Witness Name: GRO-B
Statement No.: WITN7391001
Exhibits: **WITN7391002**
Dated: 10 November 2022

# INFECTED BLOOD INQUIRY

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## WRITTEN STATEMENT OF GRO-B
## ANONYMOUS

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 27 October 2022.

I, GRO-B will say as follows: -

### Section 1. Introduction

1. My name is GRO-B. My date of birth is GRO-B 1966 and my address is GRO-B Staffordshire GRO-B.

2. I last worked just before the first Covid-19 lockdown in March 2020. Though not officially retired, I am no longer able to work due to ill health, primarily COPD (chronic obstructive pulmonary disease) and complications connected to the accident and subsequent operation I underwent in 1990. This was when I received the contaminated blood transfusion, which this statement relates to.

3. I intend to speak about my infection with hepatitis C ("HCV") as a result of this blood transfusion. In particular, the nature of my illness, the treatment received and the impact it had on me and my family.

4. I am providing this statement alongside my wife GRO-B and I have been together since 1984, and we married in GRO-B We have one child together and one step-child from GRO-B s previous marriage GRO-B also had another child from her previous marriage, who I cared for and loved as a son, who very sadly died aged GRO-B after being hit by a car in GRO-B GRO-B

5. The anonymity process has been explained to me and I wish to remain anonymous.

6. I should say that my memory around facts and dates is very hazy. I have no records or letters to assist me, apart from my application to the Skipton Fund, which is exhibited in Section 7 of my statement.

## Section 2. How Infected

7. Around late October or early November 1990, I was having a few drinks at home with a friend. We had a dog at the time which used to run out into the street if a door was left open, usually by one of the kids.

8. On this particular occasion, our dog had got out and I went to look for him. Down the street I saw this Pit Bull terrier tearing my dog to pieces. This dog belonged to one of these two blokes who were well-known on our estate for roaming the streets with this Pit Bull looking for trouble. It was known for attacking other dogs.

9. I saw red and immediately, my mate went to take care of my dog and then ran after the two blokes. I hit the first one and chased the second one into his flat. He slammed and locked the door behind him so, in my state of rage, I punched through the door window. The window had metal wiring inside it and this caused a huge cut in my right arm around my elbow, peeling the skin all the way back along my upper arm.

10. We didn't have a phone at home then so we couldn't phone for an ambulance. Instead, my mate drove me to the local cottage hospital in GRO-B the name of which I cannot recall. It's a care home now.

11. It was a long wait to be seen and I had evidently lost a lot blood. They put bandages around the cut and called for an ambulance to take me to Stafford Hospital.

12. When I arrived at Stafford Hospital, I was immediately taken down for emergency surgery. I remember being told that I received 5 or 6 units of blood during the operation. I was in hospital for 9 to 10 days afterwards.

13. The amount of blood I lost was so severe that the doctors later told me that I probably would have died if I wasn't such a big bloke. I still have a huge scar running from one side of my right elbow around the front and past the opposite side of my arm.

14. I wasn't working at the time, which was just as well because it took me two years for my arm to fully heal. I was a welder by trade and work was out of the question.

15. The arterial injury in my arm was fixed by inserting a bit of tubing. In February 2020 I had another operation on my arm due to a blockage in the tubing that been fitted back in 1990. My fingers were all black prior to the surgery. This operation was successful in restoring the tubing in the artery. I still get occasional numbness in my hand and arm as I have a 50% reduction in blood flow.

16. In early 1997, six or so years after the operation in late 1990, I received either a phone call or a letter from my GP informing me that I needed to have a blood test. I wasn't told what this was for.

17. I went for the blood test at my GP surgery and I received a call a week or so later asking me to come into the surgery. My GP said on the phone that there would be a top doctor from the blood bank in Birmingham with him to see me.

18. I went to this appointment, joined by my wif GRO-B along with my GP and this doctor from the blood bank. I cannot recall this doctor's name but he was in his late 60s then, so I assume he would be dead by now.

19. At this appointment, I was informed that I had hepatitis C. I didn't know what this was, although I had heard of hepatitis. I just thought that hepatitis went in one end and out the other, and certainly didn't think it was a potentially fatal illness.

20. The top doctor told me not to worry because it's not AIDS. He explained that HCV could be passed on through blood to blood contact but, was at pains to distinguish it from AIDS.

21. I was in a state of shock at being told this. I felt completely normal and had no symptoms whatsoever. I was working 12 hour shifts and night shifts at the time so I did get tired, but this was understandable. I couldn't believe what I had been told.

22. The top doctor told me to cut down on alcohol and said I would next hear from the consultant hepatologist at Queen Elizabeth Hospital ("QEH") Birmingham.

23. Before he left, I asked the doctor how I had come to be infected with HCV. I was told that it was the blood that I received in 1990.

24. The doctor said it came from a blood donor who had since tested positive for HCV, and this same donor had been donating blood since the 1960s. I couldn't help but wonder how many people he had infected, not to mention whether I could have unknowingly infected someone in the period between contracting HCV and my diagnosis. Not that I was a blood donor

25. He explained to me that blood had been screened from about a year after I had my blood transfusion, which would have prevented me from being infected, had it been used. I understood from this conversation that

there was a test to screen blood donations available in 1990 but the UK government or NHS refused to use it because it showed too many false positives.

26. He said that it was believed the test would decimate the blood supplies in the country because of how many positives it was showing. As a result, the blood I received wasn't screened for HCV when a screening test had been developed but not put in place.

27. I just accepted this at the time, although it angers me to think that the blood I received could and to my mind should, have been tested for HCV before being given to me.

28. I was insistent tha GRO-B hould also tested for HCV. I had been told that it could be passed on through intercourse. This was quickly arranged an GRO-B ad the test shortly after my diagnosis. This returned a negative result two weeks or so later. I think I was probably more worried than GRO-B I couldn't bear the thought of unknowingly having infected my wife with HCV.

29. I withheld my HCV diagnosis from my kids, who were of school age at the time. I told them when they got older and they were also tested, both were negative.

30. I was referred to Dr Mutimer at QEH Birmingham. I saw him within two months of my HCV diagnosis. I wasn't particularly worried about HCV when I first saw him because I didn't really understand it.

31. Dr Mutimer explained everything to me. He was a really good consultant; I couldn't fault him at all. He answered any questions and kept me well informed throughout my treatment.

32. At this first appointment in 1997, Dr Mutimer said that there was a treatment available. This consisted of three different drugs that were injected. He said the probability of success for this treatment in clearing

my particular strain of HCV was 15%. He said my strain was the most difficult to treat.

33. I asked Dr Mutimer what would happen if I underwent this course of treatment and it was unsuccessful. He said it could accelerate the HCV. He also intimated that the side-effects of this treatment were especially severe.

34. I took all of this into account when deciding to refuse this treatment. I had a wife and children to look after. My priority was to work as hard as possible to earn as much as I could in case I died. I felt fit and healthy, so why would I want to put myself through all those horrible side-effects with such a low chance of it succeeding? All of this led me to decide against this treatment.

35. Whilst under the care of Dr Mutimer, I was monitored by having a liver biopsy every five years. I remember the second of these was especially painful. It felt like I was being stabbed in my side. I don't think they froze the entry point properly because I was in excruciating pain. I generally had to lie on my back for six hours after each biopsy.

36. My final liver biopsy, around 2017 or 2018, showed that I had scarring of the liver. I think this was the reason why I was offered a new treatment in either 2017 or 2018.

37. Dr Mutimer explained that this was a brand-new treatment that only involved taking tablets, as opposed to injections, and it had hardly any side-effects. He said it had a 98% chance of successfully clearing the HCV infection.

38. I began a three month course of tablets, I don't recall the name of this medication. I took two tablets in the morning and one at night religiously. The nurses said that if I missed a tablet, they would take me off the treatment, it was that crucial. It was very expensive and they said there was no point in me taking it unless I was fully committed to it.

39. I set alarms to remind me to take the tablets. During the course of treatment, I was tested regularly to see how it was affecting my viral load. The first test was after one week and then I was tested every month. All these tests showed me viral load to be declining.

40. After completing the three month course, I was tested every month for a further 6 months. There was no infection level identifiable after six months. I was informed of this via GRO-B who took the phone call whilst I was at work. I felt like I had won the lottery when GRO-B told me I had cleared the HCV.

## Section 3. Other Infections

41. I do not believe that I received any other infections as a result of the blood transfusion I received.

## Section 4. Consent

42. I do not believe that I have been tested or treated without my consent. When I was tested for HCV, I was simply told that I needed to have a routine blood test, which I consented to. I was not told that I was being tested for HCV, although I have no doubt now that the reason was that they knew that I had received blood from an infected donor.

## Section 5. Impact

43. We lost our son after he was hit by a car in GRO-B GRO-B In many ways, I think this tragic event compounded the mental affect my HCV diagnosis and what this meant for me. It began to weigh on my mind a lot more, worrying that I may die early, leaving GRO-B without me.

44. I was working away during the week at the time and GRO-B was struggling with this, having just lost her son. I began to get increasingly stressed and this ultimately descended into depression. I experienced anger and frustration, which regrettably I sometimes directed towards my wife, when I was at home.

45. Our family suffered a number of serious medical issues and traumatic events, all of which increased my mental suffering. I think this was aggravated by my HCV infection.

46. Once I properly processed the HCV diagnosis, I felt like I was on death row. I would describe it as like being fitted with a noose around my neck, waiting for somebody to drop the trapped door. This was all in the back of my mind and felt like a big weight on my shoulders.

47. I lost a few friends because of my HCV. I confided in some close mates who I trusted, but they stabbed me in the back by telling other people about it. I felt betrayed.

48. At the time, HCV was closely associated with HIV/AIDS. After learning that my friends had told other people, I felt stigmatised. I became paranoid, feeling as though people were pointing at me when I walked down the street. I didn't know who knew and suspected everyone.

49. I never informed my employer about my HCV infection. I was told that I only had to inform medical professionals or insurance companies. I think if I had told my employer, I would have been sacked. If I ever had an accident at work, I made sure others put gloves on to ensure they didn't contact my blood. I just acted like it was the proper thing to do to prevent infection anyway. AIDS was still big in those days.

50. At home, I was very strict in making sure my wife and kids avoided contracting HCV. My children knew to run away if I cut myself and my wife knew to avoid my blood, as well as razors and toothbrushes. I was terrified of infecting them.

51. I suffer with a number of health problems, including COPD and sleep apnoea. I also had double pneumonia a few years ago. I am unable to say whether this is connected with my HCV infection. I have not worked since before the Covid-19 lockdowns in 2020, primarily as a result of my ill health.

## Section 6. Treatment/Care/Support

52. I have not faced any difficulties in obtaining treatment, care or support in consequence of my HCV infection.

53. I was never offered counselling or psychological support in respect of my HCV infection. I think with the benefit of hindsight that it would have been nice to know that it was there as an option. I think I probably would have benefitted from it. At the time, I probably wouldn't have accepted it but maybe the persuasion of a doctor would have worked. Times change and it is now not unusual for men to accept this type of treatment. I think it would have been a good idea to have been given the option.

## Section 7. Financial Assistance

54. Dr Mutimer informed me of my eligibility for the Skipton Fund at one of my routine appointments. Dr Mutimer completed the form and I just signed it. He did it all and submitted it on my behalf.

55. I enclose my Skipton Fund application dated 18 September 2006 as exhibit **WITN7391002**. This shows that the form was received by the Skipton Fund on 11 October 2006 and payment was authorised by Administrator Nicholas Fish on 13 October 2006. There is a further stamp indicating that I was paid on 30 October 2006, referring to the first stage payment of £20,000.

56. I wish to draw attention to part 4A of my Skipton application, completed by Dr Mutimer, which reads 'Work injury with arterial damage to right

forearm- then identified by HCV lookback by BTS/donor shown to be HCV+ve'. I was too embarrassed to tell Dr Mutimer how I actually damaged my arm, although I believe this section to be significant as it shows beyond doubt how I came to be infected with HCV. Part 4A (ii) also indicates that records existed evidencing this, both from Stafford Hospital and the blood transfusion service. I have not made any attempts to request my medical records, and any letters, correspondence or records that I used to hold have been destroyed. There was no reason to hold onto them.

57. After receiving this first stage payment, I never received any further payment or correspondence from the Skipton Fund.

58. I had not seen or heard anything about the Infected Blood Inquiry until my son told me about it this summer just gone. When I spoke to the Inquiry investigator during our initial telephone conversation, he asked me about the Skipton Fund. When I explained that I received £20,000, the investigator asked me about monthly payments. I have never received any form of monthly payment, nor was I ever informed that I was eligible to receive this.

59. I have not changed my address since the Skipton Fund application was made in 2006. The Inquiry investigator provided me with the contact details for the English Infected Blood Support Scheme ("EIBSS") and I got in touch with them.

60. EIBSS said that I had fallen through the net. No explanation or apology was offered for this. They said I wasn't the only one to have been 'forgotten' in this way and that they would resolve it. I can't help but question how many other people this has happened to. I would imagine there are many others who have been forgotten and who simply have not been made aware of this. Had I not contacted the Inquiry I would never have known.

61. The lady from EIBSS said I would receive a £30,000 payment and a back-payment totalling all the payments that I should have received as monthly financial support payments since my application was accepted in 2006.

62. I was also told that I would be eligible for the £100,000 interim compensation payment recently recommended to be paid to claimants.

## Section 8. Other Issues

63. I believe it is wrong that a test was available for HCV in 1990 but not used. This could have prevented me from contracting HCV from an infected donor.

64. I also believe it is wrong that it took over six years for me to be informed of my HCV diagnosis, in late 1997, after receiving the blood transfusion in 1990. Perhaps they knew or ought to have known sooner, and informed me sooner. I question how many people could have been infected during this period.

## Statement of Truth

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

Signed GRO-B

Dated 10 11 2022.