

# ANONYMOUS

Witness Name **GRO-B**

Statement No.: WITN3577001

Exhibits: **WITN3577002 - 004**

Dated: 24th October 2019

## INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF **GRO-B**

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5th July 2019.

I **GRO-B** will say as follows: -

### Section 1. Introduction

1. My name is **GRO-B** My date of birth is **GRO-B** 1947 and my address is known to the Inquiry. I am retired. I intend to speak about my late, former husband **GRO-B: H** In particular, the nature of his illness, how the illness affected him, the treatment he received and the impact it had on him and our lives together.

### Section 2. How Affected

2. I met **H** in **GRO-B** when he was 25. I was informed by his parents that as a moderately severe haemophiliac, he had spent quite a lot of time in hospital as a child and received blood on many occasions.

## ANONYMOUS

3. During the years that we were married, I can only remember two occasions where [H] was given blood or Factor VIII. The first, towards the end of [GRO-B] was when he sustained an injury to his knee whilst doing a job at home. This caused internal bleeding and his knee to become very swollen. We went to [GRO-B] Hospital in [GRO-B] and he was given Factor VIII. The second time was [GRO-B] [H] went to [GRO-B] for a minor procedure and he was again given Factor VIII. This was about six months before he died in [GRO-B]. Neither [H] nor I were ever given any information regarding the risks involved in receiving blood or blood products.
4. [H] rarely complained about anything. I do remember him saying on a few occasions in the months before he died that his stomach was uncomfortable and painful at times. He saw his GP, who said it could be due to an ulcer and prescribed some medicine. The doctor suggested sending him for a 'Barium Meal,' though I don't recall this procedure ever taking place.
5. On the Friday before [H] died, he was feeling really unwell. He had arranged to meet a friend that evening but cancelled last minute, so I knew he must have been feeling bad. The next day was the same. We had arranged to go out in the evening, but in the afternoon he said that he didn't feel up to it. He continued to feel unwell over the weekend and developed flu-like symptoms. On Monday, I called the doctor, who gave [H] a medical certificate stating he had influenza and prescribed antibiotics, which made him feel sick. The next day, I called the doctor again as [H] was no better and now looked jaundiced. He was taken by ambulance to [GRO-B] Hospital.

## ANONYMOUS

6. I visited [H] the next day. He had become dehydrated and was being given intravenous fluids. The nurse told me that 'if he responds' to treatment he 'should' recover. At that point I became aware that he might not recover and I was scared. I phoned the hospital that evening and was told that [H] was 'comfortable.' On Thursday afternoon, I received a phone call from [GRO-B] asking me to go there immediately, as [H]'s condition had deteriorated. His blood pressure was very low and no one knew why. He was transferred to [GRO-B] Hospital in [GRO-B] by ambulance.
7. A while after arriving at [GRO-B] I was asked to speak privately with a Consultant, who informed me that [H]'s illness was most likely due to the blood products he had received six months earlier. The Consultant said that it takes six months for the hepatitis to incubate within the body. Looking back, I wondered whether he was prompting me to make a complaint. The Consultant was sympathetic and at that point, I knew [H] was not going to recover. As soon as I left the Consultant, I was asked to go and see [H] who was distressed and gasping for breath. He died while I was there.
8. I was not allowed to see [H] again. A post-mortem was undertaken and I was told that the coffin was sealed to avoid infection. At no point was I given any information with regards to transmission of hepatitis or advised to get myself tested. It never occurred to me to do so. I was just devastated at losing [H]. I heard nothing from the Hospital after [H]'s death and received no information or support.

## ANONYMOUS

9. I definitely don't believe that [H] was given any information about the risk of being exposed to infection when he received the blood products; he would have told me. It never entered my head that there was any risk involved. I always thought how good it was that they could provide these blood products and transfusions. [H] lived a normal, positive life and for something like that to have killed him is terrible.

### **Section 3. Other Infections**

10. To my knowledge, HCV was the only infection which [H] contracted from the blood products.

### **Section 4. Consent**

11. I do not believe that [H] was treated or tested without his consent. However, I am sure that he was never informed of the risks associated with transfusions and blood products.

### **Section 5. Impact**

12. The hepatitis was the cause of [H]'s death. It was sudden and had a devastating effect on the family. We were all heartbroken. [H]'s death seemed like the end of my world. His parents were devastated and it affected everyone who knew him. My parents were distraught and were very concerned for me. Initially, I stayed with my parents. Later, my sister stayed with me at home because I didn't want to be alone.

## ANONYMOUS

13. I felt like I didn't want to go out, apart from going to work. I had to be strong, but I was finding it difficult to sleep. I was prescribed Nitrazepam tablets for depression and to help me sleep. I became so sad that I felt I didn't want to be around any more. [H] was the biggest part of my life.
14. I was never offered any counselling or psychological support. If I had been offered support, I would have taken it. However, I didn't seek any myself; I am fairly independent and usually keep things to myself.
15. I didn't feel like there was any stigma at the time. I told close friends about [H]'s hepatitis and how he died. I don't think that people were concerned they might catch anything.

### **Section 6. Treatment/Care/Support**

16. Due to the nature of [H]'s illness, it was too late for him to receive treatment.

### **Section 7. Financial Assistance**

17. In 2011, I learned from newspaper articles, that I could apply to the Skipton Fund since they were dealing with compensation for people who were infected or affected by tainted blood products. I received a Stage One payment in November 2011. I applied for a Stage Two payment, which was refused (WITN3577002). Upon appeal, I was refused again, because there was 'no evidence' that [H] had liver damage or liver cancer, despite his death certificate stating that he suffered from Fulminant Hepatitis.
18. I felt angry. I had already stated previously in a letter to the Skipton Fund, that [H] had lost his life. It couldn't have been any worse. After



## ANONYMOUS

the appeal was rejected, I thought that I couldn't continue with the process and I didn't do anything further.

19. I thought that the application process for the Skipton Fund was fine. I was assisted by the Consultant Haematologist at [GRO-B] [GRO-B] Dr [GRO-B] in providing evidence. He had sent me a letter (WITN3577003), which I forwarded to Skipton, explaining that [H] had received Cryoprecipitate in [GRO-B] in [GRO-B] and [GRO-B] and that it seemed 'almost definitely' that the hepatitis which caused his death related to the blood products which he received in the past.

20. I felt that I should have received the full amount that was available. It was as though losing his life didn't matter. The decision to refuse the payment and the appeal (WITN3577004) seemed as though the panel did not consider the enormity of what had happened to us. I felt the amount I received was an insult.

### **Section 8. Other Issues**

21. After [H] died, his mother stated that I should 'sue them,' but at the time I didn't have the heart, or the finances to do so. I was never aware that the blood products which [H] received could have been infected. Many years later, my sister showed me articles from newspapers about this happening to other people. Until then, I didn't realise that they had been giving tainted blood to others.

22. I was amazed to read another article, claiming that Government and NHS officials had been aware that the products they were sourcing were a 'cheap option' and that if haemophiliacs were killed, they would be 'saving money in the long-run'. I was outraged.

23. I have exhibited the following documents:

# ANONYMOUS

<b>WITN3577002</b>	Letter from the Skipton Fund rejecting Stage Two payment
<b>WITN3577003</b>	Letter from Dr <b>GRO-B</b> Consultant Haematologist at <b>GRO-B</b> to the Skipton Fund
<b>WITN3577004</b>	Letter from the Skipton Fund refusing the appeal

## Statement of Truth

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

Signed                     **GRO-B**                    

Dated 30<sup>th</sup> October 2019.