

# ANONYMOUS

Witness Name: **GRO-B**  
**GRO-B**

Statement No: WITN3025001

Exhibit: WITN3025002-010

Dated: 13 September 2022

## INFECTED BLOOD INQUIRY

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FIRST WRITTEN STATEMENT OF **GRO-B**

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### Section 1. Introduction

1. My name is **GRO-B**. My date of birth is **GRO-B** 1962. My address is known to the Inquiry.
2. I am 59 years old and presently unemployed. I was called to the Bar of England and Wales in July 2002, but for personal reasons, I have never practised. I am unemployed as a result of ongoing litigation against an **GRO-B** owned bank, the causation of which commenced while my husband was on his death bed.
3. I believe the **GRO-B** owned bank unlawfully filed a claim for possession of my property immediately after my husband's death from HCC. I believe I was unlawfully evicted on **GRO-B**. The **GRO-B** has refused to help me while I have been homeless and so I had no option but to relocate to Edinburgh where I lived with family. I waited 5 years before I was rehoused in a flat in Edinburgh, following a complaint I made to the council.

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4. I write this statement in relation to my late common law husband of 33 years, Mr **GRO-B** who was co-infected with Hepatitis C and HIV. He was born in London on **GRO-B** 1957. On **GRO-B** 2012, **GRO-B** passed away as a result of HIV and stage four liver cancer brought on by his being infected with Hepatitis C during the early part of the 1980's. He was 54 years old when he met his untimely and horrific death.
5. **GRO-B** has two sons. The first was born in 1973 to his former wife and was a young child when his father was infected with Hepatitis C. He is now 48 years of age. Our son was born in 1986. He was born after his father became infected with Hepatitis C. He is now 36 years old. During my pregnancy, I lost a twin. I was then tested for non-specific A or B Hepatitis. I was told the test returned a negative result. We had never been informed that we should have had protected sex or indeed that the virus he had was contagious. Both of his sons and other close family members including myself are still trying to deal with both his long and terminal suffering whilst in being and, his sacrificial death.
6. Unless otherwise stated, the contents of this statement are to the best of my knowledge and true. The dates within this statement may vary slightly as it is difficult to precisely remember dates with reference to very limited medical records.

### Section 2. How infected

7. Despite the information contained in the limited medical records that were obtained on my behalf, I am of the belief that **GRO-B** may have acquired a co-infection of Hepatitis C and/or HIV from either blood transfusion or the use of an infected needle whilst donating blood at St Mary's Hospital blood donation bank in Paddington.
8. I believe that **GRO-B** may have had a minimum of 2 blood transfusions between 1980 and 1986.

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9. I believe the first transfusion may have been in 1980 after we were both in a serious road traffic accident in [GRO-B]. We were both seriously injured. I remained unconscious for a few days after I had surgery on both my left arm and leg. I was not released for over a month. [GRO-B] who had injured his chest, pelvis and leg was released a couple of weeks before me, though I am unsure as to all of the treatment he received for his injuries, I believe he may have been given a blood transfusion.
10. Between 1981 and 1984, [GRO-B] went to his GP with a sinus complaint. He had difficulty breathing and suffered with severe nose bleeds. He was referred to St Mary's Hospital in Paddington for an assessment. I attended the hospital with him but did not go into the consultation room with him. When he came out he was in a confused state and rather shocked after being informed by a lady named [GRO-D], that he had non-specific A or B Hepatitis, now known to be Hepatitis C. He was told that he must start treatment of Interferon immediately. He adhered to the demands.
11. When I first learned of the diagnosis I was of the belief that it was some form of food poisoning. [GRO-B] did not know what the implications were either, we were both very confused. I recall having a lot of unanswered questions at the time. The first questions were how and when he contracted it? Why he was tested for Hepatitis when he was referred for a sinus problem? What was non-A or B Hepatitis? And what was the prognosis? To date, I still fail to see any correlation between a sinus infection and Hepatitis.
12. [GRO-B] was told that the condition was not well understood. Like the majority of the population, [GRO-B] and I trusted the medical profession. From the information he relayed to me, he had no idea how he became infected, how to manage it or how the infection could be transmitted to other people.
13. Thereafter, I became pregnant with twins one of which I miscarried during the latter part of 1985. Luckily, I was with my Mum at the time, who was visiting from the United States. Our surviving twin was born in [GRO-B] 1986. After I miscarried,

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I believe I was tested for Hepatitis non A or B. I was told that the test results were negative. We were informed that we could continue to have unprotected sexual relations and that my test had just been a precautionary measure, following the miscarriage of one of my twins.

14. In 1986 [GRO-B] had a motorbike accident on [GRO-B]. He broke his back and injured his foot so badly the bone was visible. He was taken to the Royal Free Hospital for treatment where he remained for some considerable time. I believe he may have had another blood transfusion around this time, during which he may have contracted HIV. The Royal Free holds no records of this accident.
15. However, I am not completely sure when or how [GRO-B] contracted hepatitis C and HIV and I am concerned he could have been infected with a dirty needle when donating blood. [GRO-B] donated blood when I met him in 1979 and I believe he continued to do so until 2005. Therefore, despite being infected from the early 1980's with Hepatitis C and from 1994 with HIV, he was asked to and continued to donate blood. He told me that he was informed that it was safe to continue giving blood as the virus could be removed. We both thought that was peculiar but trusted what the professionals had told him.
16. In July 1994 my son and I travelled to the US to visit family, where we stayed until September 1994. Whilst we were away [GRO-B] started to get flu like symptoms. He went to St Mary's hospital where he had some tests done. After recovering, he joined us in the US for the remainder of the holiday. We continued to have sexual relations as normal.
17. On 31<sup>st</sup> October 1994, [GRO-B] informed me that he had been diagnosed with HIV. Not only was [GRO-B] in a dreadful state, I too was very shocked and concerned. My best scenario was that only [GRO-B] was infected and was going to die in the most awful way, and my worst scenario was that our son had contracted it through me. As far as I am aware, I was not tested for HIV when I lost my son's twin. I have since been tested for HIV over the years and my tests have all returned negative.



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18. I am not aware of all of the information [GRO-B] was given when he was given his results, however as stated above he really wasn't in a good way and was terrified to talk about how he was informed about it. He told me that we could not have unprotected sexual intercourse, or, share a toothbrush or towels. There were also other things that we could not share. To be frank, we were both terrified. He said that the doctors could not determine when or how he had contracted the virus.
19. After [GRO-B]'s diagnosis of HIV, in late 1994 or early 1995, I discovered that I was pregnant. Despite testing negative for HIV, I had no alternative but to have a termination. [GRO-B] and I have lost two children, the first I believe was as a result of his hepatitis and the second was as a direct result of his being infected with HIV.
20. In 1972, when [GRO-B] was 15 years old he started to get tattoos of which he had many. I do not believe that he acquired either of the viruses this way as the symptoms would have appeared a lot earlier than they did. [GRO-B] used to drink beer, usually at the weekends, and when he did, he consumed a lot.
21. From the very limited medical records that were obtained by my solicitors, I understand there are entries that state [GRO-B] was infected with Hepatitis C in 1985 from a single episode of intravenous drug use and with HIV in 1994 from either the same single intravenous drug use or via a sexual transmission during a break with myself [WITN3025002]. Like most victims of infected blood, [GRO-B] was made to believe that both of his infections were caused by something he did. I do not believe [GRO-B] ever injected drugs or would have been infected via sexual transmission.
22. Strangely his medical records also contradict each other. A letter from Dr [GRO-D] dated 9 November 2004 alleges [GRO-B] was co-infected with HIV and Hepatitis C following a 'single episode of intravenous drug usage' [WITN3025003]. A further letter from Dr [GRO-D], a psychiatrist, dated 8

September 2010 states he 'used heroin on two occasions' [WITN3025004]. Even if I believed these allegations were true, these two notes on drug use contradict each other.

23. [GRO-B] did use recreational drugs, however, the drugs he took were not taken intravenously; he either smoked them or took pills. I do not believe he was infected using drugs as his medical records state. Within his medical records from the Royal Free there are notes dated 3 August 1998 that state [GRO-B] denied taking any other drugs other than marijuana [WITN3025005].
24. Within [GRO-B]'s medical records there is an assessment for viral hepatitis dated 17 March 2010 [WITN3025006]. This assessment appears to mark 'Blood products/Blood transfusion' as a risk factor for his Hepatitis infection. I do not understand why this would be marked if [GRO-B] had not received some sort of blood product or blood transfusion. However due to the limited medical records available I have been unable to find a record of him being given a blood product or blood transfusion.
25. I have been unable to obtain full records for [GRO-B] from all the hospitals he attended. In particular St Mary's have been unable to provide any records for [GRO-B] outside of 2010-2012. I recall [GRO-B] was diagnosed at St Mary's and was treated by Dr Main at St Marys from around 1994. Yet there are no records of this? Records received from Kings College evidence that [GRO-B] was under the care of St Mary's as early as July 2004 at the least [WITN3025007]. My solicitors requested a further explanation as to why there were no records for St Mary's outside of 2010-2012. The Imperial College NHS Foundation Trust has so far been unable to provide a response as to why these records are missing.
26. Similarly, when my solicitors requested records from the Royal Free the records were limited and did not cover the 1980s when I recall [GRO-B] having his motorbike accident. The Royal Free London NHS Trust stated that 'any records would not have been destroyed' and as they could not be located, they are listed as a 'No Trace'. I find it strange how [GRO-B]'s medical records from the Royal Free indicate

that he attended the hospital to meet with Professor H Thomas from November 1985 up until 1991 [WITN3025008]. This indicates he attended the Royal Free for his Hepatitis C infection however Royal Free have been unable to provide us with records from this time.

27. When [GRO-B]'s records from Kings College were requested by my previous solicitors, I received 874 pages of records. Whenever my current solicitors requested all records from Kings College again to help me prepare my witness statement, they received 1,223 pages of records.
28. Guy's and St Thomas' NHS Foundation Trust were unable to locate any records.

### Section 3 Other Infections

29. I am not aware of any other infections that [GRO-B] may have contracted. However, it is indicated in a letter to Dr Main dated 23 August 2004 that [GRO-B] also had Hepatitis B [WITN3025009].

### Section 4. Consent

30. [GRO-B] was tested for non A non B hepatitis without his knowledge or consent. He was not given any information until he was told that he was found to have tested positive for the same, even then, the information he was given was very limited.
31. In consideration of the fact that [GRO-B] continued to have normal sexual relations with me after having the test for HIV, it makes me believe that he was not aware that he was having the test as I do not believe he would have put me at risk of contamination.
32. I believe [GRO-B] was used as a guinea pig for research purposes. I am not sure he was the only one. I feel like the whole family was used for research purposes and we may still be being studied. Many years ago, the hospital asked to include me in a trial, however, I refused, but was later diagnosed with Lupus in 2008 and believe they might have suspected this at the time. I often attended appointments

with [GRO-B] at St Mary's. During some of these appointments' Dr Main discussed the correlation of lupus and Hepatitis C with me and suggested I go on a trial.

Section 5. Impact

33. [GRO-B]'s co-infections affected him emotionally, physically and mentally.
34. After being diagnosed during the early 1980's with non-specific A or B Hepatitis at St Mary's hospital in Paddington by a lady named [GRO-D], [GRO-B] was told by her that he had to start a treatment course of Interferon immediately. Almost immediately after beginning the treatment he began to get side effects, some more serious than others. These were suicidal thoughts, jaundice, irritability, night sweats, horrendous nightmares, stomach ulcers and rashes. He felt as though he was going insane, yet he knew that he wasn't.
35. When he complained to Ms [GRO-D] he was told that the treatment took some months to have an effect and that he should persevere with the side effects. After some months he went back to see her and despite the continuation of his suffering with these horrendous side-effects, he was told that he was to continue with the treatment. After further suffering and a worsening of the side effects, [GRO-B] stopped taking the medication. Instead, he started to take large doses of vitamin C, which seemed to help him.
36. Initially, the symptoms of HIV appeared to be what he described as, flu like symptoms. When [GRO-B] was first diagnosed with HIV on 31<sup>st</sup> October 1994, it was as if he'd been given a death sentence, he was terrified, as was I. He felt dirty and wanted to scrub himself; inside and out. He said he wanted to wash his blood out. He was overwhelmingly ashamed of contracting the virus and blamed himself, which I believe led to the most severe bouts of depression.



37. His medical care was taken over by, Dr Janice Main, at St Mary's Hospital. She was the leading HIV specialist consultant and he remained under her care until his untimely death in [GRO-B] 2012.
38. Almost immediately after his HIV diagnosis he was given a drug which I believe was called AZT. After taking it he started to suffer with severe side effects, much like those he had experienced when he took Interferon, such as headaches, night sweats, uncontrollable sweats, inability to sleep and if he did manage to nod off, nightmares. Sometime after this initial drug was prescribed, [GRO-B] was put on a different combination of drugs, but I cannot recall what they were called.
39. In 1998, [GRO-B] contracted pneumonia-like symptoms. He was admitted to the AIDS ward at the Royal Free Hospital and given intravenous antibiotics. This is when we were told that his HIV had developed into AIDS. We were both led to believe that [GRO-B] would not live for much longer after this diagnosis. This is also the time at which the children found out that their Dad had HIV, whenever they entered the 'AIDS ward'.
40. Between 2003 and 2004, [GRO-B] had a liver biopsy and was diagnosed with liver cancer and given 5 years to live. His Hep C and liver care was taken over by, Mr [GRO-D], at Kings College Hospital in London. Again, he was told that he needed to take a course of Interferon, which he was very reluctant to do. He was told that he couldn't have the transplant without taking the Interferon. However, after being told that the drug was a new form of Interferon that did not have such severe side-effects, he agreed to try it. Not long after taking the treatment he suffered with severe side effects and withdrew from the course. [GRO-B] decided to look after his body with vitamins and a very healthy diet, so that he was deemed a suitable candidate for a liver transplant.
41. In 2011, [GRO-B] got an awful rash, which looked like blisters from a burn; it went from his ankle to his knee. Neither, his GP or any of his hospital consultants were able to determine what it was, or why it suddenly appeared.



42. In 2011, [GRO-B] was called twice to Kings College Hospital in the middle of the night to prepare him without notice for a liver transplant; however, on both occasions the transplant was given to someone else. This had a devastating effect on all of us, particularly [GRO-B] who remained severely traumatised until his death. Each time he was called he had to prepare psychologically for the surgery; he feared he might not survive it, yet in the end he was deprived of the chance.
43. We had discussed other options with his medical team at Kings College, one of them being surgery abroad. However, we were told that not only was it very costly, but we were also advised that the last patient that they knew of who had had a transplant in China did not make it back to the UK, as whilst the transplant was successful, the altitude on the flight caused the patient's death. The alternative was to return by way of a boat, but [GRO-B] believed that the Chinese organs were often obtained to order from innocent victims for the purpose of profit, so he decided to wait for a donor in the UK.
44. After so many shocks to his system, [GRO-B]'s health started to deteriorate at a much more rapid pace and his liver started to fail. His anxieties and thus physical and mental health were exacerbated by the actions of both the DSS and his landlord, the [GRO-B] who constantly harassed him with an unlawful increase of rent and the continual threat of eviction.
45. The last Christmas we spent together was in 2011. He had a distended stomach with lots of fluid build-up that had to be drained from his body. My younger son and I had to drain the fluid build-up from his body as there weren't enough nurses available.
46. In January 2012, [GRO-B] was admitted to St Mary's Hospital with liver failure. He had the fluids drained a few times as his liver was becoming progressively worse and Mr Heaton had decided that [GRO-B] could no longer wait for a transplant, as he would not survive the operation. It was at this point that we discussed the other options, such as going abroad.

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47. After being readmitted to St Mary's Hospital, [GRO-B] was told that he was being removed from the transplant list and that he had approximately 6 weeks to live. He was then discharged from the hospital to a Hospice. He was readmitted at the end of March 2012. He stayed there until his death on [GRO-B] 2012 and passed away in hospital. A letter from Kings College Hospital dated 2 April 2012 confirms that [GRO-B] was suffering from HIV and Hepatitis C and Hepatocellular Carcinoma (HCC) at [WITN3025010].
48. [GRO-B]'s infections and the illnesses that resulted from them, affected our family life tremendously. Originally, we planned to move to the USA to be closer to my family who lived there. However, as a direct result of his co-infections, our life plans were crushed.
49. [GRO-B]'s illness and eventual death had a tremendous impact on our family. When I first found out that my twins and I may have contracted non-specific A or B Hepatitis and that's how I may have lost one of my children, I was worried about the effects it may have had on my surviving twin. My fear was fuelled by the fact that no one seemed to know much about the condition and therefore kept us in the dark, not only as to how it was passed on but of the actual prognosis.
50. When I learned of [GRO-B]'s HIV diagnosis in 1994 I was not only shocked and extremely upset, but terrified that my son may have contracted HIV through me when I became pregnant in 1985. It was a terrifying prospect to think that my son would suffer the same unconscionable fate and death as his father. I called my parents who promised me that they would look after my son should anything happen to me.
51. I was tested and had to wait 4 to 5 days for the test results. I was told that my test was negative as a result of which, I was advised that our son did not have to be tested.

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52. After 20 years or so, my belief that [GRO-B] would not succumb to his illnesses began to dwindle, however when he started to deteriorate rapidly and die I was in total shock.
53. All that we had to endure over 30 years of our relationship was constant torture. We felt as if each time we started to relax into and accept the situation another obstacle was thrown at us. It was as though our lives were being controlled and monitored, to see what effect any new obstacle would have on us and how much we could actually endure.
54. A lot of pressure was put on me when [GRO-B] was first diagnosed. He was terrified of dying. I tried to encourage him to drink from a cup that was half full rather than it being half empty. I reassured him that he was not alone, that I would be with him all the way and that we would get through his illnesses together. He truly believed he was going to die and that each birthday, Christmas or some other celebrat[GRO-B] occasion was his last. Understandably, he was extremely depressed and very conscious of being so, which in turn, made him worse. We all suffered.
55. Due to [GRO-B] not being told about being tested for HIV in the summer of 1994, I fell pregnant. Although I was informed that the HIV test they had given me was negative, I was advised to terminate the pregnancy. I had the termination at the Royal Free Hospital. I do not understand why I was advised to terminate my pregnancy. If they thought [GRO-B] could pass on his infections to our unborn child, then why wasn't our younger son tested for Hepatitis C?
56. In or around 2008, I was diagnosed with Discoid Lupus an immune deficient related illness that can cause tiredness, rashes, brain fog, hair loss and other symptoms. I am not sure how I contracted this illness. It may be hereditary, but none of my immediate family has been diagnosed with it. The stress that [GRO-B]'s illness caused me over the years has limited my ability to carry out some very superficial tasks.

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57. I still struggle with [GRO-B]'s loss. I try not to think about things too much as it might trigger me to have a breakdown. Particularly after finding out what really happened to him. Since [GRO-B]'s passing, I have not been able have another relationship. I am not sure I ever will.
58. [GRO-B]'s illness caused the boys a lot of distress, particularly our youngest son. When, in 1998 at the age of 12, he discovered that his father was on the AIDS ward at the Royal Free Hospital he completely broke down. This affected his education. In consideration of all of the demonic press reports surrounding HIV that the public had been saturated with, it was hardly a wonder we were all so traumatised. No-one more so than [GRO-B] who often thought of committing suicide as a way out of his nightmare and the pain he believed he was causing all of those who truly loved him.
59. The whole family are to this day still trying to come to terms with not only the suffering he endured in life, but his premature and untimely death.
60. [GRO-B] did not want to tell anybody about his diagnosis of Hep C or HIV because of the stigma attached to each. I was sworn to secrecy and could not inform any member of his family for several years. His fear was that each and every member of his large family would disown him. I knew this not to be true and told him so on many occasions over the years, but his fear prevailed.
61. [GRO-B] finally succumbed to informing his family who all, each and every one of them, embraced him with open hearts and arms. For the remainder of his life, [GRO-B]'s family gave him all the support they were able to.
62. We were limited as a family, as we were not able to travel to destinations that required vaccinations. This was as a direct result of his infections. Although we were invited by friends on many such holidays, we were unable to go.
63. [GRO-B]'s illnesses and death still profoundly affects both of our boys to this day and I believe it will continue to affect each of them for the rest of their lives. [GRO-B]

GRO-B

64. I believe that my younger son has since been tested for HIV and Hepatitis C and he has been told the results for both was negative.
65. GRO-B's job prospects were affected. He trained as a drugs and alcohol counsellor in 2001; however, due to his infections and deteriorating health he was not able to work consistently in full time or part time employment. He did, however, do a lot of voluntary work for the GRO-B, where he dealt with many people who had contracted a terminal illness.

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

66. I do not believe that GRO-B was given any counselling from the medical profession. I don't think I recall him attending any counselling provided by the NHS. He may have had psychiatric support at St Marys, but I am unsure what it may have been for and there are unfortunately no records from St Marys to help me answer this.
67. GRO-B did attend the GRO-B and GRO-B for support.
68. Some support in the form of counselling was given to some of GRO-B's immediate family members.

#### Section 7. Financial Assistance

69. I am not aware of GRO-B applying for any financial assistance. GRO-B was not aware that he would have been entitled to any such assistance other than from the DSS as he had no idea that his infections were caused by contaminated blood. What truly sickens and disturbs me is that he went to his grave believing he was entirely to blame for becoming co-infected. It was only after I had been alerted to and



read the Penrose Report, that all of the pieces of the jigsaw of our nightmare of an existence began to fall into place.

70. I only became aware of the Macfarlane Trust and Skipton Fund much later on. I have never made an application for financial assistance from any charities or government bodies. I have been informed that any application I make for financial assistance would likely be refused on the grounds that I have not been able to obtain [GRO-B]'s medical records. Quite frankly, the fact that a particular faction of the NHS and/or any other governmental body is intentionally withholding vital medical records from victims who have had to endure a life of torture as a result of the abhorrent criminal actions of the same-said perpetrating bodies is tantamount to ongoing psychological torture and is thus, unconscionable of itself.

#### Section 8. Other Issues

71. An issue, that bothers me significantly, is the fact that I believe [GRO-B] donated blood for many years after he was diagnosed with Hepatitis C and HIV. He gave blood in a large articulated lorry that had been converted into a blood bank, which was housed at the Parade Street entrance of St Mary's Hospital. When I asked him if it was safe to give blood, he told me that he had been informed that the infections in his blood could be removed through a sort of sieving process. I did find that to be rather strange, but I accepted what he had been told by the medical experts and did not question it any further.
72. One particularly disturbing trauma that I endured, during the early morning of [GRO-B] [GRO-B] 2012, was, I believe, a psychotronic message informing me that [GRO-B] was going to pass away later that morning, which he did. This kind of psychological torture is usually carried out by, or on behalf of, government agencies.
73. I personally feel as though our family have and continue to be tortured as subjects of a morally reprehensible experiment. This has gone on for over 4 decades. I have lost my soul mate and husband and our sons have lost their father. Our lives were ruined.

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74. I have tried to obtain my own records in order to cross reference the birth of my son and my miscarriage with dates in GRO-B's medical records. Unfortunately, I have found it difficult to obtain records to enable me to carry out this cross referencing. St Mary's have no records of me at all allegedly and the Royal Free were only able to give me records from 2017. I was also told by my GP that they could not give me all my GP records due to third party records being amongst them. I have found it very tiring having to continually chase both my own and GRO-B's records.

### Statement of Truth

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

Signed GRO-B

Dated 13<sup>TH</sup> SEPTEMBER 2022