

Witness Name: Debra Pollard  
Statement No.: WITN3094120  
Exhibits: WITN3094121-WITN3094126  
Dated: 2023-08-18

## **INFECTED BLOOD INQUIRY**

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### **WRITTEN STATEMENT OF DEBRA ANNE POLLARD**

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I provide this statement on behalf of The Royal Free London NHS Foundation Trust in response to the notification under Rule 13 of the Inquiry Rules 2006 dated 20 October 2022 and the request under Rule 9 of the Inquiry Rules 2006 dated 10 May 2023.

I, Debra Pollard, will say as follows: -

#### **Section 1: Introduction**

1. I am employed by the Royal Free London NHS Foundation Trust ("the Trust") as Lead Nurse Specialist within the Haemophilia and Thrombosis Centre ("the Centre"). I have been in this role since May 2014. Prior to that I worked for the Trust as a Clinical Nurse Specialist since February 1992. I have therefore worked at the Centre for 29 years. I retired from this full time role in October 2020 and returned part time in December 2020. My job title remains Lead Nurse Specialist.
2. As Lead Nurse Specialist, my responsibilities include leading and managing a team of specialist nurses and allied health professionals. I am also responsible, together with the Centre Director, for the strategic development and management of the department. In my role as Lead Nurse Specialist, I have been responsible on a number of occasions for answering questions from the Infected Blood Inquiry ("the Inquiry"). As a result I am aware of some of the issues surrounding the Inquiry and know how to investigate matters arising within our archives and systems.

3. I have been asked to write this witness statement on behalf of the Trust to respond to certain criticisms raised in the witness statement of W1699 dated 29 November 2019, in which he raises criticisms regarding the care he received by the Trust.
4. For the purpose of preparing this witness statement I have reviewed the records held by the Trust in relation to W1699 and provide this statement on the basis of those records. Where matters within this statement are not directly within my own knowledge, I believe them to be true.
5. I attach to this statement exhibits WITN3094121-WITN3094126. These are extracts from the Trust's records detailing various aspects of W1699's care which are relevant to his criticisms.

## **Section 2: Background Information**

6. W1699 was under the care of Dr Peter Kernoff in 1981 when he was treated for an ankle injury at the Royal Free Hospital. W1699 states at paragraph 5 of his statement that this was under the care of Professor Christine Lee, however she had not started working at the Centre at that time. A letter from Dr Kernoff to the Consultant Haematologist at Oldchurch Hospital dated 1 December 1981 summarised the treatment given and requested a series of blood samples (see **WITN3094121**). The correspondence confirms that it was the exposure to Kryobulin G in November 1981 that was thought to be the source of the Hepatitis infection. There is also correspondence in W1699's records between Dr Kernoff and 'Immuno Limited' about the course of treatment and subsequent follow up.

## **Section 3: Response to Criticism of W1699**

7. The Inquiry has requested that the Trust responds to the following comments made by W1699.
8. At paragraph 17 W1699 states:

*"Apparently the reason it took around 10 years between being diagnosed and told about my diagnosis is because everyone had assumed that someone else had told me about it. The doctors accepted that my Hepatitis C diagnosis was recorded in my notes but they all thought that someone else had told me about it. I believe that my*

*doctors deliberately delayed telling me my diagnosis. I recall seeing Christine Lee being interviewed on television years later and her admitting that she had been told not to tell people about their infections.”*

9. It is not correct that there was a 10 year delay from W1699's diagnosis to him being told about the HCV. The first positive HCV test was in February 1991. W1699 initiated an insurance claim in 1989 and the insurers wrote to the Centre requesting further information on 15<sup>th</sup> June 1989. The response from Dr Jackson on 20 June 1989 describes the context of W1699's abnormal liver function tests and the likelihood of non-A non-B hepatitis and its cause. On 31 March 1992 Dr Paul Telfer wrote to W1699 inviting him to participate in a drug trial for his hepatitis. This was one year after his first positive test (see **WITN3094124**). There is reference to HCV being discussed by Dr Goldman at a routine review on 07/02/1995. She referred him to the joint Haemophilia/Hepatology clinic "Liver clinic" and he was seen by Professor Geoff Dusheiko on 21/03/1995 (see **WITN3094125**).

10. At paragraph 18 W1699 states:

*"I can also recall at least 3 occasions when I attended the Royal Free and found that my notes (which used to be given to me for appointments) were getting smaller and smaller. When I questioned this staff admitted that some of my medical notes had been lost."*

11. On review of W1699's records, it appears the notes that have been scanned are incomplete given the absence of clinic notes and letters referenced by Professor Lee. As far as the Trust is aware, this issue has not been formally raised by W1699.

12. At paragraph 19 W1699 states:

*"I am disgusted that it took them so many years to tell me about my diagnosis, as if I had been told the information that doctors knew about me I could have taken steps to look after myself. At this stage I was drinking heavily as I was in a band, and had I been made aware of my disease and what it was going to me body I would have been able to drink less and look after my liver."*

13. On review of W1699's records, the Trust believes that W1699 was aware that he had been monitored frequently for non-A non-B hepatitis in the early 1980s, as he recalls attending his local hospital for blood tests. W1699 states he was told not to drink alcohol for 6 months in the early 1980's – this suggests that at least some conversations about alcohol consumption in relation to his health had taken place. There are references in his clinic visits to how much alcohol was being consumed see 07/02/1995 "Review" by Dr Eleanor Goldman (EG), where she states he has "cut down considerably on his alcohol intake" (see **WITN3094125**).

### **Section 3: Other Issues**

14. At paragraph 7 W1699 states:

*"I not given any warnings about the risks involved with using blood products. When I was moved onto Factor VIII I was told that it was a cleaner, more efficient treatment that was better than cryoprecipitate because it could be used in smaller quantities."* \_

15. There is no record of any conversations about risks associated with Factor VIII concentrate in comparison to Cryoprecipitate at the time of W1699's first exposure in 1981. However, it should be noted that in 1981, although there was some evidence that some blood products may cause non-A non-B Hepatitis, the Hepatitis C virus was not identified at that point and the natural history of the virus and the long term consequences were not well understood.

16. At paragraph 8 W1699 states:

*"I remember Deborah, a then nurse at the Royal Free, visiting me at home in the early 1980s and telling me that I may have Non-A, Non-B Hepatitis and that I would need to attend my local hospital every 2 weeks for blood tests. She told me that it was nothing to worry about and definitely did not tell me it could be dangerous. This was the first time that I had ever been visited at home to have blood taken."*

17. On review of W1699's records, a letter from Dr Kernoff to the Consultant Haematologist at Oldchurch Hospital dated 10 February 1982 mentions a Sister Denise Blake, who was the co-ordinator for the North East Thames Region. I assume this may be the nurse who visited W1699, as there is no record of a nurse called Deborah visiting W1699. There are no records of the visit to W1699 and I am

unable to comment on undocumented conversations, however as previously stated, it is believed that at that time, non-A non-B Hepatitis was not well understood and the long-term consequences of the infection were not known.

18. At paragraph 12 W1699 states:

*“Having seen Professor Lee’s letter dated 23 February 1999 it appears that the blood tests taken at Oldchurch Hospital were used for her research paper into non A non B hepatitis.”*

19. Professor Lee’s publication about non-A non-B Hepatitis involved looking at standard blood test results. It was a retrospective study of results from routine clinical monitoring tests which would not have required specific consent at that time.

20. At paragraph 13 W1699 states:

*“I got home one evening after playing a gig and there was a huge swelling in my groin. I went to hospital and was taken straight through to surgery. When I woke up, my bed was surrounded by doctors, social workers and a psychiatrist, who questioned why I was drinking alcohol when I had been diagnosed with Hepatitis C. I believe this was in January 1991.”*

21. On review of W1699’s records, it seems that the first positive test for Hepatitis C was 13 February 1991. This test was requested at an Annual review by Dr Laffan. The letter from Dr Laffan to Dr Ivinson dated 13 February 1991 (see **WITN3094122**) states that W1699 had not been tested before and suggests a discussion about the test. The timing of this test at an Annual Review appears to be in line with what was common practice as the first test for Hepatitis C became available in 1990.

22. At paragraph 14 W1699 states:

*“This [January 1991] was the first time since 1980 that I had heard anything about Hepatitis, which made me extremely angry. Other than questioning why I was drinking and telling me it wouldn’t be cured with antibiotics, they gave me absolutely no information regarding the disease, why I had it and no warning as to the risk or routes of transmission.”*

23. As stated previously, the Hepatitis C virus was not identified until 1989. The first tests became available in 1990. Although there may have been abnormal liver function tests prior to this with the assumption of non-A non-B hepatitis, there were no tests available other than liver function. W1699 was seen annually as can be seen on 9 February 1988, 15 February 1989 and 15 February 1990, so the timing of the test on 13 February 1991 appears to be part of W1699's annual review. In the handwritten notes of the annual review on 9 February 1988, there is reference to W1699 and his fiancée talking about "disease, infections and genetics" (see **WITN3094123**). Mrs Riva Miller (Centre Counsellor) notes on the same day that she saw W1699 with his fiancée that AIDS risk and transmission was discussed. W1699 was then reviewed by Dr Peter Kernoff on 15 February 1990 when he noted "Increased AST persists". This is one of the liver function tests that were, and still are routinely used (see **WITN3094123**).

24. At paragraph 15 W1699 states:

*"A few days after leaving the Royal Free I called them to ask some questions about the disease. I was then told it was 'highly unlikely but possible' that Hepatitis C could be spread through sexual intercourse, and that there was a chance the disease could turn into HIV, although I was one of the 'lucky ones' as I didn't yet have it."*

25. In response to W1699, I confirm that this appears to be the standard advice that was given at that time. Patients were counselled as to the risk of sexual transmission of Hepatitis C which was believed, but not yet proven, to be minimal. However, it is not correct that there was a chance the disease could turn into HIV. HIV is a different virus to Hepatitis C and the latter cannot "turn into" the former.

26. At paragraph 22 W1699 states:

*"When I attended the Royal Free for my annual reviews blood was always taken for "tests". I was never told what I was being tested for. I was not aware that I was being tested for HIV or Non A Non B Hepatitis/Hepatitis C prior to 1991."*

27. In response to W1699 I would reiterate that there was never a test for non-A non-B Hepatitis. Blood tests were used to monitor liver function, and these tests were routine in clinical care and did not require formal consent.

28. At paragraph 43 W1699 states:

*"I do not recall being offered any counselling either at the time of my diagnosis or during my various treatments."*

29. There is considerable evidence to demonstrate that W1699 was seen regularly by Mrs Riva Miller, the Centre Counsellor, regularly, at least from 1986, about a number of issues, which included how he was coping with the side effects of his treatment, including at W1699's own request on 13 April 1995 (see **WITN3094126**).

### **Statement of Truth**

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

Signed 

GRO-C

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Dated \_18<sup>th</sup> August 2023\_\_\_\_\_

### **Table of exhibits:**

Notes/ Description	Exhibit number
Medical records relating to blood samples and liver functioning of W1699	WITN3094121
Medical records relating to annual haemophilia review of W1699	WITN3094122
Medical records relating to annual haemophilia review of W1699	WITN3094123
Medical correspondence relating to	WITN3094124

liver the liver functioning of W1699	
Medical records of W1699	WITN3094125
Medical records relating to annual haemophilia review of W1699	WITN3094126