

ANONYMOUS

Witness Name: **GRO-B**

Statement No: WITN7265001

Exhibits: WITN7265002 – WITN7265003

Dated: 2nd November 2022

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF **GRO-B**

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 20th September 2022. I adopt the paragraph numbering in the Rule 9 request for ease of reference.

I, **GRO-B** will say as follows:-

1. Introduction

1. My name is **GRO-B** My date of birth is **GRO-B** and my address is known to the Inquiry.
2. I am a widow, my husband passed away sixteen years ago.
3. I intend to speak about my infection of hepatitis C, which I contracted from blood transfusions in the **GRO-B** In particular, the nature of my illness and how this affected me and the impact it has had on me.

2. How Infected

1. On the **GRO-B** I was admitted into **GRO-B** Hospital to give birth to my **GRO-B**. There were complications resulting in me having a **GRO-B** delivery and losing a lot of blood. I was given a blood transfusion and can recall one bag of blood was transfused. I do not know what type of blood I was given.
2. On **GRO-B** I was admitted into **GRO-B** Hospital, **GRO-B** to give birth to my **GRO-B** **GRO-B**. Again, there were complications, my baby's shoulders were too large resulting in a tear to my cervix. I was given a blood transfusion that is referenced on paperwork **GRO-B** "Maternity Department – Notice of Admission And Discharge", where it states two whole blood bags were transfused. This document is exhibited to my statement at WITN7265002. I do not know what type of blood I was given.
3. I believe I was infected with hepatitis C by either one or both of these transfusions.
4. In **GRO-B** I began feeling unwell. I was jaundiced, had severe headaches, and recurring bouts of sickness. My body ached really badly and my brain was very foggy. I couldn't focus and lost a lot of weight. I felt fatigued all of the time and felt very weak. I made an appointment with my GP who referred me to a diabetic clinic for tests where they diagnosed me with Type 1 Diabetes.
5. Around the mid **GRO-B** I was still suffering from unexplained debilitating violent sickness, jaundice and migraines that had not got any less over the years. I was referred to an NHS diabetic consultant who decided to change my insulin, believing that this was the problem.
6. I was still feeling unwell and on the next visit to the diabetic clinic, the diabetic nurse asked me if I had a drink problem. I was taken aback by this question as due to my diabetes I rarely drink alcohol. Then, the consultant looked at my medical notes and bluntly told me I have hepatitis C and there was no

treatment for the infection, and nothing could be done. He said it was by luck that they had come across this in my blood tests and he asked me if I'd ever had blood transfusions and I told him I had after giving birth to both of my

GRO-B

7. I exhibit to my statement at WITN7265003 a copy of a letter (GRO-B) where the Consultant (GRO-B) (M.R.C.P) had written to my GP Dr (GRO-B) with the outcome of that meeting, and it very much upset me. It was completely contradictory; it stated that it could not be identified where I had the infection, whilst at the same time acknowledging that I had received blood transfusions and that I was still experiencing chronic symptoms of hepatitis C in (GRO-B). The letter then went on to guess where I possibly could have caught it from which was totally unfounded, and totally unrelated to how someone catches hepatitis C through blood-to-blood contact. I felt really confused.
8. On reflection it is regretful that I didn't have to hand the (GRO-B) maternity paperwork (exhibit WITN7265002) showing the blood bags used, as the overall accuracy of the cause might have been more balanced and accurate from the diabetic clinic. Unfortunately, it was only later whilst trying to find my own answers, I located the maternity puerperium paperwork (GRO-B) that details the x2 blood bags transfused. Having said that though, I assume this detail would have had to be part of my medical records at the time with NHS and therefore they shouldn't have needed me to provide the records that would have helped pinpoint a more accurate source of infection. I've ended up having to do that by myself anyway.
9. I felt partly misinformed and depressed by the letter of the (GRO-B) from the diabetic clinic; almost trying to shut me down, with no offer to look into the matter properly and supply me with an inaccurate opinion of how I could have caught the virus. With the recent Infected Blood Inquiry, I have begun to suspect why that might have been the case.
10. I had never heard of hepatitis C up until then and didn't know what the consultant meant. I later realised the seriousness of this virus when my (GRO-B) (GRO-B) saw it reported on the television. Most of my learning about this

virus has been through initially, the television but also the news reports and further research over the years that we have done as a family.

3. Other Infections

1. I am unsure whether any other infection was passed onto me, however, I was diagnosed with Type 1 Diabetes in [GRO-B] at the age of [GRO-B] with no prior history in the family, so I'm unsure whether my condition may have resulted from undiagnosed and untreated hepatitis C some years before. I have read in recent articles that studies are finding a link between the two chronic illnesses.

4. Consent

1. I believe that I was tested for hepatitis C without my knowledge or consent but I am unsure when this test could have taken place.
2. During the time I was being tested I was not given any information.

5. Impact

1. I was a self-employed [GRO-B] and due to my bouts of illness I had to give up my job in [GRO-B]. My husband had to work overtime to make ends meet. It was difficult and tiring for him.
2. From the moment I was informed that I had hepatitis C the manager of the clinic took over doing my bloods. It used to be the nurses who did them. There were also red stickers put on my file. It made me feel like a bit of a leper. I felt uncomfortable and paranoid.
3. I had to inform my dentist and anyone else who provided me with treatment. It made me feel that I was being treated differently from other patients.
4. Prior to knowing about contracting hepatitis C, my husband and I had a close physical relationship. We were worried that he may also have become

ANONYMOUS

infected until we learned of how contagion was transmissible through blood contact only. We were also worried that I could pass the virus to the rest of the family until we got to know more about how was passed on.

5. My husband went for a test just to be sure and the result was thankfully negative but he wasn't offered any further tests.
6. I only told my immediate family and my sister of my infection. I've always tried to keep it quiet because of the stigma of hepatitis C. It made me feel contaminated and that it was my fault in some way that I became infected.
7. When my **GRO-B** were living at home, I made sure that I followed the one piece of advice received from the NHS on hepatitis C control. I would have my own cutlery and crockery and after use, I would always make sure that I washed them up separately. In the beginning I was fearful of passing the virus on. All my personal hygiene things such as towels, razors, toothbrushes, hairbrushes, soap, deodorants were stored in my bedroom and never placed in the bathroom. It did make me feel awful, it didn't feel like I was sharing my home with my family.
8. During the time I was suffering the chronic symptoms of hepatitis C, which I believe spanned over an approximate ten-year period, I spent some time when on family holidays bedridden after falling ill when abroad. It didn't just affect my enjoyment, but it also affected my husband and my **GRO-B**. One holiday was to watch the Olympics in **GRO-B** in **GRO-B** a chance in a lifetime really, but I had to stay in the hotel as I was too ill to go.
9. I feel I have missed out on some things by not being able to take advantage of life. After the initial diagnosis, we stopped going out with friends and having people round to our house. I just needed to keep myself to myself. I was nervous of cross-contamination until we learned more detail later about how the risks with the virus worked.
10. For my diabetes, I needed to test my own blood, and this was a task. I made sure no one was around and would thoroughly clean up after myself.

11. I became depressed when I felt I had to hide my feelings from everyone. I felt at the time that there was no-one to talk to who understood and I didn't want to burden anybody anyway.

6. Treatment/Care/Support

1. As soon as I was told I had hepatitis C by the diabetic consultant, I was informed there was no treatment. He told me there was nothing they could do and that I should go to see my GP. The diabetic clinic's involvement ended there.
2. After being dealt the shock and upset of being infected, I wasn't offered any information about hepatitis C and how to manage the infection. I wasn't offered any counselling support; the only information that was offered to me was about keeping my personal hygiene things separate and to inform my dentist or other people treating me about the infection, which I did.
3. I wasn't offered any explanation from the NHS about the detail of the blood bags I was given. All the information and knowledge were supplied by myself initially and now with the maternity paperwork dated GRO-B (exhibited at WITN7265002) I'm able to evidence one of the only two occurrences I had blood to blood exposure.
4. During the transfusion procedures, I was never informed of any risks.
5. Every year I remind my GP surgery to carry out a liver function test. This is not booked in as regular after care from my condition from any NHS follow up procedure and after care.

7. Financial Assistance

1. I have received no financial assistance.
2. In the mid 90s, I made enquiries as to whether I could apply to the Skipton Fund to register but whilst going through the process of completing the forms

and requesting my medical notes of previous blood tests undertaken, I was told by the GP surgery verbally and also by the selected answers on the Skipton Fund application form that the practice had filled it in incorrectly and that I did not meet the criteria as I had 'self-cleared' the virus.

3. I am thankful I have kept this in my records and still have the incomplete Skipton Fund application form at home in my filing that clearly shows the discrepancy in the narrative of not being able to initially apply for financial support through that scheme. This is even though 'self-clearing' by the schemes criteria is considered only if it takes place within the first six months of being infected and not when showing chronic symptoms, antibodies and active infection in later blood tests years later as I was - one being a **GRO-B** blood test stipulating both the Abbott test plus Wellcome test as hepatitis C positive.
4. In the diabetic clinic's consultants' letter dated 19th October **GRO-B** exhibited to my statement at WITN7265003 to my GP Dr **GRO-B** it alluded to me contracting 'hepatitis' via my **GRO-B**'s short-term **GRO-B** at the time. This is simply not true; I never came into close contact with her, and she was not thought to suffer from hepatitis and had never been tested for it. Her emigrating to **GRO-B** a decade previous was purely incidental.
5. I believe the clinic went too far in its unfounded opinion from possible sources of infection without being in possession of the full facts as mentioned earlier regarding the puerperium paperwork **GRO-B** exhibited to my statement at WITN7265002 and the blood bags detailed within. Information that the health board should have been in receipt of already, without me having to supply it on its behalf.

8. Other Issues

1. I appreciate that mistakes get made, but in this circumstance, as we learn further through the Inquiry about the malpractice and negligence that is coming out, I think it's scandalous what has happened to me and other people. Why was this allowed to happen? It's awful how my diagnosis was

ANONYMOUS

handled as I could have been told much earlier than I was. Why wait for me to present myself feeling and being so poorly?

2. As mentioned previously, my family and I suffered financial difficulties after I had no option to give up work for ill health, and we were led to believe that financial assistance wasn't readily available.
3. I now believe financial assistance should have been available for anybody infected regardless, even if someone self-clears within 6 months with no treatment or after numerous years and after decades of trauma like I did, because we were actively infected within an NHS healthcare facility through unscreened, contaminated blood.
4. I feel that up until now I have been 'cherry picked' not to access funding from previous schemes. I am hopeful that I will get recognised in my latest endeavour for compensation. I have suffered the same symptoms as anyone who received treatment, but I wasn't offered any, because I was told there wasn't any treatment available for me. I would have accepted treatment if it had been offered and I would have liked to have had the treatment years before my late diagnosis that finally explained to me why I had been feeling so rotten for so many years. How is this fair?

ANONYMOUS

Statement of Truth

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

Signed..

GRO-B

Dated... 2-11-22