Witness Name: Jane Elizabeth Hodge
Statement No: WITN4945001
Exhibits: WITN4945002 - WITN4945004
Dated: 03 November 2021

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF JANE ELIZABETH HODGE

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 24 August 2021.

I, Jane Elizabeth Hodge, will say as follows: -

Section 1. Introduction

1. My name is Jane Elizabeth Hodge. My date of birth is GRO-C 1960. I reside at GRO-C Cornwall, GRO-C. I married my first husband in 1978, when I was eighteen years old. We had one child together. I then married my second husband Terry Hodge in 1989. We have three children together and three grandchildren.

2. I intend to speak about my infection with Hepatitis C ("HCV") after receiving numerous blood transfusions in 1979 as treatment for an operation to remove half of my femur, my knee, and the top of my tibia on my left leg. In particular,

I wish to discuss the nature of how I had learnt about my infection, how my illness had affected me and our family thereafter, and the financial assistance I have received.

3. I can confirm that I have chosen not to have legal representation and that the Inquiry Investigator has explained the anonymity process to me. I do not wish to be anonymous as I wish for my story to be known in full.

4. The Inquiry Investigator has explained to me 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.

6. I have constructed my witness statement with access to some of my medical records. Around 2014, I had made enquiries regarding access to my medical records, where initially, I was told that my medical records had been destroyed. It was later discovered that my medical records had been transferred to Microfiche, of which I refer to the relevant documents exhibited at **WITN4945002**.

7. I have drafted my witness statement with the assistance of my husband Terry who has been present throughout the interview process.

Section 2. How Infected

8. Growing up, I was raised in GRO-C in Sussex with my parents and my older brother, and I attended a private school. When I was aged around ten years old, my parents separated and divorced.

9. As a child and a teenager I was reasonably bright, but I also had a wild side and I loved to travel. I have always tried to live my life to the fullest. After finishing school, I had planned to go travelling all over the world.

10. I married my first husband when I was aged eighteen years old and we decided we were would travel to India. Not long before we left I began to experience pain in my left leg. Throughout my childhood, I was in hospital once a year for something or other as I have always had spells with regards to my heath on and off. Therefore, this was not out of the norm for me.

11. I sought medical assistance from my local GP when I lived in the West Midlands. After an examination was carried out, I was told that I needed to exercise more and the pain would go away.

12. However, the pain persisted and I took myself off to Stourside Hospital in Stourbridge, this was on 28th February 1979. I had undergone an x-ray examination on my left leg. When the results had returned, I was told that they had found a cyst in my left knee joint. Suddenly, I found that they wanted to carry out an x-ray on the whole of my body. They operated and I woke up with a full leg cast. I was then informed that I had osteosarcoma in my leg. My ex mother in law informed me of this news.

13. The following day I was referred to The Royal Orthopaedic Hospital NHS Foundation Trust ("Woodlands"), Bristol Road, Northfield, Birmingham, B31 2AP. I was told that I would need to undergo surgery on my leg, and chemotherapy. Due to my positive outlook on life my immediate reaction was "*oh well, let's just get on with it and get on with life*." However, it was not until a later point in time where I was told that during this period, the medical profession had given me five years to live. Looking back I'm not sure I realised the potential implications. I was still a teenager and had the mind of a teenager and thought I would just recover. The ignorance of youth is the cliché that springs to mind.

14. In 1979, at the age of eighteen years old, I had my first operation on my leg at the Woodlands, whereby they removed half of my femur, the top of my tibia and the knee on my left leg. I was provided with a partial femoral prosthesis, which offered an alternative to amputation.

15. This operation required a number of blood transfusions as treatment for blood lost. This fact is outlined with documentation contained within my medical records, exhibited at **WITN4945002.**

16. When I was provided with the aforementioned blood transfusions, whilst I knew that undergoing such a large operation my leg may require treatment of blood, I do not recall anyone telling me about the risks associated with a blood transfusion.

17. Thereafter, I had undergone a year of chemotherapy to eradicate my bone cancer. This was successful.

18. After completing my course of chemotherapy, I carried on with my life. I decided to travel to India as I had originally planned. Throughout my travel, I visited local hospitals where I would undergo an x-ray. The results of these x-rays would be sent back to the Woodlands for the purposes of observation and study by the relevant medical personnel.

19. As a result of my course of chemotherapy, I did not know whether I could have children. However, once I returned from India, I had my first child in 1981, who sadly died as a result of sudden infant death syndrome (more commonly referred to as "cot death").

20. In 1982, I gave birth to my daughter, who now lives in Australia.

21. Around 1983, I separated from my first husband, and moved to the United States of America ("USA") where my mother was living. I then moved from the USA to Gibraltar, where I lived with my ex-husband and his then girlfriend. It was here that I met my current husband Terry.

22. In 1992, as a result of the condition of my knee deteriorating, Terry and I made the decision to move back to the United Kingdom ("UK").

23. Soon after returning to the UK, I attended a face to face consultation at the Woodlands, where I was told that my femoral prosthetic was loose and that they would need to carry out a surgical procedure to extend the prosthetic.

24. Despite my faith in the National Health Service ("NHS"), in 1995, around twenty years after my first operation on my leg, it all went horribly wrong. I had undergone surgery at the Woodland's to correct my femoral prosthetic, when the surgeon had wrongly over used the cement by a considerable amount. The surgeon had also drilled outwards rather than in a downwards direction, which meant that I had cement leaking into the muscles of my leg. This had caused the pain I was experiencing to intensify.

25. After I was discharged from the Woodland's following surgery, I recall one of my children telling me that my leg clicked as I walked. This prompted me to seek medical assistance surrounding my prosthetic.

26. Thereafter, I attended a face to face consultation at the Derriford Hospital ("Derriford"), Derriford Road, Plymouth, PL6 8DH. I was told that I had a spiral bone fracture in my leg, which occurs when a long bone is broken by a twisting force. I distinctly recall the Consultant stating something along the lines of "*frankly my dear, it is a bloody mess*."

27. After hearing this information at the Derriford, I did not want to wait to be referred to the Woodlands, so I decided to seek medical assistance from the Woodlands myself. I had immediately undergone an x-ray on my leg.

28. At a face to face consultation with a Consultant at the Woodlands I was told the results of my x-ray had returned. They had told me that they were very sorry that something had gone wrong with my operation, but, that they would redo it. I had asked them whether they had seen something on the x-ray,

which would have otherwise indicated to them that something was wrong. They must have known something was wrong but chose not to tell me.

29. Thereafter, I had undergone a further three operations to correct my prosthetic, whereby they used different prosthetics. All three operations were unsuccessful.

30. Eventually, I had undergone a further operation to correct my prosthetic where they used a prosthetic referred to as a "rhino horn." This had been placed too far into the femoral ball joint, so it was poking through and scraping away at my pelvis causing me further pain.

31. After undergoing numerous failed operations, I had realised that I could not go back to the Woodlands. Instead, I was referred to The Royal National Orthopaedic Hospital ("Stanmore"), Brockley Hill, Stanmore, HA7 4LP.

32. Within a short period after I had been referred to Stanmore, I had undergone an operation whereby I was given a completely whole new prosthetic. I was initially nervous to undergo surgery as I did not want my leg to be cut open to replace the prosthetic. Luckily, the surgeon was able to replace my prosthetic without cutting my leg open. This surgery was a success.

33. Thereafter, I have lived on pain medication for all of my life.

34. In or around January 2013, I had undergone a number of blood tests for a medical issue unrelated to my leg at the Bideford Community Hospital ("Bideford"), Abbotsham Road, Bideford, EX39 3AG. When the results of the blood tests had returned, I was asked to attend a face to face consultation with one of the nurses at the Bideford to discuss my results.

35. Terry and I attended the face to face consultation at the Bideford, where I was told that I had tested positive for the presence of HCV. Upon hearing this information, Terry and I were baffled. We looked at each other as if to say "*what has happened here*?" My immediate response was to ask the nurse

where I could have contracted my infection, to which had she asked whether I had an operation in the 1970's or 1980's where I had been given blood. In response, I had told the nurse that I had in fact undergone multiple surgeries. She had confirmed that this was the most likely cause of my HCV infection as it could be passed through blood.

36. I have since been told that I have HCV genotype 3a.

37. When I was diagnosed with HCV, I was provided with adequate information which would have allowed me to understand and manage my infection. I had asked the nurse at the Bideford whether there was a risk that I could have passed my infection on to my husband or my children. I was told that this was possible, so they should undergo testing to determine whether they had contracted HCV.

38. GRO-C GRO-C It was a tough telephone call to make to my daughter who lives in Australia, where I had told her about my diagnosis and that she would need to go and have a blood test. It is terrifying that I could have put my children and husband at risk through no fault of my own.

39. Terry and I were given pamphlets which contained a lot of relevant information surrounding HCV, and it listed the most common symptoms of the infection. When we had gone through the list of symptoms, we went line by line almost ticking it off as we went along. We would say to each other "*yes, you have that. You have that, and that.*"

40. Thereafter, I was referred to the Hepatology Department at the Royal Devon and Exeter Hospital ("Exeter"), Barrack Road, Exeter, EX2 5DW, under the care of Dr Ulrich Thalheimer MD PhD.

41. I believe that the most likely cause of my HCV infection is that of the blood transfusions I had received in 1979 as treatment for an operation on my leg at the Woodlands.

42. I do not believe that there are any other causes of infection. Whilst I do have my ears pierced and I have one tattoo, they were both conducted in a clinical setting with the appropriate equipment.

Section 3. Other Infections.

43. Other than HCV, I do not believe that I have contracted any other infections as a result of receiving a contaminated blood transfusion in 1979 at the Woodlands.

44. In addition to HCV, I have been tested for the presence of HIV. When the results had returned, it had shown that I had tested negative for the presence of HIV.

Section 4. Consent

45. I do not believe that I have been tested or treated without my prior consent having been obtained, without my knowledge, adequate and full information, or for the purposes of research.

46. Whilst I do not recall providing consent for the blood transfusions I had received in 1979 at the Woodlands, I believe that this would have been administered during a surgical operation in theatre where it was necessary. I believe that the medical profession did what was essential in the circumstances, for the benefit of my health.

Section 5. Impact.

Mental/Physical Impact

47. From the point at which I believe that I contracted HCV in 1979 my mental and physical health has been affected. There had been a lot of niggling things going on with regards my general health.

48. Between 1979 and 1992, I was functioning. However, when we moved back to the UK around 1992 or 1993, there was a visible dip in my health. It was a difficult period for us all. I was feeling very fatigued, lethargic, and my energy levels had completely gone. Figuratively speaking I was not there, and I was absent from my family life.

49. Between the continuing issues with my general health, with me being a new mum, and my HCV diagnosis, it is difficult to determine the true cause of the symptoms I was exhibiting. We cannot therefore say what effect my HCV infection was having at an early age, as I had so much going on. However, it is fair to assume that my HCV was attributable.

50. In May 2013, I had undergone two liver biopsies at Exeter. When I had undergone the procedure, I was given a local anaesthetic so I was unable to feel anything. I watched the procedure being carried out on a screen. When the first biopsy had been completed, I was asked whether I would mind if they carried out a second liver biopsy whilst I was still numb. I consented to this further biopsy.

51. When the result of the liver biopsies had returned, it had shown inflammation 2- 4/18, and fibrosis 1-1/6. I was told that whilst my liver was not in a terrible state and that I did not have cirrhosis, I did however have scarring of the liver.

52. On 14 July 2017, I had undergone a Fibroscan at Exeter, whereby I had scored 5.3 kPa (0.6 IQR) relating to F0 – F11 fibrosis.

53. With regards to the condition of my leg, I have had eight major operations to date. I am at the best I have ever been, and they cannot do anything else mechanically, without amputating my leg.

54. Alongside a decline in my physical health, for many years, I had been suffering with brain fog and issues with my memory. I experienced a lack of mental clarity, an inability to focus, confusion, and an inability to retain information.

55. At one point, I was concerned that I was in the early stages of dementia. Sometimes, Terry would go downstairs in our home in the morning, and find a cup of tea on the kitchen side without the mug. Instead, there would be milk, water, a tea bag.

56. On one occasion, Terry was very worried about me and took me to the A&E in Barnstaple. I was unable to count or recall everyday things when I was asked, and I believed that Terry was my father. I had undergone a brain scan as a result, and when the result had returned, I was told that the cause of my ill-health was undetermined.

57. Four years later, I had attended the Bideford for a further medical appointment. During conversation, it was mentioned that the results of a brain scan had indicated that I had suffered a mini-stroke four years prior. I was unaware of this information. This would have otherwise explained the cause of the decline in my cognitive ability around this period.

58. Alongside cognitive issues, I have been diagnosed with clinical depression. This was a difficult period as I was no longer the very positive and happy person I had once been. My personality had completely changed.

59. From the point at which I had undergone my first operation in 1979, I have administered large amounts of painkillers as a coping mechanism for the pain I experience as a result of my leg. This includes Morphine, Fentanyl, Oxycodone and OxyNorm. I have since been told that persistent use of strong

painkillers can actually cause or exacerbate the symptoms I have experienced thus far. Therefore, it is difficult to distinguish whether the majority of the aforementioned physical and mental symptoms I have experienced is attributable to the medication, or, my HCV infection.

60. Around the point at which I had started treatment to clear my HCV, Terry had become concerned that the amount of opioids I was administering was having an adverse effect on my body. On one occasion, Terry had found me unconscious and not breathing where I was slumped in a chair in front of the fire.

61. As a result, I sought medical assistance surrounding the levels of painkillers I was prescribed and the adverse effects it had on my body. The medication I am prescribed to date have been changed. I am now on a lower dosage, whereby I take 250mg of Tapentadol, and 50mg of Amitriptyline at night. I am also on statins.

Treatment

62. In March 2018, at a face to face consultation with Dr Ulrich Thalheimer the Hepatology Consultant at Exeter, I was offered a course of treatment to clear my HCV infection. However, as there was not much wrong with my liver and as I had genotype 3a, I was only offered Interferon. I refused. I had previously gone through a year of chemotherapy and I did not want to go through treatment which could potentially have vast adverse-affects.

63. Dr Thalheimer then proceeded to state that for some reason, the Government was throwing money at HCV treatment, so there were a lot of treatments being developed. I decided to hang on until a suitable treatment was available.

64. My treatment was delayed until November 2018.

65. On Tuesday 28 November 2018, I commenced a 12-week course of Sofosbuvir and Velpatasvir (more commonly referred to as "Epclusa"). Initially, they were concerned with the mixing of my treatment with my current prescriptions. This was resolved.

66. As Terry and I lived quite a long distance from Exeter, and as I was already used to administering regular medication, I was given the full twelve weeks treatment to take home in one go.

67. For a period of twelve weeks, I administered one or two tablets daily in oral form. I visited the Exeter at monthly intervals for a face to face consultations, where they monitored my treatment.

68. I cannot say that I had experienced any side effects associated with my HCV treatment. Throughout my treatment, I was taking painkiller medication for my leg, so it is possible that this could have masked any potential side effects I may have otherwise experienced.

69. Around early 2019, I finished my twelve-week course of treatment. Thereafter, I attended the Exeter where I had undergone a blood test to determine whether my treatment had an effect on the levels of HCV in my blood. When the result had returned, I was told that my HCV was now undetectable.

70. After completing my HCV treatment, I attended Exeter for a follow-up appointment at three, six, and twelve months post-treatment. Thereafter, I am monitored once a year. However, due to the effects of Coronavirus on the health system, I have been unable to attend for the last two years. I am due a check-up.

71. As soon as I had finished my HCV treatment, within weeks, I had seen a marked improvement in my cognitive ability, energy levels, and general health. I now have my memory back. On hindsight, my brain is now a lot more in tune. This evidences the fact that my HCV was most likely attributable to the deterioration in my mental and physical health.

Impact

72. I believe that my HCV infection has impacted on my children and my husband, due to the deterioration in my mental and physical health, I was no longer present and could not engage with my family. I was unable to go out and play with my children, I was unable to do day to day things, and I missed out on so many years with my children.

73. Looking back on this period, we had a standing joke that when the children wanted to do anything, it would always be "*I will come next time*," or, "*dad will go with you*." This was a very dark period. I will never get those years of my life back, which were such crucial years when my children were growing up.

74. When my daughter was younger, I recall her asking a question whereby she had stated something along the lines of "*when I grow up and have a bad leg...*" In response, we told her that not everyone grows up and has a bad leg, but this outlook on life demonstrates just how much of an impact my medical issues had impacted on my children and our family life. They accepted that mum was ill and was always in and out of hospital. They grew up with this and it was our normal.

75. GRO-C GRO-C I have since experienced a loss in libido which is a large part of married life.

76. I do not believe that either Terry or I have experienced any issues with regards to the stigma attached to HCV.

77. I do believe that my HCV infection has had a financial effect on my family, notwithstanding the time lost due to recovering from numerous operations on my leg. It affected my ability to go to work, as I did not have the motivation to do anything, let alone have a career or a job. I believe that I was infected with HCV at the age of eighteen years old, which was at a very crucial point in my

life. For a person who was privately educated, it was not unreasonable that I would have had a career where I may have become a solicitor or a doctor and earned a good income.

78. As a result of my brain fog and cognitive ability, I was unable to take charge of the family finances. Terry took on this responsibility. When I had cleared my HCV and my brain fog had disappeared, I was able to take control of our finances. I now have my own bank account.

79. I also receive PIP, Terry is my registered carer.

Section 6. Treatment/Care/Support

80. **NOT RELEVANT**

81. After my HCV diagnosis, I have always self-disclosed my HCV to either medical or dental professionals whenever I undergo medical treatment. I have not experienced any adverse reactions from dental or medical persons as a result of the provision of this information.

82. The only time when 'red flags' have come up in the medical profession with regards to my HCV, was when I had an endometrial ablation to remove the lining of my womb. I had given the medical professional paper work that I had

been given which had shown that my HCV was undetectable, so that they were aware.

83. I cannot say that my HCV has had an impact on the dental care I have received. Due to effects of the chemotherapy I had undergone to eradicate my bone cancer, I now have false teeth. Therefore, dental care is not an issue.

84. As far as I am aware, I do not believe that I have been offered counselling or psychological support as a result of my HCV diagnosis. I have undergone pain management and cognitive behavioural therapy ("CBT"), where I talk with other people about my pain, but this is not associated with my HCV diagnosis.

Section 7. Financial Assistance

85. When I was referred to Exeter following my HCV diagnosis, one of the hepatology nurses had told me that the Skipton Fund were providing financial assistance for persons who had been infected with HCV as a result of being given infected blood.

86. On 14 May 2014, I applied to the Skipton Fund. My application was filled out by myself, and it was endorsed by Dr Pritchard.

87. I am aware that my General Practitioner ("GP") had provided a letter in support of my application to the Skipton Fund. This letter dated 14 May 2014, from Dr K Pritchard, The Square, Bradworthy Surgery, Holsworthy, Devon, confirms that I had received blood transfusions in 1979 as a result of an operation at the Woodlands and that they did not have any records to confirm this. The letter also states that I had likely been infected with HCV as a result of the aforementioned blood transfusions.

88. Despite the supporting letter from my GP, a month later, on 09 June 2014, I received a letter, dated 09 June 2014, from Nicholas Fish, Scheme

Administrator, to Mrs Jane Hodge. The letter stated that they had declined my application to the Skipton Fund. The letter states as follows:

> ***"Re: Skipton Fund Application (Ref.*** GRO-C
>
> *We have received your completed application form from your doctor and it is with regret that I must advise you that your application has been declined. This is due to the lack of supporting medical records confirming that you were treated with NHS blood or blood products prior to September 1991 and that this was therefore the most likely source of your infection with the hepatitis C virus.*
>
> *Of course, if you do obtain further information which suggest that you did undergo such treatment then please return the form back to us along with a copy of this documentation. Please note any amendments to the form will need to be signed, dated and stamped by the completing doctor.*
>
> *If you disagree with the outcome of your application you may apply to the independent appeal panel which is chaired by an experienced lawyer and contains a haematologist, and hepatologist, and a general practitioner and a lay person. I enclose a copy of the appeal panel's guidance notes to help you decided if you would like your case to go to appeal or not."*

89. When I received the aforementioned letter from the Skipton Fund, due to my positive outlook, I thought "*oh well, that is that then*." However, Terry did not adopt the same outlook as myself. He did not believe that they did not have my medical records to exhibit the fact that I had been given numerous blood transfusions in 1979.

90. As a result of the Skipton Fund declining my application, Terry and I contacted the Patient Advice and Liaison Service ("PALS") Department at the Woodlands to request access to my medical records.

91. I received a letter, dated 23 May 2014, from Rosemary Bloor, Royal Orthopaedic Hospital NHS Foundation Trust, to Mrs Jane Hodge, GRO-C GRO-C Cornwall (exhibited at **WITN4945003**), which outlined that they were unable to find my medical records. I believe there is a typo in this letter which refers to a letter dated 07 May 2013. I believe that this error should otherwise read 2014. The letter states as follows:

> *"We refer to your letter dated 07.05.13 regarding your medical notes back to 1979.*
>
> *Unfortunately, we keep patient notes for 12 years and in some circumstances certain records still exist on micro fiche archive. With regret we have not been able to locate any medical records data."*

92. We did not accept this and from memory Terry followed this up.

93. I then received a letter, dated 04 August 2014, from Claire Williams, Patient Relations Manager, The Royal Orthopaedic Hospital NHS Foundation Trust, to Mrs Jane Hodge, GRO-C Cornwall (exhibit below, at **WITN4945004**), which states that my medical records had been found on microfiche. The letter states as follows:

> *"Thank you for contacting the PALS department asking for any copies of your hospital records that shows any blood you have received so you may apply to the Skipton Fund.*
>
> *Due to the length of time it has been since you were last a patient at the Trust, we do not have a hard copy of your medical notes anymore. The Trust does not keep hard copies of records after a certain period of time; they are transferred to micro film.*
>
> *After looking at your documents on micro film, we have found the attached documents which we feel may help you. However, I apologise*

> *that the quality of the records are fairly poor, this is due to them being transferred from paper to micro film and being re-printed.*
>
> *I hope this is the information you were looking for and I hope that you are now able to apply to the Skipton Fund with this"*

94. As a result of the medical records contained on the microfiche, I was able to identify that I had received numerous blood transfusions, at least 14 units in 1979. The relevant entries in my records are exhibited at **WITN4945002.** In particular, contained within is a document entitled "*Selly Oak Hospital, Blood Cross Match Record*." This document outlines that blood was issued on 07 March 1979 and it was required on 08 March 1979.

95. On 6th August 2014 after receiving the aforementioned medical notes I wrote to the Skipton Fund and enclosed the supporting evidence for my application for financial assistance.

96. In September 2014, my application for financial assistance from the Skipton Fund was granted. In October 2014, I received an initial Stage One lump sum ex-gratia payment of £20,000. I cannot remember the exact monthly figure I received.

97. Then more recently, 6th August 2021, I received a further lump sum payment of £31,342.

98. I now receive a monthly payment of £2,390 from the Skipton Fund.

Section 8. Other Issues

99. For a number of years, Terry had been a blood donor for a local blood donation centre based in the UK. However, after a short period of time whereby he had ceased donating blood, he decided to donate blood again. He was told that they could not take his blood as he had undergone surgery in the past. Jane came with me and we wonder whether in fact this decision was

attributable to his marriage to me and the associated risks my HCV presented.

100. Not long after the commencement of the Infected Blood Inquiry ("IBI"), I received a letter in the post from the IBI regarding 'Consultation on the Terms of Reference' the letter was dated March 2018. From memory I wrote back and that I was happy to help in anyway. The next thing was you contacted me back in August 2021.

101. Terry and I would like the IBI to establish an answer for a number of questions we have surrounding my HCV diagnosis, and the financial compensation provided to persons infected with HCV.

102. Firstly, when a mistake has been made and you put that individual's life and everyone else around them at risk, and you do not tell those persons as soon as possible, this is negligent. When the relevant persons or organisations had discovered that the blood provided to patients as treatment under the NHS was potentially contaminated, why did they not contact those individuals as soon as possible to tell them of the possible risk? It was only as a result of a routine blood test due to an unassociated medical issue that it had been uncovered that I had contracted HCV. How was this allowed to happen?

103. It could be argued that it is better for the authorities not to contact people who could be infected as those that die before they are identified will receive no compensation.

104. Secondly, why are payments of financial compensation not backdated to the time of the infection? I was infected for nearly 40 years. I can never get back those lost years.

105. When I was diagnosed with osteosarcoma in 1979, I have since found out that the medical profession had given me five years to live at that point. How wrong they were. I am now sixty years old, with a loving husband, children and grandchildren.

Statement of Truth

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

Signed GRO-C

Dated 3 Nov 2021

Table of Exhibits:

Date	**Notes/ Description**	**Exhibit number**
Undated	Medical Records of Jane Hodge.	**WITN4945002**
23 May 2014	Letter from Rosemary Bloor, The Royal Orthopaedic Hospital NHS Foundation Trust, to Mrs Jane Hodge, GRO-C Cornwall.	**WITN4945003**
04 August 2014	Letter, from Claire Williams, Patient Relations Manager, The Royal Orthopaedic Hospital NHS Foundation Trust, to Mrs Jane Hodge, GRO-C GRO-C Cornwall.	**WITN4945004**