

ANONYMOUS

Witness Name: **GRO-B**

Statement No.: WITN2185001

Exhibits: WITN2185002-007

Dated: 25<sup>th</sup> August 2019

**INFECTED BLOOD INQUIRY**

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**EXHIBIT WITN2185003**

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GRO-B

Telephone

GRO-C

GRO-B

AFP/NS

22nd September, 1983

Dr. Charles Forbes  
 Director of the Regional Haemophilia Reference Centre  
 The University Department of Medicine  
 Royal Infirmary  
 10 Alexander Parade  
 Glasgow G31 2ER

Dear Dr. Forbes

Re: GRO-B

GP GRO-B

This boy was originally referred to Dr. GRO-B in January 1977 after he had been investigated by Dr. Davidson at the Royal Infirmary and found to be a haemophiliac with a Factor VIII level of 8%. These initial investigations followed a post dental extraction haemorrhage. His brother B was also diagnosed at the same time.

However GRO-B has been a fairly regular attender at the Unit despite his Factor VIII level of 8%. In 1976 he required therapy for a haemorrhage from his gums following an accidental loss of a tooth. In 1977 he was admitted with a haemarthrosis of the right shoulder and later in that year attended the Accident and Emergency Unit after being hit on the head with a rusty iron bar. The laceration required suturing and he was also given Cryoprecipitate at this time. In 1978 he developed a haematoma of his forehead following a bump on the head. In 1979 he required therapy for a haemarthrosis of his right first MP joint. In 1980 he again required therapy to arrest bleeding from a loose deciduous tooth. In 1981 he jammed his finger in a door and developed a subungual haematoma of his left middle finger. This took a long time to settle. Again in 1981 he had a haematoma of his left thigh. He attended the Unit very frequently in 1982 with a haemarthrosis of his left knee, a haematoma of the left thigh, a haematoma of his right thigh, a perinasal haematoma which developed after he accidentally bumped his nose and during that year he also developed intermittent swelling of his left knee. He was seen on several occasions when there was no evidence of haemarthrosis and our orthopaedic surgeon at that time thought that he was suffering from chondromalacia patellae. In 1983 to date GRO-B has required therapy for a haemarthrosis of his left knee and a haematoma of his right buttock. He was recently admitted to the Wards after a former school colleague punched him on his right lower jaw.

continued



1883

GRO-B

1983



22nd September, 1983

As you can imagine he developed a large swelling of the lower mandible and also some bruising of his buccal mucosa and bleeding from his gums.

GRO-B is actually a very pleasant studious young man who although is obviously accident prone prefers reading books to participating in sports etc. I am sure he will do well academically and I actually wonder now if perhaps he would be a candidate for home therapy.

GRO-B will be 16 GRO-B next year but he has a very dominant although anxious mother and is himself of a shy disposition and quite immature for his years. However he really is becoming too large for our beds and I would be very grateful if you could take over his management.

Thank you very much.  
Kind regards

Yours sincerely

GRO-B

Clinical Assistant in Haematology

*p.s. Hepatitis B -ve 15/9/83.*

c.c. File