Witness Name: David Coates Statement No: WITN3820001

Exhibits: Dated: 26/11/2020 GRO-C

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DAVID COATES

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 16 June 2020

I, David Coates, will say as follows: -

Section 1. Introduction

- 1. My name is David Ashley Coates. My date of birth is GRO-C 1947 and my address is known to the Inquiry.
- 2. I live in <u>GRO-C</u> with my wife Suzanne and I am retired. Previously I was the Director of Reactor Atomic Operations at the Atomic Energy Research Establishment in Harwell, Oxfordshire.
- I intend to speak about my first wife, Anne, who passed away from cancer in 1990, and who I believe was given infected blood.
- 4. I am not legally represented and I am happy for the Inquiry team investigators to assist me with my statement.

Section 2. How Infected

- 5. I'm a Yorkshire man, and refer to it fondly as God's country. I lived in Scotland for 20 years. Anne and I lived in <u>GRO-C</u>, and then <u>GRO-C</u> where I built a house.
- 6. When I went to university I was a good chemist. I studied Chemistry, Physics and Maths at London University. While there I met Professor, Lord Tedder, who was a lovely guy. He was at Dundee, but moving to St Andrews. He in fact offered to pay for me to do a PhD in Chemistry at St Andrews.
- 7. As a hobby I used to do wood-turning, so in my early days I got a lot of wood dust in my lungs. I had an X-ray for it. The doctor said I had some little white spots all over my lungs. I thought it must be plutonium. That was one of the things we picked up in the North. It enters your lungs and kills off the surrounding cells leaving these white spots when seen on x- ray.
- 8. I spent a few weeks in London doing a Chemical Engineering course. Meanwhile, I got an interview at the UK Atomic Energy Research Establishment Harwell. Within a month I was working there. We had two nuclear reactors, and a 560 million pound budget.
- 9. I had to do 6 months of a reactor course before I was allowed to manage them. We used to produce silica, and deal with airplane propellers. About 4 years after I started working there, we closed the reactors. Then I became the Group Manager for Nuclear Transport.
- 10. Anne and I had three children; Toby in 1973, Matthew in 1976, and Charlotte in 1979. They now live all over the world; one in [GRO-C], one in the USA and one in Australia.
- 11. Anne's full name was Anne Rosemary Coates (Burrell was her maiden name).
 Her date of birth was GRO-C 1948. In 1982 she developed breast cancer.
 The doctors said that if she didn't have any symptoms after 7 years, she

would be alright, but sadly after 5 years she was not doing well. I'm afraid the medical service up North leaves a lot to desire.

- 12. Initially she was at the local place, <u>GRO-C</u> Hospital. She was being seen by a Doctor McKay. Then she went down to Inverness for further tests, and that's where she got diagnosed with breast cancer. I don't know who the doctor was there. They said that the breast cancer could be related to the mastitis she had dealt with when breastfeeding our children.
- 13. Things just sort of happened after that. The problem was that I was so busy. I was becoming a shift manager. I was on shift for nearly 2 years, reprocessing plutonium rich nuclear fuels. I spent a lot of time at work and I wasn't around at the time. There was a lot of things going on that I didn't know about. It was a bit of a surprise when she said she'd been for some blood tests and the doctor had sent her blood off for further testing. Then she got referred for an X-ray. They suggested a mastectomy which took her a while to process, but she did have it done in 1982.
- 14. Between 1982 and 1987 there was no deterioration in her health, she was fine. She started getting on with life again. She was busy, she wasn't working as such but she was keeping busy as a mother.
- 15. I think it was 1986 or 1987 when she first had a blood transfusion. Her white blood cell count was very low. We went on holiday to East Anglia, and she was getting extremely tired. When we came back she went to the doctor's and they sent her for some tests. Once they did those tests they gave her a blood transfusion.
- 16. In 1987, she was also getting very tired, and again she had a blood transfusion. I was off shift by then but I was very busy. She went to the main hospital in Inverness, accompanied by a friend. I think she had to stay the night then. I can't remember the name of the hospital. I should know the name though, because I was often pulling nuclear materials out of hospitals. We went all over the country pulling them out and disposing of them. There were lots of old scientist's materials and dentist's materials left behind.

- 17. She had another blood transfusion in early 1988. I remember coming home and she'd been to the local hospital, she had driven there and back. I remember she was laying on the couch and she was awfully tired. That was the last time she was given blood up there.
- 18. Her treatment moved to Oxford in November 1988. In early 1989 she had a couple of bags of blood. That was at the John Radcliffe Hospital in Oxford. She had some more in November 1989 before Christmas, because she wanted to get herself through the Christmas period.
- 19. We knew that the cancer had spread, it had entered the other breast. It wasn't in the lung or the bone. She was also very anaemic, certainly in her last 3 months. Part of the problem was that she had accepted what was going to happen, and she was going downhill because of it. She had been told that the cancer was incurable, so she didn't get radiation or chemotherapy. I spent a lot of time in hospitals delivering gold wires for people having treatment. She never got any of that, nor any pills. I find it very difficult because I realise now that I didn't know enough about what was going on. That's the hard part for me.
- 20. In February 1990 she had some more blood transfusions and in early March she was moved into Sobell House. Sobell House is a hospice, attached to the Churchill Hospital which was a private hospital. They did everything for her there, it was end of life care. While there, she had blood transfusions a couple of times a week, for 6 weeks.
- 21. We were allowed to see her within visiting times. She would always be lethargic and tired, but she was eating and looking well. She wasn't having treatment, just palliative care.
- 22. About a week before she passed away she apparently fell out of bed. I came to see her and she was heavily bruised down one side of her body, especially her face. At the time I just thought that was part and parcel of the treatment and a little bump was going to leave a big bruise. But I did think it was odd.

Anne said that she had fallen out too but she couldn't remember it. She was heavily sedated I think. She wasn't on a drip at that point that was only for the last couple of days. It was strange that she had fallen out of bed because the bed had a safety guard on either side. I told the doctors that it shouldn't have happened. I didn't raise too many questions as I did not want to make a fuss.

- 23. Around 3-4 days before she died, myself and the children all went to see her. They allowed all of us in for 10 minutes, not just 2 of us which was the rule otherwise. That was the last time they saw her.
- 24. The day before she died I went to see her. I was in her room and I was about to give her a drink of water, when the nurse suddenly told me not to touch her. She said she would give it to her. She had gloves on and she gave it to her in a baby cup. I remember she was a tubby little woman because she had to reach over quite far to be able to reach her. I thought maybe it was because Anne was uncomfortable or a little delicate. I don't know what I thought was going on. However looking back, that event did seem a little strange.
- 25. If something else was going on I would have thought she would be in isolation. Although, from the day she was in Sobell House she was in a room of her own. This room did change once, to a slightly different part of the hospital, maybe because she was near her death.
- 26. She passed away on April 21st 1990. On that day I saw her at 6pm and I was at the hospital until 7pm. I had just returned home and they rang me up to say that she had passed away. I went back at about 8pm. I asked if I could see her and they said no. The nurse told me that she wasn't prepared but that I could come see her in the morning. I found it strange that I couldn't see her that evening given that I had been with her earlier.
- 27. When I came back in the morning with the children they refused to let us see her, and we were told that she was in a body bag. We saw the body bag on a trolley in the chapel of rest. It had a big yellow label on it saying "not to be opened." That was it. That was the end of it.

- 28. We thought it was strange but we just sort of accepted it. I did think about the fact that she had volunteered to donate her organs, and I thought maybe that's what it was. But surely that wouldn't have happened in a hospice? It didn't make any sense. But I didn't ask questions, I was more worried about keeping the kids protected. They were too young to question it.
- 29. It was about 4 days later that the undertaker went to collect her body. The hospital had already put the body bag in a coffin, and he was told to put that in another coffin. The body bag was sealed into the coffin, and he wasn't allowed to open it. On the side of the coffin there was a label saying "not to be opened." It was strange. In 1990 I know that's how they would have treated Hepatitis and HIV. It all points in that direction.
- 30. She was then cremated, along with her wishes. The funeral director said he had never come across such a thing before, i.e. the body bag and sealed coffin. He was into his 80's then and his son was about 40 and taking over from him. His son had also never heard of it. He thought it was very odd.
- 31. We didn't go to the doctor's then or get any other information. On her death certificate, it says the cause of death was "carcinoma of breast." That's it. But if you die from breast cancer you're not going to get sealed up in a body bag. When I looked back later on it seemed like there was something else going on. Back then HIV and HCV were synonymous, and were treated very seriously. But at the time there was no reason for us to think she had caught it. It wasn't in the forefront of my mind. The death certificate was signed off by a Sobell House doctor, H. Taylor. But I didn't think to ask about it at the time.
- 32. Later on, a doctor told us that it sounded like some sort of infectious disease was not mentioned. I always imagined there was something else going on, but I didn't know what to do about it. It was only later on when you talked about it and people brought things up.
- 33.1 got on with life. I had no worries about it for a while but I did think it was odd. Anne's mother came occasionally to see her grandchildren. She would bring it

up again. We have a practice nurse, who is a good friend of the family, my wife's friend. She said it was very odd. That was 3 or 4 years ago. Then I heard about the Inquiry in 2018 and I thought I could speak to you. There was nothing I could do about it at the time, and it is history now.

- 34.1 did not have any indication of anything until about 3 or 4 years after Anne died. That's when I spoke to my friend who has Hepatitis C. He lived in France for a while and he actually got Hepatitis C in Malaysia. He mentioned something about blood transfusions and it brought it back to me. I could relate to it. That's what made me consider this properly.
- 35. In the last few weeks before Anne's death, she was getting blood at least twice a week. The hospice might have feared that they had given it to her and perhaps they felt liable. I have thought that. It's the only conclusion I can come to. Sometime in the hospital she was given something... I can think of no other reason for it at all. We've had a couple of friends die recently and at their funerals they have been in open coffins.
- 36. The thing that bothered me the most is that she was so bruised on the side of her body. I wondered if they were reluctant to show that. But there's no point in doing anything about it now. After 10 years, the records are expunded and that's it. It doesn't matter, its history.

Section 3. Other Infections

37. I do not know what Anne was infected with.

Section 4. Consent

38. There was no issue of consent. It was necessary. It was a "fait accompli" really.

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Section 5. Impact

- 39.1 think I was very low. But I didn't grieve at all, or at least I didn't think I did. I just accepted it. I got on with looking after the family. Charlotte was 11, Matthew was 13, and Toby was 15.
- 40. The effect on Charlotte was the hardest, she suffered the most. Suzanne, my current wife, soon came into the picture and looked after my daughter considerably. Later on in life she suffered even more. GRO-C GRO-C. She would have bouts of feeling very low. We only talked about it in detail once when we went out for breakfast, otherwise she didn't want to know. GRO-C
- 41. Matthew wanted to know everything, later on that is. He asked a lot of questions and we spent a lot of time talking to him about it. He knows everything. He's the middle child, he holds the family as very important. He's a consultant engineer now, he has an inquisitive mind.
- 42. Toby is a bit more like me, a bit more insular. It affected him but it doesn't show. He doesn't like to delve too close. But when he does something he does it wholeheartedly.
- 43. I got married to Suzanne in 1997, but I knew her back in 1993. It was a bit of a quick turnaround, about a year after Anne passed away. Before she died I actually spoke to her about it. I said I would aim to meet someone and it would help to give the children stability. Sue is lovely. I've got my 3 children, she's got 4. So together we have 7.
- 44. We didn't have many friends in the area, we had only been there for a year. The family were all up north. Mum and dad would come down occasionally, and my brother too.

- 45. The children became very independent, because they had to. Toby and Matthew both did ironing, Toby did the cooking. I would be there until 11pm ironing shirts because they had to have them for school. I used to go to work at 7am, the kids were up by then. Toby looked after the house by the time I would come home in the evening Toby would have cooked a meal.
- 46. They didn't want to know what happened to their mother. They saw how upset I was and they decided it was not a good idea.
- 47. The loss of my wife did not really affect me financially. We were fairly well-off. We moved and I sold the house up North. I got a 5-bedroom bungalow with acres of land. Lord Thurso sold me the land. I moved down here in mid-October to find a house and get started. It was very difficult to find one. Then I did but it needed a lot of work because the people who had lived there previously were very heavy smokers. Towards the end of November, the family moved down to join me. I was well paid and I'm fairly frugal so we were fine financially. The children also got their money from their mum.
- 48. Interestingly, I have given a lot of blood. I'm bog standard O but I have some rare antibody called K2R. I've given blood at least 100 times. They used to need it when they were doing open heart surgery because it would help the blood clot.

Section 6. Treatment/Care/Support

49. GRO-C but that was not the health service's doing, it was all private. Nothing was offered because nothing was ever admitted to by anyone.

Section 7. Financial Assistance

- 50. The investigator has informed me of EIBSS. If any useful documentation shows up somewhere along the line I will bear that in mind. It is clear to me that she died from more than cancer.
- 51.1 tried to get hold of her medical records but I was told they have been destroyed. I rang up the GP in <u>GRO-C</u>, but they said the records had been gone for a long time. <u>GRO-C</u> also said they had no records whatsoever. Sobell House said they didn't have anything either. When I moved on, they told me to write to 'NHS England' or something like that.

Section 8. Other Issues

52. This problem seems to have happened on a large scale so that's why I wanted to try to help. If people have tried to cover it up, then I think it needs uncovering. There's a lot of politics behind it, and economics. It is economics that drives most things.

Statement of Truth

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

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Signed	GRO-C
Dated _	26/11/2020