section 5. Impact**

27. My mother's death, coming when I was just twelve years old, was the end of my world, and to this day I cannot get over it. My brother was then only nine (GRO-B short of his tenth birthday). I found it very isolating, growing



## ANONYMOUS

up as a teenage girl without a mother and feel that both my brother and I were 'lost' really.

28. Fortunately, we were academically capable, went to good schools, and were able to progress to university. It has saddened me throughout my life, that my mother had not been there for my graduation, or for the birth of her grandchildren; and I did not have my mother to help guide me through young adulthood or show me how to be a good mother myself. My children will never meet her, or my father, and it breaks my heart.

29. Our father struggled to cope with his wife's death or the sudden burden placed upon him of raising two young children on his own, whilst having to maintain a full-time job.

30. He had to change jobs internally, as he could no longer work abroad, due to our child care requirements, resulting in a loss of income.

31. He remarried **GRO-B** after a short courtship, which meant that we became part of a step-family, with two older step-sisters. Personally, I did not adjust at all, finding my step-mother a vindictive woman who tried to isolate me from my father. They subsequently divorced when I was about twenty-two.

32. The stress of potentially having HIV himself (as he had unwittingly put himself at risk, many times) and the prospect of coping with it all, drove him to start drinking heavily, and he became an alcoholic. There was a brief time of a

few years whilst I was in my twenties when he stopped drinking, but he resumed, and ultimately it killed him aged just sixty two.

33. My maternal grandparents had also lost their daughter, aged just forty. My aunt and uncle (my mother's sister and brother) had also lost a sister. This uncle also died a few years ago, prior to my grandmother's death last year, which meant that my grandmother had lost two of her three children, both within her lifetime.

**Section 6. Treatment/Care/Support**

34. My mother had been treated by our General Practitioner, Dr.

GRO-B

of the

GRO-B

Health Centre

GRO-B

together with the doctors and / or consultants at both the Wythenshawe Hospital and Manchester Royal Infirmary.

35. I am unaware of any drug trials my mother may have participated in.

36. No bereavement or counselling services were offered as far as I am aware.

37. The only barrier to her receiving treatment was that the HIV infection had not been identified any earlier, particularly as my mother was a regular outpatient of the MRI where she underwent regular blood tests. It is almost unbelievable that her HIV status was not identified any earlier.



**Section 7. Financial Assistance**

38. Dr. **GRO-B** informed us of our ability to claim compensation, approximately five years later. Initially, my father rejected it, but then we decided to accept it. I received £20,000 when I was eighteen (which I used to fund my first university degree) and I think my brother received the same, but I am unsure what our father received.

**Section 8. Other Issues**

39. The death certificate for my mother reads that she died of

1. Cerebral Infarction, and
2. Systemic Lupus Erythematosus

40. No mention was made, *whatsoever*, of her having been suffering from HIV. I do not know why this was not mentioned, but believe it wrong that it did not appear and feel that it may have been due to the culture of fear surrounding HIV/AIDS at the time.

41. I would like the Inquiry to have awareness of cases like ours, which are in a minority, as opposed to the large numbers of haemophiliac men and homosexual men who received contaminated blood products. It demonstrates that a wider range of people have been affected by use of contaminated blood, far more than is portrayed in the media.

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18<sup>th</sup> March 2019

**Statement of Truth**

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

Signed: .....

GRO-B

Dated: .....

18<sup>th</sup> March 2019