

## ANONYMOUS

Witness Name: GRO-B

Statement No: WITN0857001

Exhibits: WITN0857002

Dated:

## INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF GRO-B

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 06 March 2019.

I, GRO-B will say as follows: -

**Section 1: Introduction**

1. My name is GRO-B and my date of birth is GRO-B. GRO-B My address is known to the Inquiry. I have been married to my husband, GRO-B for GRO-B years. I work as a part-time catering assistant.
2. I wish to speak about my brother-in-law, GRO-B: BL and his Hepatitis C (HCV) infection and later cirrhosis of the liver, as a result of a blood transfusion. In particular, I wish to address the nature of his illness, how the illness affected him, the treatment he received and the impact of these infections on his life and the lives of his loved ones.
3. BL was my husband, GRO-B's half-brother. BL also has a sister, GRO-B and a brother, GRO-B. GRO-B was eleven years old when his mother remarried and BL became his half-brother. To them they are full brothers and were a very close family.

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4. I have been advocating for my husband's family since 2018, when the Inquiry began. I am doing this for them and we want [BL] to be acknowledged. I felt so upset as an outsider knowing their story and I wanted to be an advocate for the family. This has been on my brain for a while and I am pleased to provide evidence. I feel like the family have all been too involved to cope with speaking about it all, but as an outsider I want to shout for them.
5. This statement has been written with the assistance of my husband, as well as his siblings and mother. [GRO-B] [GRO-B] has indicated to me that she would prefer that I provide a statement to the Inquiry rather than her engage in the process. I am pleased to do so as I would like [BL] to be heard and counted as one of those that have passed away from infected blood. Accordingly, this statement is based both on my personal knowledge of the circumstances and on my understanding from information supplied by [BL]'s family.
6. Further, I wish to acknowledge that naturally as time passes, memories can fade. I have been able to provide as much information as I can recall.
7. I confirm that I am not currently legally represented and that I am happy for the Investigation Team to assist me with my statement.
8. I also confirm that I have had the option to seek anonymity and the Inquiry's statement of approach has been explained to me. I do [GRO-B] wish to seek anonymity.
9. I can also confirm that the Inquiry Investigator has explained to me the 'Right to Reply' procedure, and that if I am critical of a medical professional or organisation, they will have the right to reply to that criticism.

**Section 2: How Affected**

10. [BL] was infected in 1975, when he was involved in a car accident and was taken to Worcester Royal Infirmary, on Castle Street. [BL] sustained horrendous injuries that culminated in severe head injuries. He was given a

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blood transfusion. I think he was given a lot of blood and around four units. We do not think he understood what was going on during this time.

11. [BL] was in a coma for three months. When he was discharged from hospital, he had to undergo a lot of rehabilitation. He was paralysed from the neck down and suffered brain damage, causing loss of balance and short-term memory. He had to learn how to walk again. He went on to use a frame and a motorised wheelchair.
12. [BL] was never told that he was infected with HCV. Around twenty or twenty-five years ago [BL] came back from an appointment saying to the family that he had "liver failure". I think this was an appointment at Worcestershire Royal Hospital. However, due to [BL]'s brain injury, he did not understand what clinicians were saying or retain information, and no one was with him at the appointment.
13. His mother used to ask the doctors about his condition but, as he was an adult, the doctors would not disclose any information to her. [BL] was not given any more information together with the liver failure diagnosis; they did not tell him he should not drink. It felt like the family were kept in the dark and [BL] was written off.
14. Although, unbeknown to [BL] and the family at the time, derived from HCV, [BL] then developed cirrhosis of the liver, which eventually developed into cancer. He died from this in Worcestershire Royal Hospital, on Timberdine Close, on [GRO-B] 2013. Please see Exhibit WITN0857002, which is [BL]'s death certificate dated [GRO-B] 2013 and signed by Martyn Perks, Deputy Registrar. [BL]'s death certificate details his cause of death being: Hepatocellular Carcinoma, Hepatitis C, Oesophageal Varices, Duodenal and Gastric Ulceration.
15. When [BL] died, [GRO-B] spoke to his GP, Dr [GRO-B] in order to try to understand what had happened and how he developed these illnesses. The family were then told that he had HCV. They were also told at some point that he was given infected blood.



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16. When **BL**'s health deteriorated, the family assumed that this was linked to the road accident, as after the accident, they knew he was not going to live a long life.

### **Section 3: Other Infections**

17. I am not aware of **BL** being diagnosed with any other infections.

### **Section 4: Consent**

18. I do not know if **BL** consented to the blood transfusion. However, he was so unwell at the time that I do not think they thought of his consent. I think they thought they were saving his life.

19. I do not know if he was ever tested for HCV with consent. I also do not know if he was tested for the purposes of research.

### **Section 5: Impact**

*Impact on* **BL**

20. Following the accident, **BL** went to a rehabilitation centre. He could hardly talk after the coma and he had to re-learn how to walk. His family did not think he would be able to walk again but he pushed himself to learn. Although, he mainly used a motorised mobility scooter to get around.

21. He was always quite fit. He would be on a treadmill in the garden shed for hours. He could walk with the support of the treadmill. He tried very hard to get fit after his accident. He tried to help himself a lot. He used the levers on his wheelchair to build his upper body and he would break the wheelchair.

22. He also fought hard for his independence. He was supported by the family but he could do some things, such as he could make himself tea. He was active and on the road to recovery, even though he couldn't support himself fully, he was doing okay.

23. He was very sociable and independent. He was liked in the community. He would speak to all the construction workers as he passed them. He would go to the pub and enjoy himself.

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24. I cannot remember him displaying indicators of HCV. Although, he struggled throughout his life and particularly in the later years after the accident. He would go out a lot, and he would not think about how he would get back home. A family member would have to go to pick him up. He would often fall over, when using the scooter, and bleed. This happened many times.

25. Thirty-six years ago, he was someone who just had an accident. We had no idea of what else was going on inside of him. We thought he was unwell because of the accident, until the very end.

26. BL got progressively worse. A few years after the accident, his stomach got so big that he could no longer use his walking frame, and could only use his wheelchair. On reflection, this must have been due to his liver but none of us knew this. BL was not in hospital for long before he passed away. His health deteriorated so quickly over time.

27. BL lived with his parents in a council estate, until he died.

*Impact on BL's family*

28. When the infected blood scandal came to light, it shocked me to see how many other families were involved. We were not aware of the scale of it until recently as no clinician had ever explained this issue to us. It was traumatising to see this on TV, and it is upsetting to hear that the blood came from American prisoners.

29. When I saw the infected blood scandal in the news, I spoke to my mother-in-law about it. She agreed that I should get involved as they are too sad about what happened to BL to take this on themselves. I wrote to my local MP, who put me in touch with the Infected Blood Inquiry. Before this, we were not told of the options for people in this position.

30. GRO-B and I have been married GRO-B years. For a while, I would visit BL and I thought he was unwell due to the accident. I did not realise how awful his situation was or that he had been infected with HCV through a blood transfusion.

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31. The family have been traumatised and have had a hard life ever since the accident and transfusion. They cared for [BL] his whole life, and it was really hard for them to see what he went through with his illness. The family were close and would travel a lot to visit him in hospital before he passed away.
32. After the accident, his mother, [GRO-B] became his sole carer. [GRO-B] was a nurse and due to her training, she was able to look after him in a way other people would not have been able to, as he required a high level of care. She gave up work to look after him and she did everything for him.
33. She had a lot to deal with; he was a feisty boy and so, she struggled to look after him. If they were given help in looking after [BL] it would have eased the pressure on her. She was at her wits end at times. She would scream; saying she wished he had not come round from the accident. Seeing him struggling, compared to how he used to be, was really hard for her. She was also struggling herself due to her own health issues.
34. His sister, [GRO-B] also helped take care of him. She would dress his injuries and she did a lot for him too. His brother, [GRO-B] would collect him whenever he needed him, and particularly when he had fell off his scooter.
35. My husband felt in a way distanced from it all. He left home at twenty-one and he feels like he was not there for a lot of it. Although, when he visited his parents, he would spend time doing little jobs for [BL]
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36. [BL]'s family did not know that the blood was infected and so, they helped clean it up when he bled. They should have been told.
37. When they found out that [BL] had HCV, his siblings all had their blood tested for HCV and HIV. Waiting for the results was a traumatic experience for them all. Their results were negative.
38. The family were in utter shock when they found out [BL] had HCV. They felt they were let down by the system [GRO-B] had previously asked for information throughout the years about [BL]'s health but the doctors would not provide it.
39. Even now, it is difficult for [GRO-B] and [GRO-B] to speak about it, and they have never had a proper conversation with me and my husband.



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40. It has massively affected **GRO-B**'s life; she was really close to **BL**. She was there when he died, and she will never get over that. She does not have her own family and she never married. She is quite sceptical and has a negative outlook on the world, which I believe is a result of what happened. Since what happened to **BL**, **GRO-B** does not trust doctors. She used to have bad nightmares about what happened, and has not had a happy life and she struggles a lot.
41. Her mental health has been affected. She had a counsellor, but did not feel like it worked for her. She found it hard to relive it all during counselling sessions.
42. **GRO-B** and **GRO-B** have been cautious about sharing **BL**'s story with the Inquiry, as a result of the stigma attached to HCV. They have kept quiet about what happened and have not told anyone outside of the family. They were worried about how it would be received.
43. What happened to **BL** impacted the rest of the family too, and they have all lost their confidence in the system.

**Section 6: Treatment/Care/Support**

44. Due to **BL**'s brain damage, he found it difficult to comprehend and he could not process or retain information. He would attend a medical appointment and come home and not share information with the family. When he was diagnosed with HCV and cirrhosis, he did not understand or comprehend the severity. This left his family unaware of his HCV diagnosis until after he died.
45. The medical staff were aware of his brain damage, and so they should have ensured that he had someone else present at the appointment. As they did not, **GRO-B** believes that the family were kept in the dark and he was written off. There should definitely have been someone with him when he was diagnosed, as well as learning about the risks and treatment. **BL** was not told about the risks of HCV or offered treatment, because it has never been mentioned and he would not have understood.
46. As his family were not aware that he had HCV, we did not know that drinking would worsen it. On one occasion, when **BL** was in hospital close to the time

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of his death, he asked [GRO-B] for a fruity cold drink. She did not know that due to his HCV, he should not have fluids. She got him a drink from the hospital shop, and he vomited a lot of blood as a result. No one had made her aware of no fluids. This was traumatising for [GRO-B] to experience and she screamed.

47. The family did not get any support from anyone. [GRO-B]'s frustration at the situation and not being told anything would come out as shouting or swearing. This was her way of dealing with it. The staff did not like it; I understand why but that was how she dealt with it all.

48. I have spoken to [GRO-B] and she believes that the hospital knew that the blood was infected when [BL] was given the blood transfusion.

49. I believe that [BL] was never offered counselling support, HIV tests or treatment for HCV.

50. Social services provided him with some support following his accident, but I do not think they were aware of his HCV. The council built a special room and bathroom for him in the family home, due to his crash and mobility. Occasionally, a social worker would visit them. Although, they only came around three or four times in total following the accident.

51. We have been unable to obtain [BL]'s hospital records, but we have obtained some of his medical records.

### **Section 7: Financial Assistance**

52. [BL] or the family have never received any financial assistance. We only found out about it through the Infected Blood Inquiry Investigator.

53. However, members of the family are hesitant and sceptical in applying for the financial assistance. They are worried that it would impact their benefits given that they live in a council house.

54. The family did not know that [BL] had HCV until he died and so, they were not able to complete an application form for him. [GRO-B] also had too much on her plate. They did not look into financial help and they would not have known where to start. She also did not have the time or energy to complete an



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application form. The fact that there was financial support available at the time, and they were never told, has really upset me. They were really poor, and the money would have really helped them.

55. [BL] only received a small disability allowance and was provided with a bed and a mobility scooter.

### Section 8: Other Issues

56. The family and I want [BL] s name to be recognised and counted. We want people to know that he contracted HCV from infected blood and he died as a result of it. They should know that it was not his fault, or as a result of anything he had done. He died too young.

57. This is not about compensation, but recognition. We want his life to be recognised, and this is why I am submitting a statement to the Inquiry. We do not want him to be forgotten. It would be lovely if as a result of the Inquiry that a memorial is created with the names of those infected, and to include [BL] s name.

58. It has been such a long time since [BL] and others were infected. This scandal should have been made known sooner. We are concerned that there was a cover-up. We are also concerned that the Inquiry will take a long time. We want [BL] s mother, who is ninety years old, to live to see the outcome of the Inquiry, and what is done for the victims.

### Statement of Truth

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

Signed

GRO-B

Dated

9th SEPT 2022