

Witness Name: Colin Foster

Statement No.: WITN4088001

Exhibits: WITN4088002

Dated: 7 September 2021

## INFECTED BLOOD INQUIRY

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### WRITTEN STATEMENT OF COLIN FOSTER

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 06 March 2020.

I, Colin Foster, will say as follows: -

#### Section 1. Introduction

1. My name is Colin Foster. My date of birth is GRO-C 1958 and my address is known to the Inquiry.
2. I am a retired accountant and management consultant, having worked in the public sector, as well as accountancy firms and latterly having my own consultancy business. My employment included a period of around 14 years within the NHS. I live with my wife and we have three grown-up children. I intend to speak about my infection with Hepatitis C (HCV). In particular, the nature of my illness, how the illness affected me, the treatment received and the impact it had on me.
3. I can confirm that I am not legally represented and that having heard the provisions for anonymity, I am happy having my story in the public domain.

## **Section 2. How Infected**

4. In 1976, whilst living in Cambridgeshire, I had a serious motorbike accident at the age of 18. I was taken to Addenbrookes hospital where I was found to have a ruptured aorta. I was fortunate enough to be operated on by Sir Terrance English, who was the top surgeon in his field and who grafted my aorta during a long and complex operation, which involved a series of blood transfusions. Afterwards, I remained hospitalised in intensive care.
5. A couple of weeks after this, I had to be operated on again due to a further leakage in my heart area. This second operation required further blood transfusions, and I have evidence of the blood I received. I made a full recovery following the second operation, albeit, I spent a number of weeks in hospital. (Please see **Exhibit WITN4088002** which incorporates a letter I sent to the Skipton Fund that describes the treatment, including blood products that I received following my accident.)
6. I have no recollection as to whether I consented to any blood transfusion or whether the risks of being exposed to infection from the blood were explained to me. After the accident, I was unconscious and admitted straight to the Intensive Care Unit, and needed the operations and blood to stay alive. Put simply, without the blood I would not be here now.
7. I found out I had been infected with HCV in April 2015. My GP, Dr Wells at Haddenham Health Centre in Buckinghamshire, undertook a general screening of my blood, I believe as part of a routine check-up. After receiving the initial results, Dr Well's phoned me asking whether I had been drinking heavily the night before the blood test and whether I was a heavy drinker. I said no to both and the blood tests were redone. The same results appeared and Dr Well's informed me over the phone that I appeared to have HCV and arranged to see me. It didn't particularly bother me that the diagnosis came over the phone rather than face to face.

8. Dr Wells was very good and after some research referred me straight away to King's College London. Dr Wells was extremely caring and diligent in following up after my HCV diagnosis.
9. I had no idea what HCV was prior to my diagnosis. When Dr Wells explained it to me I was shocked, and my immediate thought was whether I had infected my wife or children in any way. The diagnosis felt unreal, especially as there was nothing noticeable wrong with me and nothing to indicate that I had the infection within my system as far as I could tell.
10. My only route of infection had to be the blood transfusions following my accident. I haven't undergone any other transfusions. I have never been an intravenous drug user nor do I have any tattoos or piercings. I am happily married and have never been medically treated abroad.
11. No information was given to me at the time regarding risks of others being infected as a result of my infection or precaution to take. However, I told my children to go to their GPs and insist on a blood test for HCV. My wife also arranged to be checked. As far as I recall, I don't think I was ever advised on that. GRO-C

### **Section 3. Other infections**

12. I have not been infected with any other infections apart from HCV. After my HCV diagnosis, I was screened at King's College London for HIV. I was relieved that this came back negative.
13. I do not think any other illnesses I have suffered or the treatment of these has been impacted by having HCV in my system. I have been prone to winter colds, perhaps more so than others and I find they can be difficult to shake off. I have always put this down to my asthma which I was diagnosed with at the age of 13 but this could be a result of reduced immunity.

#### **Section 4. Consent**

14. I consented to all treatments, and was not tested without my knowledge. However, I was never made specifically aware that the initial blood test I took included HCV.

#### **Section 5. Impact**

15. I consider myself fortunate that my HCV infection did not impact seriously on my life as far as I am aware. I am glad that I did not find out about my infection until new treatments were imminent and that I did not have to take a decision about having Interferon medication, as I think the impact on my life from having that treatment, from what I have read and heard, would have been very adverse.
16. After diagnosis in April 2015, I started researching HCV on Google as I had no idea of the effect, if any, it had or could have on me. I have always had small aches and pains arising from my motorbike accident, and as such, little grumbles never caused me concern.
17. The only real symptoms I experienced were brain fog and fatigue at various times during my working life. However, when I did suffer in this way, I put it down to stress or other viruses.
18. In June 2015, I was formally diagnosed with HCV genotype 1A at King's College London. Kings were extremely good at explaining what treatments were available, and what drugs were being trialled, and in the process of being approved by NICE. I remember the doctor spelling out the side effects of Interferon, and effectively suggesting that since I was not in any great discomfort that I wait for the new treatments to be approved.
19. Reading about the Interferon treatment scared me the most, particularly the mental health side effects. Had I found out about my HCV diagnosis 5 years

earlier and had to have Interferon treatment, my career would probably have been wrecked.

20. I did experience some anxiety regarding the waiting time for the new drug to be approved and available. I did not know whether waiting a couple of years would be a critical turning point for my liver.

21. In September 2015, I had a Fibro-scan which came back with a score of 4.8. The scan showed that I had no significant fibrosis or chronic signs of liver disease despite being infected with HCV 40 years previously. I felt a huge sense of relief when I received the outcome.

22. At this point, it was getting closer to the new treatment being approved. However, I unfortunately had another road traffic accident during this time, and was in hospital for 5-6 weeks for various things after this.

23. In March 2016, I went back to King's College London. I was then referred to the Hull Royal Infirmary as I was moving to East Yorkshire due to family commitments.

24. Staff at Hull Royal Infirmary were brilliant, and following an initial consultation, I was treated in July/August 2016 with the new, approved treatment, Harvoni. The treatment lasted 6 weeks and consisted of one pill taken daily. I recall hearing that the medication was expensive costing thousands rather than hundreds of pounds. I think that staff mentioned the cost to make sure I was aware of how precious the tablets were and that it was a 'one shot only' treatment and I must ensure that I completed the course.

25. I had regular check-ups during and after treatment, and in November 2016, I received the all clear. I was elated at the news and glad that it had all been so relatively trouble free.

26. From my GP, King's College London and Hull Royal Infirmary I was treated professionally, compassionately and effectively. My only concern was that

nobody in the medical profession then had a consistent story as to what should happened after I cleared the virus by way of follow-up.

27. I remember I was told that I would have annual liver checks, although nothing then materialised. I raised this with my GP who said they didn't know what the protocol was. I was worried to an extent and I persevered with my GP and in 2018 (2 years after I cleared the virus) I was finally sent for an ultrasound.

28. I was concerned as to how badly my liver was damaged, and although I had previously been told that it was not badly damaged, I did not know what this meant for the future. I was uncertain as to whether my liver would worsen, whether it would stay the same, or whether it would improve and I wanted answers to these questions.

29. During the ultrasound I also found out that I had gallstones. There was no discussion as to whether this was connected with the HCV. In early 2019, I had my gallbladder removed.

30. When I moved down to Gloucestershire in 2021, I explained my medical history to my new GP. However, the GP still did not know what should happen with any future monitoring or scans. I also phoned the HCV Trust helpline, but again, they didn't know anything about follow-up treatment either. I did persist as I wanted to know what if any the prognosis would be for my liver in the long term.

31. After this, my GP referred me to a liver specialist, Dr Ashish Sinha, at Gloucestershire Hospital. On arrival, Dr Sinha said that he didn't really know why I was there. He was though extremely kind and did a full set of bloods to give me peace of mind that the HCV hadn't returned. Dr Sinha then put me on the waiting list for another Fibro-scan, and reassured me that my liver was not going to deteriorate any further from the virus.

32. I am currently awaiting the Fibro-scan, and have more questions to ask about my liver, and whether I am more prone to liver cancer and the exact extent of my liver damage.

33.Despite seeing a consultant, I still feel that I do not know how bad my liver damage is now and what consequences that might have.

34.The lack of clear advice, guidance and follow up has affected me the most, and it is my biggest cause of anxiety and concern.

35.I have not experienced any stigma from my friends or family because of my HCV infection. I have always been open about it. I told the staff when I was treated for my second road accident but they said they were prepared. I have told my dentist without having any problems either. I'm glad I am clear of the virus now as the thought of any kind of reservations from my sons and their wives when I went to hug or kiss my grandchildren is not something I want to think about.

36. There has been barely any impact on my career and I don't believe that I have suffered any financial loss as a result of my infection.

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

37.My infected status has not had an impact on my medical treatment. As mentioned, I have always been open with medical professionals about my infection and have not noticed that I have been treated any differently because of it.

38.I can say that I have not been offered any psychological support or counselling, either at the point I was diagnosed or during my treatment for HCV.

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

39.I found out about the Skipton Fund either through my GP or King's College London. The funding aspect was important to me as I thought I may have to go to America to get the treatment that NICE may not have approved, which would

have cost around £35,000. I had researched this option in case it became a necessity.

40. I applied to the Skipton Fund in 2016. After sending in my application form to Skipton I received a response asking for proof of my blood transfusions in 1976.

41. I wasn't wildly happy with this response however, I did not think it was an unreasonable request. I found out who to contact at Addenbrookes regarding my records, and rang them up and then followed up with a letter. After filling in a form, I received a phone call from Addenbrookes stating that they didn't have the medical records I had requested. This was despite the hospital initially referring to the wrong year for the accident and having to be corrected.

42. Having worked as an accountant in the NHS for 14 years, I did not believe that they didn't have my records and asked for more information as to whether my records had been destroyed, archived, digitally archived or stored offsite. After this request, the hospital came back to me and admitted that they did have my records, however, that these were on microfiche. As they couldn't be printed, I was sent the microfiche in the post. **(See Exhibit WITN4088002 as above)**

43. After receiving the microfiche, I sent the relevant information to the Skipton Fund and was approved for Stage 1 funding in March 2017. I received a lump sum of £20,000 and currently receive on-going support.

44. I am fortunate that I knew the system to an extent. I was able to persist with my application for the records. That may not have been the case for someone who was not familiar with the workings of the NHS

45. As I received treatment in 2017, I was fortunate that I did not need to put this money towards funding treatment abroad.



## **Section 8. Other issues**

46. Alongside the skill of the surgeon, the infected blood transfusion that I received saved my life. I am grateful that my liver was not badly damaged considering the time I had the virus, and I am infinitely grateful that I didn't find out about my HCV infection until the new Harvoni treatment was imminent, and that I didn't have to have Interferon. I am also grateful that GRO-C

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47. With regards to funding, possibly I would not have been successful without the inside knowledge that I possessed. If I had not been able to prove that I received the transfusion I do not think I would have received payment and to a degree that is wrong although I appreciate that checks and balances are necessary.

48. My main reflection is that I cannot understand why, once discovered, no active campaign was set up to find out who might have been affected by infected blood, or even why there was no publicity around this matter. I consider myself an informed person and I worked in the NHS for 14 years. I had heard about Factor 8 and haemophiliacs and HIV. However, I heard nothing about HCV, or the risks for people who have had a blood transfusion or blood products in the 1970s and 1980s.

49. An active campaign could have been the difference between infected individuals having a life, or better life, and not. I have moved on numerous occasions around the country and registered with many GPs during my life, and none raised the issues regarding infected blood and the risk of being infected with HCV, when I informed them that I had a major heart operation in the 1970s.

50. I am also concerned about follow-up going forward and the apparent lack of standard protocols for follow-up being in place once infected individuals have cleared the virus. I have had to fight for the piecemeal follow-up I have had and I wonder how many others are in this position and would like to know how their liver has responded and will continue to respond, following treatment, but cannot get that information.

**Statement of Truth**

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

Signed \_\_\_\_\_

GRO-C

Dated \_\_\_\_\_

7/9/21