

Witness Name: Doris Smith

Statement No: WITN5097001

Exhibits: Nil

Dated: 8-3-2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DORIS SMITH

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 01 October 2021.

I, Doris Smith, will say as follows: -

1. My name is Doris Smith (nee Cromar). My date of birth is GRO-C 1952. I live in GRO-C Staffordshire and my full address is known to the Inquiry. I am retired, having previously been employed as an airport security officer at Manchester Airport. Before this, I was in the Armed Forces for four years, where I met my first husband. We married on 12 April 1973, but we divorced in 1980. We have two children and three grandchildren together. My eldest son David was born in 1974, and my daughter Maxine was born in 1976. My daughter Maxine lives with me and we have always lived together.
2. I intend to speak about my infection with Hepatitis ("HCV"), after having received several blood transfusions for blood lost during child birth, both when my son David

was born in 1974, and in GRO-C 1976 when my daughter Maxine was born. In particular, I wish to discuss the nature of how I learnt about my infection, how my illness affected me, my family and our lives together.

3. I can confirm that I am not currently legally represented and I am happy for the Inquiry team to assist me with my statement. The Inquiry Investigator has explained the anonymity process to me. However, I do not wish to be anonymous as I wish for my story to be known in full.
4. The Inquiry Investigator has explained 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.
5. 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.

Section 2. How Infected

6. In 1972, I met my first husband whilst we were both employed in the Armed Forces. Then, in 1974, I gave birth to my son David at the Royal Hampshire County Hospital ("Royal Hampshire"), Romsey Road, Winchester, SO22 5DG.
7. In 1976, my husband David, and I lived in Hanover, Germany, where we were posted with the Army. We were there for 3 years. In GRO-C 1976 I went into labour with my daughter Maxine, so I was taken to the British Military Hospital ("BMH Hospital"), Hanover. I suffered complications during the birth, and I passed out suddenly. I do not remember much around this period of time, other than a lot of doctors being around me then being placed onto a trolley, and wheeled into the lift. I distinctively remember the trolley banging into the lift door as they were in such a hurry. The next thing I recall, is waking up in a massive bed at the British Military Hospital.

8. A week later, I recall a military doctor – who was a Colonel - came and sat next to me on my bed. He patted my hand and said something along the lines of, *"You have done very well, and you are lucky to be here. You have a lovely daughter."* I was told that the doctor had spoken to me for around an hour, but I do not remember what was said. At no point in time, do I recall that the doctor had told me that I had undergone a hysterectomy, or, that I had received a blood transfusion. However, he may have done but I can't remember anything he said to me at that time. I think I may have still been suffering from the anaesthetic as I kept falling asleep and would wake up suddenly and he was still sitting there.
9. Gradually, I recovered physically. After a period of three to four weeks, my husband bought my son to see me at the hospital. At first, my son didn't recognise me and shied away under his father's leg and this really upset me.
10. Eventually, I was discharged home but I was told to take it easy. Thereafter, within a few weeks, my husband went back to work. During the week that he returned to work, a district nurse came to see me at our family home to check on my wellbeing. During our conversation, she stated something along the lines of, *"Oh well, at least you do not have to worry about periods anymore."* I did not know what she meant by this, so she went on to explain that immediately after giving birth to Maxine, I had undergone a hysterectomy. This was a shock.
11. In 1978 when my daughter was 2 years old, my former husband - David, Maxine and I returned home to the United Kingdom. Then in 1980, my husband and I divorced as a result of my post-natal depression.
12. In 2003 I took up employment as an airport security officer at Manchester Airport which was a job I really enjoyed.
13. Around 2009 or 2010, whilst I was still working at Manchester Airport as an airport security officer, I had noticed that my tiredness was becoming quite excessive. I felt generally unwell, and I could not wake up properly. I knew that it was not right, the way I felt, so I decided to seek medical assistance from my local General

Practitioner ("GP") [GRO-D]
[GRO-D]

14. During a face-to-face consultation with [GRO-D] I told [GRO-D] about my symptoms such as my persistent tiredness and lethargy. Also, about the impact this was having on my life, and my ability to carry out my work duties. Almost dismissively, [GRO-D] told me not to worry, it was probably just my age. I took [GRO-D] word for it as after all, it is rare to question a doctor's advice.

15. However, after a short period, my tiredness was gradually getting worse. My daughter forced me to go to see my GP because I was bloated and a friend had commented on my eyes being yellow and I was told I should go to the doctor and get it checked out.

16. So I went to see [GRO-D] for a second time [GRO-D] seemed surprised to see me and asked what [GRO-D] could do for me. [GRO-D] had stated that [GRO-D] did not understand the cause of my tiredness, but that [GRO-D] would request blood tests. These came back very quickly either the next day or the day after and the surgery receptionist rang me and told me to make an appointment to see the doctor. [GRO-D]

[GRO-D]

dismissed my genuine medical concerns as if they were nothing and I felt quite upset. My daughter has a medical background as does my friend and they had advised and encouraged me to see my doctor.

17. Around 2014 or 2015, I was still feeling tired. My daughter said that I needed to go back to the doctor to get it sorted, but I did not want to see [GRO-D] as I knew it was a waste of time. In the end, I asked to see another doctor at [GRO-D] for a second opinion. I have refused to see [GRO-D] since.

18. At a face-to-face consultation with the locum doctor, whose name I cannot recall, I told them about my symptoms and that it had been going on for a long time. He

said that he needed to do more in-depth blood tests, so more bloods were taken. I received a phone call from the surgery asking me to make an appointment regarding the results of my blood tests. When the test results returned, he said that whilst he was not a specialist, it was evident that my blood levels were not correct. He referred me to a specialist at the Royal Staffordshire Hospital, Stafford.

19. Within a short period of time, I was given an appointment with Dr Brind at the Royal Staffordshire Hospital. She was really good at her job. She did a lot of tests, and carried out a physical examination. She said I had a number of liver spots so she would need to do further tests. She explained that if you have more than a certain number of liver spots then this could indicate issues with the liver. When the results were back, I was told that my liver function was not working correctly, so she would need to find out why.

20. The following week, I attended a face-to-face appointment with Dr Brind, alongside my daughter Maxine and my niece. I immediately knew that there was something wrong when she told me to sit down. She proceeded to tell me something along the lines of, *"I am sorry to have to tell you this, but you have Hepatitis C."* I was shocked as I did not know what it was or what this meant with regards to the impact it could potentially have on my future. In response, I stated, *"Hepatitis C? That is quite dangerous, isn't it?"*, to which she replied, *"I am afraid it is."*

21. Whilst Dr Brind advised me on a few things with regards to how to manage my infection, going forward, I would not say that it was adequate information to enable me to manage my infection. I feel that I was diagnosed with this illness, but in no way was I advised how to manage my illness. I did not have the information I needed to look after myself. I was simply told that I could not share a toothbrush, share towels or share bath water with another person. I was given dietary advice such as not to eat bananas, and not to take ibuprofen due to my liver issues. However, following my own research I have since discovered that this is conflicting information regarding bananas.

22. Dr Brind said she would refer me to a dietician; however, I am still waiting for the appointment! I tried to follow this up on a number of occasions when I went to Dr

Brind but I would like to emphasise that this was not Dr Brind's fault, she was very caring and a good doctor.

23. This lack of information meant that for a while, I was scared to even kiss my children or grandchildren as I was worried that I was going to pass on my infection. It gave me the retrospective fear that in the past, before I was diagnosed, I may have cut myself and unknowingly put my loved ones at risk. In the past my daughter and I had shared bathwater and towels so this worried me and this all had to stop. When my granddaughter was first born I had shared baths with her and this really worried me. I should have been given adequate information. Maybe that is unrealistic to have expected, but I needed to know what I could, or could not do.

24. Dr Brind then proceeded to ask me whether I had ever had a blood transfusion. I said "*I don't know. I do not think so.*" At the time, I had not been told that I had received a blood transfusion in 1974, and again in 1976, but I had suspected it, because I had lost a lot of blood during the birth of both of my children. I felt like crying but as I was about to, Maxine started to cry as she thought it was her fault that I had been infected with HCV. My focus was on comforting her rather than getting visibly upset myself.

25. A couple of years after my HCV diagnosis and once I had been referred to the Queen Elizabeth Hospital Birmingham ("Queen Elizabeth"), Mindelsohn Way, Birmingham, B15 2GW, for HCV treatment, I applied for my medical records. I applied for them after my application for financial assistance to the Skipton Fund was refused which I mention in more detail below in Section 7. I had to pay to access my medical records, I think the fee was around £50. I was not allowed to take the records away, instead I had to make an appointment at my surgery and read through my notes and request copies of any I deemed to be of relevance. When reading through my records, I found out that I had in fact, received a blood transfusion on two separate occasions, both during childbirth. The first being a blood transfusion in 1974 at the Royal Hampshire Hospital when I gave birth to my son David. The second transfusion was when I gave birth to my daughter Maxine in 1976 at the British Military Hospital, Hanover, Germany.

26. When I was first diagnosed with HCV, I was asked about life style choices, such as drinking, intravenous drug use and tattoos. I have never been a drinker; I have never taken intravenous drugs and my ears were pierced professionally. Therefore, through a process of elimination, it was established that the cause of my HCV infection was as a result of blood transfusions, either the transfusion I received in 1974 at the Royal Hampshire during the birth of my son or in 1976 at the British Military Hospital, Hanover.

Section 3. Other Infections

27. As far as I am aware, other than HCV, I do not believe that I have received any other infections as a result of having received the two blood transfusions in 1974 at the Royal Hampshire and in 1976 at the BMH Hospital, Hanover.

28. Alongside HCV, I am unaware as to whether I have ever been tested for the presence of HIV. If I had, then I was not told this information.

29. At no point have any medical health professionals advised my daughter Maxine or son David, to get tested for the presence of HCV or any other blood borne infection. They did however advise me to get in touch with my first husband to tell him about my HCV infection. This was a tough conversation to have with someone who was once so close. My daughter helped facilitate this conversation and asked him on my behalf.

Section 4. Consent

30. I do not believe that I have been tested without my knowledge, without my consent, or without having been given adequate or full information, or for the purposes of research.

31. I do however believe that I have been treated without my consent or knowledge with regards to the blood transfusions, although I appreciate that it was an emergency situation. I don't recall ever having been told that I had received a blood transfusion both in 1974 or 1976 whilst at hospital following both emergency caesarean operations, which I find very strange. I therefore could not knowingly have provided consent to this treatment. Whilst I know that it was provided in a life-threatening situation as I had lost a lot of blood during child birth, I should have been told afterwards, or have been given the opportunity to provide consent prior to my labour, in the eventuality that I may need blood should I experience a medical complication. However, it is possible that the doctor told me about the transfusions and hysterectomy immediately following the birth of Maxine when I regained consciousness although I have no recollection and I certainly never received anything in writing to that effect.

32. My husband should have been asked for consent if I was unable to give it at the time, due to the emergency situation. As far as I am aware he was not asked to give consent and he certainly never mentioned it to me or later when Maxine had to inform him, on my behalf, about my HCV diagnosis. He was shocked when Maxine told him, he knew that I had been quite poorly but he didn't realise the implications of it.

Section 5. Impact

Mental/Physical Impact:

33. I believe that my HCV infection had a lasting effect on my mental state. After giving birth to David in 1974, I suffered greatly with regards to my mental health, to the point that a doctor from Winchester surgery visited me at my house because I had suicidal thoughts. I still recall the doctor's comment which put my depressive thoughts into perspective. He stated something like, "*That baby only has one mother who cannot be replaced.*" I was prescribed with a number of anti-depressant drugs as treatment. I was prescribed Prozac which I have remained on ever since, although the dose has reduced somewhat. My GP in reviewing my use of anti-depressants recently, asked if I would prefer to come off the medication and

try cognitive therapy instead. However, I have resisted this as I worry that if I stop taking the pills I may suffer from depression again. I feel that taking the antidepressants act as a reassurance.

34. Between 1974 and 1976, my mental health gradually improved and became a lot better. However, in 1978, two years after the birth of my daughter, all of a sudden, I experienced another sudden decline in my mental health, which has stayed to date. However, this was nothing like the first bout of depression which was far more severe.

35. I was prescribed a second round of antidepressants in Germany but when I returned home to the United Kingdom, I stopped taking the medication abruptly. I have since learnt that you should gradually reduce the dose but I stopped altogether which I believe caused a relapse. The decline in my mental health had a detrimental impact on my marriage, my life and my career choices, which I attribute to HCV. Depression is not hereditary in my family, and after having cleared the HCV virus, I have felt a lot better. However, to date, I still take Prozac as treatment but on a significantly reduced dose because it's a safety mechanism for me.

36. Alongside my mental state, my HCV infection has had an effect on my physical health. From the period in which I believe that I was infected with HCV, I have experienced persistent and extreme tiredness and lethargy, to the point that I could easily fall asleep anywhere at any time.

37. As previously stated in **Section 2** of my witness statement, from the point at which I believe I had contracted HCV, I have experienced a decline in my liver function. After having undergone a liver function test and a fibroscan of my liver following diagnosis, I was diagnosed with cirrhosis of the liver. Twice a year, I attend the Royal Staffordshire Hospital to undergo a liver scan when they also take bloods. I have subsequently been told that whilst I have cleared my HCV infection, my liver cirrhosis will continue to deteriorate overtime due to the damage it has sustained previously.

38. Alongside the above, I have a number of other medical complications which I believe are attributable to my HCV infection. After my diagnosis, I experienced issues with my throat. I had undergone a number of tests which included an endoscopy. I was told that I have developed oesophageal varices, which the doctor directly attributes to my HCV infection. This has limited the foods I can consume, and I get a lot of indigestion. My oesophageal varices is checked once a year and I take daily medication for it.

39. I have also experienced fluid retention all over my body which has been drained on two occasions. The first being when I was first diagnosed with HCV, and the second a year later. I currently take medication which prevents the fluid from building up. I continue to have a distended stomach caused by the HCV, which has a psychological impact as I have to choose the types of clothes I wear carefully.

40. For a woman, their appearance is a big thing. Whilst this may appear vain, my distended stomach has affected my self-confidence because up until I was sixty-years-old, I was a size ten. Now, everything I wear has to be baggy to cover my stomach. I would describe my appearance as looking as though I am nine months pregnant. The same goes for my finger and toe nails. I once had beautiful nails, which are now short and ridged and very brittle and it is really painful when they break. My toe nails actually fall off.

41. My infection also affected my taste buds. Prior to the HCV treatment I loved a cup of tea, now all I drink is a latte. I also suffer from overheating which is awful to manage.

42. I have also developed asthma over the last few years, as I have trouble breathing. Whilst I cannot say for sure that my HCV infection is the cause of the asthma, I have never had breathing issues before.

Treatment:

43. When I was diagnosed with HCV around 2014 or 2015, Dr Brind at the Royal Staffordshire Hospital had told me that HCV treatment clinical trials regularly took

place at the Queen Elizabeth Hospital in Birmingham. She referred me to a specialist doctor at the Queen Elizabeth Hospital who was fantastic and so helpful. I am unable to recall his name. After I told him about my diagnosis and the likely attributable cause, he said he would have to apply to National Health England (NHE) for funding to see if I qualified for treatment. There was about an 18 month gap between diagnosis and receiving treatment and I cleared the virus quickly once the treatment started.

44. Thereafter, I underwent a number of X-rays. I then began my first course of treatment with a drug, which I cannot recall the name taken orally. Once a month for approximately six months, I attended the Queen Elizabeth Hospital to collect my treatment which I had to sign for and to attend a check-up appointment monthly where they took bloods. The hospital is about an hour's journey from my home and I had to rely on my niece to take me there.

45. Each time I went for my check-up I was told that my viral load had reduced. After around six months, I was told that my viral load was undetectable and that I had cleared my HCV infection. After finishing my treatment at Birmingham Hospital, I was referred back to the care of Dr Brind at the Royal Staffordshire Hospital.

46. In terms of lasting side-effects of the medication and as mentioned earlier, after completing my course of treatment, I have lost my sense of taste which has limited the foods I can enjoy, including swapping tea for coffee.

Impact

47. My HCV infection has had an impact on both my private and family life. My daughter Maxine and I have a very close relationship which I believe is rare. She is very protective, and we have always lived together. I believe that whilst I worked a lot during her upbringing, my increased energy levels that I have now, having cleared the virus, mean that I am now a far better grandmother than I was a mother. I am constantly trying to make up for the past, which is why I now do everything with my granddaughter. Even Maxine commented that her childhood wasn't great but she understands why.

48. In addition, I have experienced stigma attached to my HCV diagnosis on a number of occasions both with colleagues at work and by medical professionals.

49. Firstly, from my experience and for the majority, the medical setting has had a preconceived view of what an HCV patient looks like, or, how they contracted the infection. There are a lot of assumptions made. I have lost count of the number of times I have been asked whether I drink alcohol. I thought that doctors and nurses would have been the last on the list to pre-judge an individual.

50. Secondly, after my HCV diagnosis, I told a really good friend who was also a colleague, that I had HCV. His response demonstrated how limited knowledge was available on how HCV can be contracted. When I told him he said "*I am sure that is a sexually transmitted thing?*" We also used to mess around and horseplay with each other at work, but after I told him about my diagnosis, he told me that he could catch it so the 'horseplay' stopped.

51. Thirdly, with regards to my HCV diagnosis, and thereafter, due to the effects it was having on my physical health, I was off sick from work a lot. As a result, I was referred to Occupational Health due to the number of sick absence certificates I submitted. After telling the health assessor about my HCV, he reported back to my employer and advised "*extreme caution*" going forward. I did not know what he meant by this. I felt that thereafter, I was treated differently in the workplace. I was later offered severance pay on medical grounds which I reluctantly decided to take. I enjoyed work and didn't want to give up.

52. I believe that my HCV infection has had an impact on my employment prospects. I loved my job as a security officer at Manchester Airport. I had already made plans to stay there after retirement age, but following my Occupational Health referral, as mentioned above, I was offered medical severance pay. I took this as I did not know what the future held. I believe that if it were not for my depression caused by HCV or the physical effects of HCV, I would have had a different career path, or had the opportunity to take promotion.

53. With regards to the Skipton and England Infected Blood Support Scheme (EIBSS) payments I sometimes feel guilty that I have taken the financial assistance payments, as I know that the NHS is so underfunded. However, I have suffered both mentally, physically, and financially, so the money has helped. It helped to clear my debts which I incurred as a single parent and having to give up work earlier than expected. However, that said I feel that contracting HCV caused a lot of my bad luck. Had it not been for the HCV I may still have been married to a very successful and clever man, who was my best friend which is very sad, my children would have had a very different life. I accept what I have and I am happy now but sometimes you think, 'What if?' When I received the recent interim payment, I made a donation to Macmillan Fund and I now know that my grandchildren are secure.

Section 6. Treatment/Care/Support

54. I believe that I have faced difficulties in obtaining treatment, care and support from a medical perspective. I believe that I should have been diagnosed at an earlier point in time. Prior to my HCV diagnosis, [GRO-D] turned me away when I sought medical help when I experienced a decline in my health. It was only when I persisted that I was able to get a blood test. Had [GRO-D] have taken [GRO-D] job seriously and investigated the cause of my persistent tiredness, it is plausible that I would not have experienced such a decline in my liver function. Had I not seen the locum GP I may never have had the further tests carried out.

55. At no point was I advised to notify my dentist about my HCV infection. Instead, I chose to inform my dentist off my own back due to the risks associated with potential contact with my blood during the course of dental treatment.

56. I have never been offered counselling or psychological support following my HCV diagnosis.

57. During the Covid-19 pandemic I was not included in the vulnerable category and I believe that I should have been. If I had caught covid it could have been a lot

worse because your liver is instrumental in fighting infection as everything goes through your liver. I was not advised to shield.

58. I am also surprised at the number of times I have been asked by medical professionals the date of my last period which I tell them was 47 years ago due to my hysterectomy. Clearly, they don't look at my history before seeing me and I would have thought that for someone in my situation they should check, especially regarding potential contraindications of medicine. I am not suggesting that I deserve special treatment but I feel that there should be an awareness due to my liver condition. It would be helpful if when you visit a doctor, you can be confident that they are aware of your condition.

Section 7. Financial Assistance

59. Early on, following my HCV diagnosis, I was told by Dr Brind at the Royal Staffordshire Hospital about the financial assistance which was being provided by the Skipton Fund, for people who had contracted HCV through blood or blood products. She said that I had most likely transmitted my infection through either of the blood transfusions I had received in 1974 or 1976 following childbirth and that I should make an application.

60. My daughter helped me fill in the application form for the Skipton Fund and I sent it via the post. Within a short period of time, I had received a refusal letter which stated that I had been refused on the grounds that I had received medical treatment abroad in Germany. I felt as though this was a '*get out of jail free card*,' as the BMH Hospital in Hanover was a British hospital. This view was supported by the doctor whose name I cannot recall, at the Birmingham Queen Elizabeth Hospital. He wrote on my behalf as he felt strongly that I qualified for assistance as my treatment in Germany fell under the British Army.

61. This happened within a few months of my refusal from the Skipton Fund, during an appointment with this doctor at the Queen Elizabeth Hospital when I told him about my previous refusal for financial assistance from the Skipton Fund. He had stated that he was a board member for the Skipton Fund and that he could not understand

why I had been refused. My husband was in the British Army, and I had received blood at a British hospital so I should have been granted financial assistance.

62. Following this, the doctor got in touch with the Skipton Fund on my behalf, and obtained a fresh application form so that I could appeal the decision of my first application. I was then asked by a member of staff at the Skipton Fund whether I had any medical records to prove that the cause of my HCV was the blood transfusion I had received as medical treatment. Also, if I did not have records, then I should obtain them from the army, or my local GP.

63. I contacted the army to access my medical records covering the period in which I received treatment in 1976, as it was a military hospital, I wasn't able to apply to the hospital direct. I found the whole process to be difficult and I was not able to obtain any of my records from the military.

64. I then applied to my local GP at GRO-D, for which I had to pay to gain access to my records, which I think was around £50. As mentioned earlier, I was not permitted to take them out of the building, but instead, I had to attend the surgery to look at them and request photocopies of any relevant pages. The practice manager was very helpful in assisting me with copying requests.

65. In all honesty, the whole process was enlightening. It was only at this point when I read through my medical records, that I found out that I had received blood transfusions on two separate occasions, both during childbirth. The first being in 1974 at the Royal Hampshire Hospital when I gave birth to my son David. The second transfusion was when I gave birth to my daughter, Maxine in 1976 at the BMH Hospital, Hanover.

66. I found the overall process of applying to the Skipton Fund difficult. The onus was on me to prove that I was infected with HCV and to prove the method of transmission. There was no information or help available. It was either 'yes' or 'no' as to whether you would receive financial assistance or not. However, the doctor at the Queen Elizabeth Hospital, who encouraged me to submit an appeal to the Skipton Fund was amazing. I was so lucky to have met him, because without him,

I would not receive the financial assistance I now have. It was down to luck that I saw him and that he was a board member and supported my appeal.

67. Soon after appealing Skipton's initial decision, I received a one-off payment of £50,000 from the Skipton Fund. I also received monthly payments and receive the winter fuel payments to date. There was no trouble at all in receiving the payments once the Birmingham Hospital doctor had advised me, and he had completed his part of the form and submitted a statement in support of my appeal.

68. In 2017, the monthly payments I received from the Skipton Fund had transferred to the England Infected Blood Support Scheme.

Section 8. Other Issues

69. With regards to the Infected Blood Inquiry ("IBI"), I would like them to ensure that someone is held accountable for the mistakes that have been made surrounding the Contaminated Blood Scandal ("CBS"). Ordinary everyday people have suffered due to the actions that decision-makers have taken in the past. People have died who should be here today and it is not right. If people such as Kenneth Clarke had come clean about everything, from the beginning, then an awful lot of money could have been saved within the NHS. I felt as though throughout the evidence which Kenneth Clarke gave at the Inquiry hearings, he was very arrogant and in total denial of the part he played in the blood scandal.

70. I have watched a number of the Inquiry hearings as my daughter receives regular updates. It is comforting to know that I was not an isolated case and that it affected thousands of people. I consider myself fortunate as I am still here to tell the tale and my story, but I cannot help think about my past and what a traumatic time I have been through.

71. I would also like the Inquiry to ensure that NHS general practitioners become more informed about blood borne infections, the methods in which HCV can be transmitted, for people who have contracted blood borne infections through no fault of their own. Through past experience, I have met with a lot of preconceived ideas

and a lack of knowledge of HCV and this has been mainly from the medical profession.

Statement of Truth

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

Signed GRO-C

Dated 3-3-2023