

Witness Name: JONATHAN COLAM-FRENCH

Statement No: WITN2763002

Exhibits: WITN2763003-6

Dated: JANUARY 2022

INFECTED BLOOD INQUIRY

SECOND WRITTEN STATEMENT OF JONATHAN COLAM-FRENCH

I, JONATHAN COLAM-FRENCH, will say as follows:-

Section 1. Introduction

1. My full name is Jonathan Paul Colam-French. I was born on 1970 and I live at Spain.
2. I was infected with the Hepatitis C Virus (HCV) through contaminated blood products.
3. This Witness Statement has been prepared without the benefit of a full set of medical notes and records. I have tried very hard to gain copies of my medical records from Lincoln Hospital without success. I had lengthy conversations with the Freedom of Information Office at Lincoln and almost reported the matter to the Information Commissioners Office, having asked Lincoln a lot of policy related questions and then for an internal review of my case. I was told

that my records had been destroyed, in spite of it being in clear contravention of their record retention policy at that time.

Section 2. How Infected

4. I have mild Haemophilia A. I was treated with Factor VIII (FVIII) concentrate on just three occasions in 1982, 1989 (at Lincoln Hospital) and much later after I had moved to Norfolk in 1999 for a liver biopsy.
5. This is my Second Statement. It should be read in conjunction with my First Statement dated 28th February 2019. When I made my First Statement, I referred to the digital UKHCDO patient record I had obtained but I did not exhibit the record to it. There is now produced and shown to me at Exhibit WITN2763003 a copy of that record.
6. Referring to paragraphs 5 and 6 of my First Statement, I had assumed that the FVIII BPL (batch number 002943) I was first given in 1982 was administered to me in addition to Cryoprecipitate when I was hospitalised for 10 days with an ankle bleed in April 1982. I cannot remember any other occasion in 1982 (and before 1989) when I was in need of any treatment, neither can my father.
7. I refer to Exhibit WITN2763004 being a copy of an email exchange between me and UKHCDO. I was contacted in June 2019 and informed that upon review some additional paperwork had been found for me whilst going through their paper archives.
8. I now refer to Exhibit WITN2763005 being a three-page document entitled 'Hepatitis Survey' that was found in the UKHCDO 'archive' and forwarded to me. It has now been clarified that the treatment I was given in April 1982 was solely Cryoprecipitate and not in combination with FVIII Concentrate. I was first treated with FVIII Concentrate on 3rd September 1982. It was apparently given to me for 'injury to finger'. I did not have a finger injury. The Hepatitis Survey confirms that I had HCV (then known as Non-A and/or Non-B Hepatitis) and

was completed on 23rd August 1983. I was not yet 13 years old and I was infected with HCV the previous year and with the first dose of FVIII concentrate administered to me, being BPL batch number 002943.

Section 3. Other Infections

9. I refer to my First Statement. The vCJD issue had a significant impact on the way I was treated. All of a sudden, when I went for bloods for example, there were hazard warning stickers on my file and all of my records had 'danger of infection' on them. I was given the last appointment of the day when I went to the dentist. There was a marked difference in how I was treated before and after the vCJD risk was identified.

Section 4. Consent

10. I do not remember ever injuring any one of my fingers let alone agreeing to any form of treatment as a result. I do not remember sustaining any injury and/or having any form of medical treatment that would necessitate me needing FVIII Concentrate in September 1982.
11. When I made my First Statement, I gave my clinicians the benefit of the doubt as to whether I was treated and tested without my knowledge and consent. I now firmly believe that I was treated and tested without my knowledge and consent. Moreover, I believe that I was deliberately experimented on as a Previously Untreated Patient (PUP). The FVIII treatment I had in September 1982 (if needed at all) was unnecessary especially given the previous successful treatment of a major bleed with Cryoprecipitate. The timing of this treatment and the timing of Dr Rizza's directive letter to his fellow Centre Directors is startling.

Section 5. Impact of the Infection

12. I refer to my First Statement. Before relocating to Spain with my partner, I had a well-paid senior management job at East Anglia University. I was infected with HCV for 23 years (from when I was 11 until I was 34 years old). I never formerly made a conscious link between being infected with HCV and my ability to cope with what became a demanding and stressful job. I started to find the job completely overwhelming. Dropping down to a 4-day week made it a little more bearable but I found that I just couldn't concentrate on anything. Looking back, I think I was bonkers to give up such a lucrative job (when I now earn very little) but I couldn't continue. I gave it up believing that it was the sensible thing to do for the sake of my health.
13. None of my clinicians ever told me that I was at a greater risk of developing other health conditions through being infected with HCV. After signing my Statement, I started to read up on the EIBSS Special Mechanism Category (SMC) and to raise questions because no-one I spoke to at EIBSS seemed to know why or where the criteria came from. None of the infected are routinely monitored for the SMC criteria conditions, in spite (I assume) of being at increased risk.
14. I have started to get pains in both my hands and both my feet. I have done some online research and the symptoms are consistent with Rheumatoid Arthritis. Rheumatoid Arthritis is one of a series of conditions identified by EIBSS as being a trigger for meeting the SMC. I now have a hospital appointment to see a Consultant in March. Many people don't seek medical help until it's too late and their condition has become too painful. I would have never known of the associated risk and pursued an appointment had I not seen it included in the SMC criteria.
15. I refer to Exhibit WITN2763006 being a follow-up email sent to me by EIBSS last month. The only patients believed to need monitoring are those with

cirrhosis. This is so wrong and short-sighted. I went without HCV clearing treatment until my liver was verge of cirrhosis. My liver was fundamentally broken. I looked terrible and had dark rings around my eyes in every single photo of me in my twenties. I have recently started to get liver pains again. It is incredible to me that liver monitoring is only thought to be necessary if someone previously infected with HCV has a liver cirrhosis label.

16. My teeth are in poor shape. I have been aware for some time that EIBSS will fund dental treatment, but it wasn't until last year that I discovered that this is because HCV can cause damage to the teeth. This is yet another example of not being properly informed of the long term impact of being infected with HCV.

Section 6. Treatment/care/support

17. I refer to my First Statement.

Section 7. Financial Assistance

18. I refer to my First Statement.

Section 8. Other Issues

19. I refer to my First Statement.

Anonymity

20. I do not seek anonymity and I understand that this Statement will be published by the Inquiry.

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Statement of Truth

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

Signed

GRO-C

Dated

25 / 1 / 22