Witness Name: Angela Trainer
Statement No.: WITN3612001
Exhibits: **WITN3612002-4**
Dated: 05/11/2019

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF ANGELA TRAINER

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 02 August 2019.

I, Angela Trainer, will say as follows: -

Section 1. Introduction

1. I am forty-nine years old and employed as a Civil Servant, working for The Scottish Government. My date of birth is GRO-C 1970 and my address is known to the Inquiry.

2. I am the middle child of the late Mary (known as Moira) Trainer, formerly of GRO-C who was born on GRO-C 1946 and died on 10 April 2009. The certified cause of death was Hepatocellular Carcinoma and Hepatitis C. (See Exhibit WITN3612002). I intend to speak about my mother's Hepatitis C infection, in particular, the nature of her illness, how the illness affected her, the treatment received and the impact it had on my family and our lives together.

3. I confirm I am not legally represented and I am not seeking anonymity.

4. I have today, 12 August 2019, signed a consent form for the use of my statement and I am happy for this to be used in conjunction with this statement once it is signed.

Section 2. How Affected

5. My mother contracted Hepatitis C due to receiving infected blood through a blood transfusion from the NHS in 1974. (See Exhibit WITN3612003). My mother's genotype was 3A. She never had any tattoos (and even freaked out when I had a small one on my ankle), nor did she use intravenous drugs nor was she sexually promiscuous. The blood transfusion in 1974 was the only transfusion she received.

6. My mother was admitted to Bellshill Maternity Hospital, Bellshill, Lanarkshire on GRO-C 1974 after going into labour for the birth of her fourth baby. It was a traumatic birth. She was opened from her breast bone to her pubic bone to remove the baby. Unfortunately, she suffered complications during birth, had a fit, suffered cervical and uterine tears and had a brain haemorrhage. She died three times in theatre and according to medical records had a "Total Hysterectomy". (See Exhibit WITN3612003)

7. However, we now know that this was not the case as it was discovered later in life it was only a partial hysterectomy and her left ovary was still intact. This mistakenly incomplete hysterectomy resulted in my mother having constant pains in her lower abdominal areas throughout her life. It also resulted in my mother going through the menopause much earlier in life that normal.

8. Having checked my mother's medical records, I can confirm that prior to the birth of her fourth child, my mother was in excellent health, had

no underlying health issues and very rarely had cause to visit the Doctor or a hospital.

9. At the time of the birth it is true to say that my mother was seriously ill. Due to the amount of blood loss, she had to be given blood on the operating table "almost three complete exchange transfusions". (Exhibit WITN3612003)

10. Unfortunately, my baby sister died approximately 32 hours later of an Adrenal Haemorrhage and atelectasis of the lungs. My sister was a full-term baby who effectively had to deliver herself when my mother died on the operating table during labour.

11. On 20 October 1974 my Mother was transferred to the Intensive Care Unit at Law Hospital in Carluke, Lanarkshire. She developed severe Alkalosis and the staff wanted her to be closer to where the Blood Bank was situated. She remained an in-patient until early December.

12. My mother received 40 pints of blood following admission to Bellshill Maternity on 18 October 1974 and during her stay in Law Hospital. I do not know blood batch numbers nor do I know whether the blood used was from the Scottish National Blood Transfusion Service (SNBTS) or not. I do know however that this was the only time my mother ever had a blood transfusion.

13. As far as I am aware my mother was not warned about the risks associated with blood transfusion and I would doubt she was even conscious or in a lucid state to hear this advice given her medical state at the time. Having spoken to close family members who were with my mother and father during this time, namely my late father's younger sisters, my mother was unconscious for about six weeks after the labour and my father had to look after my sister, brother and myself, hold down a job and visit my mother when possible. No one in the family remembers any discussion about, or information being given in relation

to possible risks associated with the blood. To highlight my mother's state of health, she did not even know our baby sister had died and been buried during that time.

14. My mother never fully recovered from the trauma of the birth and death of my sister back in 1974. As a result of the labour and complications she was left blind in her left eye, suffered weakness in her left-hand side and had constant back and abdominal pains. A few years later she began to have well documented bouts of sickness, acid reflux, sciatic pains, fatigue and chronic insomnia and had consulted various GP's and hospital doctors about this.

15. Having been diagnosed with rheumatoid arthritis, my mother attended Stonehouse Hospital, Stonehouse, Lanarkshire, for yearly bloods and care of this condition under a Doctor Zoma. It is true to say that my mother blamed all of her sciatic pains, fatigue and chronic insomnia and bouts of sickness on the arthritis.

16. However, despite these almost bi-weekly visits to GP's and quarterly hospital visits it was not until 1994 when my mother was admitted to Hairmyres Hospital, East Kilbride, for removal of gallstones by way of keyhole surgery, that liver disease was finally diagnosed. She was required to have routine bloods checked pre-operatively. She was given the results and was told that she had cirrhosis of the liver.

17. My mother was totally shocked by this. She told the doctors that she did not drink alcohol, never had. She could not understand this and thought that there must be some sort of mistake as it was normally attributed to alcohol abuse. She received no further blood transfusions for this surgical procedure.

18. Mum always said that the hospital staff all treated her differently when she was diagnosed with Cirrhosis as it was presumed that she was an alcoholic. She was mortified by this and really upset. She was never given any information to take home about caring for herself with this

condition or what to expect in the future but she was told she should never drink alcohol again – something she never did anyway. Mum had complained for years of stomach pains and it was thought she had various infections. She was thought to be obese during this time and was constantly asked to lose weight, which she never seemed to be able to do. An investigation in 1996 revealed she had a cyst which was stuck to her bowel and when it was removed it was 30 x 30cm in diameter and weighed 7lbs.

19. Once diagnosed, my mother was referred to Dr Morris at Glasgow Royal Infirmary for further liver tests. In 1996 he told my mother that she had Hepatitis C or as noted in her medical records "Chronic Hepatitis secondary to Hepatitis C". This was the first time she was informed of this diagnosis. My mother had no concept of what this meant nor did she know or understand that they were carrying out tests for this. She received no prior counselling regarding the impact that a positive result could have upon her life. She was very upset and told me that she had Aids and was dying. Clearly my mother was unable to comprehend what her diagnosis meant.

20. At the time my mother was diagnosed with Hepatitis C and after some web research, my family all suddenly realised that my mother had been suffering the symptoms of chronic liver disease for twenty years of her life. The seriousness of this diagnosis was never brought to her or our attention. At no stage was she given any information or advice on how to manage the condition or on precautions to take.

Section 3. Other Infections

21. As far as I am aware, my mother was only infected with Hepatitis C. I hope, rather than know, that she was tested for HIV.

22. After my mother died, myself, GRO-C were all tested for Hepatitis C. We asked to be tested, no one ever

recommended it despite the awareness that GRO-C Fortunately, we were all negative.

Section 4. Consent

23. I don't think the situation was properly explained at the time. At the Penrose Inquiry the medical expert argued that my mother must have been given leaflets about her illnesses, but I know that she was not given anything to clarify things to her, which is why she mistakenly thought she had AIDS. I've already said, I don't believe that she knew she was being tested for HCV when she was found to be infected with the virus.

24. As far as I am aware, she was not the subject of experiments as such, but the chemoembolization was experimental and even the doctor said that they would not have gone ahead had they known her full medical history. I fear that treatment shortened her life. At the same time, I do not believe that she was denied any particular treatment that may have been available.

Section 5. Impact

25. The Hepatitis C robbed my mother of her life long before it killed her.

26. On the rare occasions she was well enough to travel, and we scraped together enough money for a short holiday to Benidorm, she found the flights exhausting and would only have half days to do activities because she was so tired.

27. In November 2007 my mother had a liver ultrasound scan which showed an abnormality. They could not tell her what it was. She was then asked to go for a CT scan.

28. In September 2008 my brother took mum for a CT Scan at Glasgow Royal and in November 2008 my aunt took her to Gartnavel Hospital, Glasgow, to have an MRI scan done. Mum was nervous about both scans as she was claustrophobic, plus having had a previous MRI she knew it would be a painful experience. My brother wore a lead vest and stood by my mother's side all through the scan, it was very traumatic for them both.

29. On 24 November Dr Stanley gave mum and I the results of this scan and revealed it showed that she had a node about 3cm in diameter. He said that he was referring mum to the Liver Specialist Unit in Edinburgh and the Consultant, Mr Powell, would have a look at the scan and decide whether it would be best to cut if off or burn it off. (See Exhibit WITN3612004).

30. On 23 December 2008 Mr Powell told myself, my mother and my brother that our mother had hepatocellular carcinoma (liver cell cancer). This is the first time anybody had mentioned the words "Hepatocellular Cancer". We were all stunned because the original Consultant Dr Stanley of GRI had told us that there was a small 3cm node and said to us that Mr Powell would remove it either by cutting it off or burning it off. The word cancer was not mentioned, nor anything like it.

31. Mr Powell assumed that we already knew about this. We were all extremely shocked. It was devastating; I remember we said "the what?". During the meeting with him it became clear that vital past medical history and associated background information in the hands of GRI, had not been passed on to him. My mother cried and was inconsolable. She had no idea that she had advanced liver disease until this point, nor did I or my siblings. She told us that she did not want to know how long she had.

32. My brother was told in a one to one by Mr Powell that the prognosis was not good. She was to be referred for Chemoembolization treatment. We were told that the success rate was poor. This treatment

was a last resort because she was not suitable for a transplant due to the fact the Liver Cancer was Hepatocellular, ie. within the liver cells. This means that any transplanted organ would also be infiltrated with cancer cells. The tumour was greater than 5cms. Her liver was cirrhotic.

33. My mother's age and general health was also a factor. By the time the treatment started on the 19 January 2009, they had discovered a blockage in her main ventricle and the cancer had spread to her ventricle also. She was really ill. My brother was in China on business at this time and returned early to help support her during her treatment. My mother told him to go to China as we were informed that this was a routine procedure and she would be in and out of hospital in 2 to 4 days. How wrong we were.

34. I commuted to Edinburgh daily (an expensive commute) to visit her during the Chemoembolization. Mum became confused and showed signs of encephalopathy. The nurses told us that due to her previous brain haemorrhage during childbirth that she was more susceptible to this, together with the side effects of the drug therapy. At one point she did not know who we were.

35. The treatment aged her. She was not my mum. The nurses gave her morphine for pain control, despite the Hospital being made aware she was allergic to this. The side effects suffered by her due to her liver failure and inability to detoxify the drugs were intense. She started to retain such toxins and her state of confusion worsened as a result. My brother returned from China, and my sister Maureen came up form Doncaster, only to find that mum was no longer mum. She looked like an old woman, way beyond her years and they were both extremely shocked by what they saw; she wasn't like that before the treatment.

36. Mum was admitted to Edinburgh Royal on Sunday 18 January and had her treatment on Monday 19 January. I saw her on Monday evening

and she was sleepy but sore. On Tuesday 20 I called, as requested, but mum wasn't allowed out that day as she was still complaining of aches and pains. On Wednesday 21 January I phoned before heading through to Edinburgh and could tell by speaking to mum that she wasn't herself – she seemed confused that she had just showered but then was just going for a shower. I was told by the nurses that she was given morphine and by the time I travelled through to Edinburgh mum's condition worsened and she did not recognise me.

37. On Thursday 22 January, my brother came home from China and travelled straight through to Edinburgh to see mum. As mentioned, he was extremely shocked at what he saw. Mum was not mum, she was an old woman who didn't recognise anyone and couldn't get up from her bed. On Friday 23 January Maureen travelled up from England and was extremely upset and taken aback - as we all were - to see mum in this state.

38. Mum was released from Edinburgh Royal – too soon in our opinion – on Tuesday 27 January. On Friday 30 January mum was admitted to Hairmyres hospital in East Kilbride. We had to call an ambulance for mum because she was so confused that she was trying to put a bra on as a skirt! She threw the paramedics out of the house and we had to get her GP to come to persuade her to go to hospital – eventually she did. She was released from there on 04 February after having her system flushed out by Lactulose.

39. Mum had a check-up on 06 February in Edinburgh Royal after I contacted Mr Powell's secretary and informed her of mum's condition. They kept her in and her system was again flushed out - her medication was also changed to reflect her condition. She was released on 10/11 February. For a month we coped until she became quite ill again on 14 March but was determined to attend a family meal as it was my birthday. Her colour was an extremely dark shade of yellow. She was admitted on 16 March to Hairmyres hospital once more to have her

system flushed and monitored. She spent Mother's Day in hospital. She was released on 25 March when Stephen and I took mum home.

40. On Friday 03 April, mum's feet and ankles became swollen but she was in a fine mood. I had taken her shopping – at her request – and she was watching a film with me. On Saturday 04 April, she stayed overnight at Stephen's house, played with his children but was up most of the night. She went home on Sunday 05 April. She became very agitated and couldn't settle and was getting upset all the time because she was confused. She was asking to go to bed even though she was in bed, she was asking to go to the toilet even when she was there.

41. I went to mum's house to help Maureen with her and mum grabbed me and begged me not to let "them" take her. I told mum that she was staying where she was – clearly mum was very frightened and confused at this point. The care nurses sedated her later that night and she remained in a coma until she died on 10 April 2009.

42. My mother was unable to dress herself during this confused time to the extent that she thought her bra was her skirt and so life became hard for her. Sometimes she went through periods of not listening to any of the family. It was as if we weren't there, even when they were in conversation with her. She sometimes listened to Stephen because he was her "boy". In other words, her mental state was erratic. She also listened to the family GP who could persuade her to do certain things when she was extremely encephalopathic. We managed to get a home help for mum twice a day (Monday to Friday) to help her with dressing and getting her breakfast and lunch. Mum hated this at first but then became dependant on these visits.

43. Between 19 January 2009 and her death on 10 April 2009 she was treated at the Royal Infirmary in Edinburgh and Hairmyres. There were at least four admissions between these two hospitals due to her health deteriorating significantly.

44. She was trying to be independent but was unable to do simple everyday tasks. She lost her dignity. She became faecally incontinent, sometimes as much as seven times a night. We know this because Stephen stayed overnight in Hairmyres and was awake to be there for her.

45. This was the precursor to the family bringing her home to die. The Consultant told us she had weeks to live. Mr Powell advised us that had he known how seriously ill our mother was, he would not have commenced Chemoembolization. We discharged her on Wednesday 25 March 2009. She had no quality of life left. We put her in a wheelchair and put her in the back of Stephen's car, as an ambulance was going to take another day. We had no time to waste.

46. Following the final discharge from hospital to home, my mother had palliative care nurses for two weeks only. There was a three-day delay in a hospital bed being delivered. Towards the end of her life, Stephen took time off work and Maureen came up from England to help as I was already off work looking after mum at this time.

47. On 05 April my mother became extremely agitated and the nurses were called during the night to help sedate her. It took 3 people, my sisters and a nurse, to settle her until the medical nurses arrived. She required sub-cutaneous sedation via a syringe driver for her acute state of confusion. After sedation she seemed restful for a while but required more sedation later that night. The following day she did not wake up as expected – she was in a coma.

48. I stayed over each night during the following week with Maureen, only returning home for an hour each day to tend to my son. Stephen came to sit with mum every day that week. She remained in a coma until she died on Good Friday, 10 April 2009 with all the family present. We were not prepared for this as we thought she would wake up as she did many times before following sedation.

49. As late as March 2009, our family was not warned of the risk of transmission of the Hepatitis C virus. Prior to my mother's death she had semi-constant faecal soiling and we were not warned to wear gloves when assisting our mother intimately within hospital. When my mother was discharged home, no medical personnel advised us to wear protective gloves and aprons when nursing her at home.

50. Our family was driven apart by my mother's illness and subsequent death. Following my mother's death, we started to become closer together again. Before his death, my father had spent years nursing my mother. My mother's continual illness changed their marriage and they had no decent quality of life throughout their time together.

51. My parents never discussed whether my father was ever offered testing due to the risk of sexual transmission. In 2006 our mother confided in me that she had been advised to cease sexual relations with my father at this time. Therefore, their close physical relationship ended due to this virus. I do know that neither of my parents was offered support or counselling after Hepatitis C was diagnosed. Our parents were a very loving couple. They had been together since my mother was 15 and were soulmates. This affected them both profoundly on a level I don't think I will ever be able to understand.

52. Sadly, my father predeceased my mother on 19 August 2007 as a result of a heart attack while he and my brother were playing golf on a father / son outing. As his death was so sudden and as he was my mother's main registered carer, his passing further devastated the family. From this point I became my mother's unpaid registered carer.

53. My father had been depressed because his life was taken from him due to my mother's illness. He was a warehouseman who had no pension as this meant taking money out of his wage packet which he could not afford to do. He loved life to the full with interests in Junior football and

local pool leagues. He was very successful and skilled at both activities with numerous awards and trophies. It is true to say that my father was the focal point of our immediate and extended family.

54. As the oldest brother of six with one brother and 4 sisters and uncle to twelve nieces and nephews, everyone loved and respected him. He retired early in March 1998 taking redundancy to look after my mum. My mum and dad lived almost in complete poverty due to my mother's illness. My father became a virtual recluse. He stopped socialising. He stopped playing sports and going to his local pub, he stopped seeing friends that he had known for years. He stopped playing pool, withdrew from all competitions and stopped going to watch junior football at weekends. He was a deeply private person. My mother's illness changed the last years of their marriage.

55. We do not know whether my father also had Hepatitis C, possibly contracted through sexual transmission. He never told us, he always kept matters like that private. My mother mentioned to me that they had stopped sexual relations once she was diagnosed with Hepatitis C, but that was many years after contracting it. Dad broke down one night in tears and spoke to my sister saying that he didn't know how to cope with mum's illness, my siblings and I had left home by then and he was on his own.

56. During our teenage years, mum was always ill but she became known as a hypochondriac within the extended family because she was always ill and no-one believed she really was – they all laughed at her behind her back because they thought she was attention seeking. Before, mum had been the life and soul of the party for all the right reasons, but after her infection it was for all the wrong reasons that she became the focus of attention. She would always be lying down on the sofa when we came home from school because she was tired. We got ourselves out of bed, fed and off to school because mum couldn't get out of bed. My sister and I frequently made the dinners because mum

couldn't and dad was out working. This became our way of life while we were growing up.

57. Following my father's death, I became my mother's principal carer whilst holding down a full-time job and being a single mother to my son Stewart. I looked after my mother for 18 months also doing daily tasks like shopping and housework. She required multiple daily visits and as my brother Stephen regularly travelled internationally for his job and my sister Maureen lives in England, I bore the brunt of my mother's illness on a daily basis. This was challenging because of my mother's profound encephalopathy, mood swings, fatigue and general poor wellbeing. She could change in an instant, often screaming right into your face. We had two names for her, Mrs Nasty when she was like that and then there was Mrs Chirpy – she would be charm personified and even chatted up the doctors in A&E!

58. I was under pressure at this time having recently suffered the breakdown of my marriage. I was both physically and mentally exhausted. Both myself and Maureen received numerous phone-calls from our mother all throughout the night and early hours of the morning almost on a daily basis. I was responsible for taking my mother to all her hospital appointments which made work life difficult having to constantly ask for time off to do this. I had no life to call my own at this time. During this 18-month period we all realised what my father had been going through for the last ten years of his life.

59. I remember one time having a huge row with mum because she wanted me to do something I simply just couldn't do, and she didn't understand that I couldn't. This row became so huge that my sister and brother became involved - I had to write mum a letter to explain my situation because she wouldn't listen to me – this made her want to run away and kill herself (her words) because she couldn't understand that I wasn't able to do absolutely everything – she thought I could.

60. For years, and still, even now I feel guilty because I should have done more for her, even though my siblings and everyone else saw that I did everything I possibly could for her. In fact, she came first before my (then) young son. I would drop everything for her and do everything for her, but still I felt pangs of guilt that I could have done more.

61. I still get emotional, especially on special occasions like recently when my son graduated from University, because she (and dad) should have been there to see that. He deserved to have them there to enjoy his success. They both missed out on my wedding and my sister's wedding – an occasion when girls need their parents. We have been deprived of our parents – the strain was clearly too much for my dad and then mum's life cut short due to something that happened years ago and was completely not her fault.

62. My immediate family have been orphaned far too early and we are of the view that my mother was a victim of NHS malpractice.

63. My mother was buried, though we did not inform the funeral home of her infection. She did not have a post mortem because, in the words of the doctor who certified her death, we knew that Hepatitis C had killed her.

64. I didn't go to art school as I wanted and neither I nor my siblings had chance to progress our education because we needed to get a job to support my parents financially. My mother's infection impacted on my work. I could have gone much further with my career, but I needed to be close to mum to help her and care for her and I had quite a lot of time off caring for her. It also impacted on my now husband's career as he stayed local to support me. I don't believe I could have survived without his support. We may never know the far-reaching consequences of the decisions we made on our pensions and such, but even now speaking about this financial position, I have resurgent

feelings of guilt that I should have done more for mum, even though know there wasn't anything more I could have done.

65. I have hypertension and, during the time I was caring for my mother, this got much worse and I had to have increased dosages of medication to even try to keep it controlled.

66. As my father took redundancy to become my mother's primary carer, money was becoming more of a problem as there was no longer a full-time wage coming into the house. My mother applied for a Skipton payment in 2004. Sadly, Dr Morris delayed signing the application. My mother and father needed this money to help live on as they survived on low rate Disability Living Allowance.

67. As a result of this delay, my Dad's brother who lived in America sent £50,000 to my parents as they had no money to survive on and would have been destitute. My siblings and myself personally paid for things such as fuel and car repairs to help them out. Eventually Dr Morris signed the application, confirmed my Mothers illness to the Skipton fund and when they received a payment they were able to pay off their Mortgage. It was another bill that they didn't have to worry about.

68. My son recently graduated university and I felt sad that neither my mother or my father was there to see it and they should have been. They are also missing out on the day to day things, such as pottering around in the garden of the house that we have now, which they would have loved.

Section 6. Treatment/Care/Support

69. My mother's liver treatment started in 1999. Dr Morris of GRI put my mother on Interferon therapy. My parents had to fight to get this therapy started. Prior to this she had been attending for routine blood tests only. The Interferon treatment lasted six months. This was the only

drug treatment she had then. My mother was told that this would give her liver a rest.

70. Sadly, this medicine was unsuccessful and the Hepatitis C virus was still active in her bloodstream, although we found out later during the Penrose Inquiry that in fact the treatment was successful for a while (6 months) – something she was never told – but unfortunately it did not last.

71. No further treatment was offered between 1999 and 2003. I do not know why there was this gap in her liver care. We were never told why she received no treatment for this period. They were after all taking her blood on routine tests and she displayed many typical symptoms of liver failure during this time such as spider web skin, prominent veins, and chronic insomnia, but nothing was done. My mother was kept in the dark but she knew that she was ill.

72. In August 2005 my brother wrote a letter, dictated by my mother, to Dr Morris advising that as a family we were not happy with standard of his care. All he was doing was taking routine bloods and nothing else, no other therapies or treatments were offered – there was no advice, no counselling, no real indication of the severity of this disease or even steps we ourselves could have taken to alleviate some of her symptoms and suffering.

73. Dr Morris delayed the progress of my mother's Skipton fund application even though she clearly qualified for this and her liver was in a Cirrhotic state and the letter complained about this delay also. Dr Morris was not happy about the letter, the complaint to the trust and the criticism within and thus refused to treat my mother any further. My brother was present at the meeting in his office when he advised my mother of this decision. Dr Morris progressed to remove my mother from his list and refer her to another clinic.

74. Initially it was a Dr Mills at Gartnaval hospital she was referred to but she ended up with Dr Stanley who latterly managed my mother's care. Initially my mother regretted sending in the letter as she was made to feel bad when Dr Morris, quite bluntly I have to say, made his position clear on that day. However, shortly afterwards she was back happier, being treated more as a patient with Dr Stanley than as a number in a case book with Dr Morris.

75. My mother did receive Interferon and Ribavirin treatment four years after the initial interferon treatment, but had a bad reaction, possibly to the Ribavirin, including all over itching. The symptoms of Hepatitis C were exacerbated by the treatment, including major disturbances to her sleep pattern. Consequently, the treatment was stopped.

76. In 2005, mum asked if she could have further treatment with Interferon and Ribavirin but the Liver Consultant Dr Stanley and Sister Neilson (Liver Sister) refused her the medication. The decision was taken because of her various allergic reactions to the treatment previously.

77. At no point were any of the immediate family offered counselling or had it suggested to us to meet with a professional who could explain things to us so we would have even a little understanding of what was wrong with mum and how we could have made things a bit easier and safer not just for her but for dad too.

78. No-one at any time, until that meeting with Dr Powell told my mum that this disease and its' by-products (liver failure and cancer) could kill her. No-one told her that there was a very real possibility that she would get cancer and that her liver could stop functioning properly. At no time were my family given any sort of written information or even informed where we could get some. It was not treated as seriously as it should have been. If the gravity of the situation had been made clear earlier then possibly, we as a family would have asked more questions,

challenged treatments and diagnosis and likely have pushed for earlier and better care. Again, this all fuels the guilt trip of "did we do enough"

79. My father did tell my sister that he was depressed at one time, but he was never treated as he would never go to a doctor for anything.

80. I have been given the card to the Inquiry's confidential support line run by the British Red Cross, which I probably would have used if I had received access to something like that at that time.

Section 7. Financial Assistance

81. As outlined above, my mother eventually received money from the Skipton Fund, but the application was delayed by her Doctor and, consequently, the family struggled financially and relied on help from other family members. I cannot recall the amounts involved.

82. It is hard to quantify the financial cost in general terms. Early retirement meaning lost wages, pension contributions, the chance to better yourself within your chosen career. Then there's the failure to build up enough contributions for a full state pension when you do retire. What about the cost in money and time attending hospitals, clinics etc, not to mention the time involved. You do it for your loved ones and finance is a secondary consideration but what hurts from my perspective was the time lost that I could have spent with my son as he grew up. You can never get that back.

Section 8. Other Issues

83. The Penrose Inquiry was a whitewash. The interview was done on the day of my mother's birthday, the same year she died, so it was horrific. I felt there was a rush about it all. I gave evidence to the Inquiry in December 2010 on my mother's behalf. I was left feeling like a victim, was asked questions that only mum could answer, felt I was constantly

defending her and was left feeling like the guilty party - a harrowing experience I never wish to repeat.

84. After Penrose we had no sense of closure and nothing was learned from it. I felt a sense of injustice and ended up joining the Scottish Infected Blood Forum a group that tries to advance the rights of those who were infected and affected by the tainted blood scandal.

85. My trust in the NHS was shattered by the treatment my mum received and I will give an example of how that affected me. I will also outline an instance where it could have had a detrimental affect on the health and possibly, even the life of my sister.

86. A day I'll never forget, GRO-C 1997 – the day my son Stewart was born. It was a very long labour, almost three days leading to a very traumatic birth during which I lost a lot of blood. The doctors told me I had lost so much that my skin was heavily bruised - in fact they had never seen bruising to the extent I suffered after giving birth - so much so that they wanted to give me a blood transfusion.

87. Bearing in mind the proximity of my mum's diagnosis I refused – this was an option I would never take. I just couldn't take the risk that I would be given contaminated blood and be ill like mum, even though doctors reassured me this wouldn't happen. I just had no faith in that being true. I signed a form saying that I took responsibility for leaving without the transfusion and was discharged with iron tablets.

88. I took the tablets for months to help the healing process from losing so much blood, whereas it would have been a matter of days, maybe weeks with the transfusion. At the time there was no one alive who could have talked me into having a blood transfusion after what happened to my mum.

89. GRO-C

90. GRO-C

91. GRO-C

GRO-C My aunt got her to pass the phone to the consultant and she explained the issue with mum to try and help her understand Maureen's extreme reaction and how it was only just a year since her passing and things were still very raw for our family.

92. GRO-C

93. My sincerest wish is that this Inquiry will fare better as there are lessons that must be learned and acknowledgements made before closure can be achieved.

Statement of Truth

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

Signed GRO-C

Dated 05|11|2019