

Witness Name: Kathleen Stewart

Statement No.: WITN1002001

Exhibits: WITN1002002 – 046

Dated: 27 September 2019

**INFECTED BLOOD INQUIRY**

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**EXHIBIT WITN1002021**

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**HISTORY SHEET**

Hospital No.  
Surname  
First Names  
D. of B.

213147  
**STEWART (Snr)**  
**Angus**  
GRO-C 38

M/F  
M/S/W

**Liver Clinic**

DATE

CLINICAL NOTES (Each entry must be signed)

16.12.96

**Special Combined Clinic – 16<sup>th</sup> December 1996**

**Consultants: Dr David Patch - Consultant Hepatologist**

**Professor Christine Lee - Consultant Haematologist**

Mr Angus Stewart's alcohol intake is rather heavy and he is experiencing hepatic pain usually after binge of alcohol on Sundays. He is grossly obese weighing over 140 kg. His liver function tests are deranged with AST 104u/l; ALT 75u/l; and GGT 133u/l. Surprisingly, he has striking hypergammaglobulinaemia with IGG level of up to 35gm/l (normal range: 8-18). Thus his liver disease appears to be multifactorial due to chronic hepatitis C, excessive alcohol consumption and steato-hepatitis against a background of gross obesity. In view of very high IGG levels, it is possible that there may be an auto-immune component. His auto-antibody status has been checked as well as HCV genotyping and quantitation. CT scan of the liver has been arranged to assess hepatic fatty infiltration. With regard to chronic hepatitis C, unfortunately, we are unable to recommend combination therapy due to presence of ischaemic heart disease.

Mr Stewart has been strongly advised to reduce alcohol intake and to reduce weight. We will review him again in two months.

3.1.97

**Examination:** CT Abdomen  
CT Liver with Contrast

**Date of Exam:** 3<sup>rd</sup> January 1997

**Procedure:** CT axial scans were performed through the liver, pre- and post- intravenous contrast.

**Findings:** The liver is of slightly decreased attenuation suggestive of a degree of fatty infiltration. No evidence of intra- or extra- hepatic biliary dilatation. The pancreas is slightly atrophic but no focal abnormality is seen. There is mild splenomegaly with the spleen measuring 14cm in its maximum longitudinal diameter. There is no evidence of ascites or varices. Two small cysts are noted on the right kidney.

**Conclusion:** Suggestion of some degree of fatty infiltration with mild splenomegaly but no other stigmata of chronic liver disease.

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