1 Tuesday, 27 September 2022 1 the test, and went, "Oh, by the way, you have von 2 2 (10.00 am) Willebrand's", and that's how I was -- found out. SIR BRIAN LANGSTAFF: Good morning, all of you. Thank you 3 3 I believe that was '83, near the end of '83. 4 for being here. Mary will invite you each to take the 4 MS FRASER BUTLIN: That was when you were about 12? 5 appropriate oath before Ms Fraser Butlin begins asking 5 MR KEVIN ROBERTS: Yeah, 11 probably -- I was 11 then and 12 6 the questions. 6 in '84, so, yeah. 7 MR KEVIN THOMAS ROBERTS (affirmed) 7 MS FRASER BUTLIN: At that point you were having a lot of 8 MS MARLENE ELIZABETH NEVE (sworn) 8 heavy nosebleeds. 9 MR STEPHEN JOHN TOWSEY (affirmed) 9 MR KEVIN ROBERTS: The nosebleeds came a little bit after 10 MR WAYNE GATHERCOLE (affirmed) 10 that. I probably was nearer -- the end of '84/'85 I got Questioned by MS FRASER BUTLIN 11 11 prolific nosebleeds, yes. 12 SIR BRIAN LANGSTAFF: Yes. 12 MS FRASER BUTLIN: You then needed another tooth extraction, 13 MS FRASER BUTLIN: Thank you, sir. As we did yesterday, I'm 13 for which you were given cryoprecipitate. 14 MR KEVIN ROBERTS: I didn't actually need another tooth going to ask each witness various questions individually 14 15 15 extraction. I was -- after I was diagnosed with and then we will move to a time when we discuss things 16 16 von Willebrand's, I don't think it was much more than more thematically. 17 Kevin, if we can start with you. You have mild to 17 a month afterwards, got a letter through: We would like 18 moderate von Willebrand's disease? 18 to let you come in to have these other two wisdom teeth 19 MR KEVIN ROBERTS: Yes, that's right. 19 out. When -- it didn't hurt or nothing. MS FRASER BUTLIN: That was diagnosed in 1984? 20 So, being naive farmer boys, never questioned --MR KEVIN ROBERTS: Probably a little bit before. It was 21 21 my father never questioned, I never questioned doctors, 22 during a tooth extraction at a primary school I was at 22 and he said, "In you go, boy, go and get these done. 23 and it bled and the dentist at that time recommended 23 They want you in, you go and have it". 24 that I get checked, because it was quite a lot of 24 MS FRASER BUTLIN: In order to do that tooth extraction, you 25 25 bleeding, and from that they took me to hospital, did had cryoprecipitate before and after the operation? MR KEVIN ROBERTS: I had cryoprecipitate for the operation. 1 1 came back in -- I remember it so well -- and he says, 2 2 I remember it vividly because of the big "Oh, Mr Roberts, your son, yeah, well, it is okay, don't 3 3 horrible looking yellow bag. I went, "Whew". Yeah, worry about it, he's having growing pains. Everyone 4 quite scared of that. And I was given that prior to the 4 gets it. It's growing pains. His bones are outgrowing 5 5 operation. And found out very recently that I was given his body, that's what the joint pain and weakness is. 6 three hits of Factor VIII in 24 hours after the 6 Drink plenty of water, but especially drink lots of 7 7 Indian tonic water, and he will be fine". operation. 8 MS FRASER BUTLIN: And that's when you believe you were 8 Of course we left the surgery, the old man goes, 9 9 "Swing of the leg, boy, go on, do your chores, what's infected with hepatitis C? 10 MR KEVIN ROBERTS: Yes. 10 the matter with you? Everyone feels like that, that's 11 MS FRASER BUTLIN: Why is that? 11 normal. You've been just told by the doctor. It's 12 12 MR KEVIN ROBERTS: Literally between three, four weeks after normal". 13 that operation, wow, it hit. I was bright yellow, woke MS FRASER BUTLIN: In 1989 you had a tonsillectomy. 14 up bright yellow. Unbelievably weak. So weak I could MR KEVIN ROBERTS: Yes. 14 15 hardly lift my arms, walk. Bed sweats. Joint pain like 15 MS FRASER BUTLIN: There is some uncertainty, I think, about 16 people putting glass into my joints. It's horrific. 16 what treatment you received then, whether it was 17 17 Factor VIII or -- as well as DDAVP or exactly what was But bright yellow, very bright yellow. Even my parents, 18 who are farmers, who are normally -- you get a cold, 18 given at that point. MR KEVIN ROBERTS: So the tonsillectomy in July, my first 19 "took" the back of your ear, "Get on with it, you'll be 19 20 20 all right" manner, they went, "Actually, we were guite one, was -- look at what we found in the record -- was 21 worried about you, you look very ill", and they took me 21 a -- trialled -- and it's big writing, it's "Trialled 22 to my GP, Dr Cath. Said the doctor, sorry, "He does 22 for DDAVP". I went, "Ooh, hang on, 'trialled', that's 23 look ill, he looks quite yellow, right, we better give 23 a first time". I went, "Ooh, okay", but Factor VIII was 24 24 him some blood tests", and he said, "Come back in on standby in case the DDAVP doesn't work. My 25 a week's time and we will tell you the results". We 25 doctors -- and haematology doctors all along have said

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1	to me, "You was never given Factor VIII". What	1	sweating profusely, could not get enough oxygen.
2	I obviously wasn't given DDAVP until 1989, so that left	2	I remember being so, so weak. And I was pushing because
3	a big hole for me from '84 to '89, which is yeah.	3	this was normal, to feel this way was normal. I was
4	That's no, so I knew I was given Factor VIII.	4	told by my doctors, "This is normal, there's nothing
5	I always remember the little balls(?). But that kind of	5	wrong with you". I was bed wetting. I was so weak in
6	proved I was never lying. I knew I was right all along.	6	the mornings I had to put my clothes on the floor, roll
7	And my own blood doctors didn't know better because of	7	out of bed and slide my clothes on while I was on the
8	these missing records.	8	floor and then crawl up, go down the stairs, try and eat
9	MS FRASER BUTLIN: Can I ask you to slow slightly with your	9	something for breakfast, go to school dragging my feet
10	speech. We have some brilliant stenographers taking	10	because that is normal. That was normal. That's how
11	a note of everything and we just need to slow down	11	everyone felt in my head. This is normal to me.
12	slightly.	12	Brain fog, wow. Schooling, that didn't go very
13		13	well for me. Didn't go very well at all because I could
14	MS FRASER BUTLIN: During your teenage years, can you tell	14	not remember things. I would be given a date or a math
15	us what your health was like?	15	equation and as soon as I turned my head from the paper
16	MR KEVIN ROBERTS: Wow, yeah. Shocking. I'm a farmer boy.	16	I couldn't remember it. It just went. Reading stories,
17	My dad is very, very old school, tough, hard, and he	17	I could remember a story, I couldn't remember the names,
18	expects you to do your chores, because he wanted his	18	the dates, even what the book was called. I felt thick.
19	sons to be his mirror, understandably. I was weak.	19	Very thick. And because of that I was treated thick.
20	When I first went to comprehensive school, there's	20	Again, I thought it was normal. I thought it was
21	a cross country run, and out of the five years, my first	21	just me. I realised later it wasn't.
22	year there I was the fourth fastest guy at running this	22	MS FRASER BUTLIN: And how did you come to find out you had
23	cross country. The second year I did it, I was 64th,	23	been infected with hepatitis C?
24	and I did everything I could to push myself. Collapsed	24	MR KEVIN ROBERTS: I went into one of the normal
25	at the end of the race, panting, breathing hard,	25	three-monthly, quarterly blood tests and got pulled in
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1	for the bloods and something that I overlooked for	1	"We are not only testing you about your bloods, we
2	many years. Every time I went there the nurse taking	2	are testing you because we think you might have HIV."
3	the blood would step up when they would see me coming	3	I went, "You what?"
4	and a new nurse would come in, to a little room, and she	4	He went, "Don't worry about that". He says, "You
5	wore a mask, gloves, apron. PPE. I never thought about	5	have got hepatitis C."
6	that until I talked to the other victims. And they took	6	"What's hepatitis C?"
7	my bloods.	7	He goes, "Oh, you really don't know, do you?"
8	And she goes, "All right, Mr Roberts, yeah?"	8	I said, "What's hepatitis C?"
9	She was always very softly spoken. Goes, "Right,	9	He said, "You've got a 50% chance of dying before
10	here we go, ooh, I've got a few here today, 14 test	10	the age of 25, you've got a 45% chance of curing it with
11	tubes."	11	this drug called interferon, and you have got a 5%
12	l said, "14?"	12	chance of curing it yourself. Here's a little leaflet
13	She said, "Yeah, here we go."	13	on hepatitis and I advise you don't drink alcohol
14	think that's nice. 14! I'm a biggish lad, so	14	anymore, and we will give you your HIV results in the
15	I thought I could take that.	15	post in a few weeks' time. Have a good day."
16	And I seen the doctor at the end, "Have any	16	MS FRASER BUTLIN: And those HIV results arrived in the
17	queries?"	17	post?
18	And I said, "Excuse me, Dr Kreuger" his name,	18	MR KEVIN ROBERTS: They arrived in the post. Prior to that
19	Dr Kreuger and I said to him, "What are these test	19	I got to the car and I told my father what I was told by
20	tubes for? I know I'm a von Willebrand's, I was	20	the doctor. I said, "You know those years ago when
21	a haemophiliac and I need a few test tubes for that,	21	I was really, really ill and you were told it was
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22	but 14?"	22	normal, I was in trouble, Dad". I said. "I have iust
22 23	but 14?" He goes, "I know it seems a bit excessive, but	22 23	normal, I was in trouble, Dad". I said, "I have just been told I may not be here at 25". Dad is strong. He

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hang on a minute, don't you know?"

"Know what?"

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is not a -- he is not an emotional guy, he is not a very

tactile person. He looked at me, went quiet We drove

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1 home, the 50 minutes it took from Truro Hospital to my 2 home, and I couldn't hear a thing, I couldn't even hear 3 the car running, it was "boff", blank. Not a word was 4 said, all the way home. 5 I got out of the car, thought I'd better tell my 6 mum. "Mum, I've got something to tell you." 7 "What's that, love?" 8 "I have got hepatitis C. Didn't know what it was. 9 They said I might die from it." I said, "Not only that, 10 they tested me for HIV, AIDS". She waited about 10, 11 15 seconds and she looked me straight in the eye and says, "If you've got AIDS, I want you to leave the 12 13 house. I don't want you infecting your brothers". 14 I looked at her, never said a word, went upstairs and 15 16 The envelope did arrive, about eight days, nine 17 days later. I couldn't open it for three weeks. 18 19 leave the house and not infect my brothers. 20 MS FRASER BUTLIN: You opened it and thankfully it was 21 negative. 22 MR KEVIN ROBERTS: I didn't understand it at first. I had 23

I didn't want to know, because if I did, I would have to to read it about 50 times. What's it mean? When it says O positive, I think that's my blood, I'm not sure. I wasn't sure if the O positive was my blood or the

results. But yes, thankfully it was.

MS FRASER BUTLIN: In terms of hepatitis C, did you tell anyone about the diagnosis other than your immediate family?

5 MR KEVIN ROBERTS: Family knew. I threatened my brothers 6 that if they told anyone I'd kill them, and I never told 7 anyone. I was scared, terrified. I was 18 years old. 8 It was in the news. I knew I would be ostracised. It's 9 a small community. Everyone knows everyone. No, never 10 told no-one.

11 MS FRASER BUTLIN: Once you reached your twenties you 12 started to feel a bit better, a bit stronger, and things 13 started to improve.

14 MR KEVIN ROBERTS: I did. It was literally 17/18 years of age when I was told. I started picking up a bit. But by my 20s, yes, physically I was stronger. I felt stronger. My memory was still poor but, yes, I definitely felt stronger. I was able to do a man's work. And more so, I believe. I was a strong lad. It was coming back to me. And I felt very fit. I was socialising a lot. I was socialising probably more than I should because I didn't think I had long, so I did socialise a lot more, and, yes, I did feel really, really good, really good.

MS FRASER BUTLIN: You think that's probably when you were 10

1 clearing the virus.

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2 MR KEVIN ROBERTS: I believe that's when -- yes, I believe 3 that as the virus was being fought I was getting better, 4

5 MS FRASER BUTLIN: When were you told you had cleared the 6 virus?

7 MR KEVIN ROBERTS: I was 23 years of age. Again, done my 8 blood testing. Doom and gloom, oh, here we go, what's 9 he going to say today? Go in to the doctor, Dr Kreuger 10 again, and he goes, "Hmm, all right, Mr Roberts, well, 11 got a bit of news for you today". I said, "Oh, have 12 you?" He goes, "I don't know how you've done it but 13 it's -- we can't find it." I said, "Find what?" He 14 said, "Your hep C. It is untreatable". He said, 15 "You'll always have the antibody in your system but, 16 well, the good news is we think you're okay, you're 17 going to be okay". I went, "Oh, okay, thank you". And 18 that was that.

20 MR KEVIN ROBERTS: I did. I seen it in the newspapers about 21 I wasn't alone anymore. I found out about the Penrose 22 Inquiry. I read it in the newspaper. I wasn't a big 23 paper reader but this headline caught me. I don't know 24 how I ended up reading it. I went, "Hang on, there is

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19 MS FRASER BUTLIN: You applied to the Skipton Fund.

a thing called the Penrose Inquiry. There's other

1 victims who were infected". I think it had a mention 2 about the Skipton Fund. I went, "Well, that's me, I was 3 infected".

> So I think the next time I seen my doctor I asked him about this Skipton Fund, and he said, "Well, no, you're fine, look at you. You are fine". I said, "Yeah, but I was one of those infected, wasn't I?" He goes, "Well, yeah, but I don't think you'll get it".

> > "But it says I should."

And I didn't think I was going to get an endorsement from him, that's for certain. But I filled it out myself, the majority of it. I don't think he did a lot to it. And we sent it off and it was refused.

MS FRASER BUTLIN: The application was refused and that was 15 because you had no proof you had had hepatitis C for a sufficient length of time because there weren't any records available.

MR KEVIN ROBERTS: The records, yes, for some reason, I had a folder in the hospital, and it was like this (indicated). And it's gone down to that (indicated). And I think when I got rejected I asked for my records. I paid the money to get them, and when they came back and I went through them, it was just missing, absolutely missing. I went, "Where's it to? Where's these

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1 operations that I had? Where's the treatments I had? 2 Where's all these tests? I was being tested every three 3 months. There's no tests. Where are they?" But that's 4 before I knew you could get help to look for records or 5 how to ask officially for records. I just got sent what 6 they decided to send me and it was not there. It was 7 just missing. 8

MS FRASER BUTLIN: You have also applied to EIBSS and been refused there as well.

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10 MR KEVIN ROBERTS: Yes, I done the Skipton twice. Got rejected. One on -- it was "You didn't have it bad enough", and one, "You didn't have it long enough", was their excuses I believe. I just remember those two bits. And then EIBSS, I only applied for EIBSS when this Inquiry started and I found out about it. And speaking to the other victims, I found out I am a victim and they said, "You're definitely eligible. You're definitely eligible", and I said, "Okay, I'll apply".

> Again, I did the majority of the work myself, tried to get the endorsement from the blood doctors who did a terrible endorsement. Absolutely shocking. Again, sort out these missing records, including the GP, which was even worse. Massive -- like the hospital has got sporadic bits. The GP was just completely missing that period of my life. Sent it off. Thought I hit the

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Marlene, in 1986/87 you needed to have a hysterectomy and you had a discussion with the surgeon before the operation about whether you would need a transfusion during the surgery.

What were you told by him?

MS MARLENE ELIZABETH NEVE: Well, I offered -- I was working in health at that time as a radiographer and we were very aware of HIV. So, I asked if I could donate my own blood in case it was needed because of the surgery and the surgeon laughed at me and said "No, you haven't got enough blood for yourself, you know. This is why you need it done. However, it is highly unlikely you will need it and, if you do, the blood we have here is safe". That was it.

15 MS FRASER BUTLIN: You were admitted to hospital in 16 February 1987 to have the surgery.

17 MS MARLENE ELIZABETH NEVE: Yes.

18 MS FRASER BUTLIN: But after the operation you haemorrhaged.

19 MS MARLENE ELIZABETH NEVE: Yes.

20 MS FRASER BUTLIN: What do you know about what happened 21

22 MS MARLENE ELIZABETH NEVE: Well, I was hemorrhaging very 23 badly. Turns out that there was quite a large area --24 relatively large area that was unsutured in theatre and 25 that's where I was hemorrhaging from and I needed

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criteria because the criteria was you only had to be infected originally. And refusal. Fine. Why? How? They said they want a PCR test. A PCR test, great. Yeah, refused me. And it hurt. It hurt really badly.

They said, "You've got a chance of appeal", so I think I waited a bit. I think Covid happened so I had more time to put the appeal in. And this time I went for it with everything I could find. I asked for endorsements from the Hep C Trust, which was great. Again with The Haemophilia Society, again they helped. They gave me endorsements. Professor Graham Foster, I spoke to him quite a few times on the phone and email and he said, "Yes, I do believe you self cleared later than the time that EIBSS give, six months". I did American studies on mortality rates of people that self cleared, got a statement off my father under oath, and I got every single thing I could think of. And again rejected -- and this time it hurt.

They rejected me and I went dark for three weeks. Didn't want to work. I didn't want to speak to anyone. I nearly quit the Inquiry. I didn't feel like a victim. I felt like a liar, a fraud. They was trying to tell me I made it all up, and that hurt. That really hurt me. I'm a big lad but that broke me.

25 MS FRASER BUTLIN: Thank you.

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further emergency surgery and I needed blood. I was 1 2 being given emergency fluids under pressure but 3 obviously still hemorrhaging very badly, my blood 4 pressure was very, very low, and time was ticking away, 5 so when they operated they also gave me some blood. 6

MS FRASER BUTLIN: Were you ever told how many units you were given?

8 MS MARLENE ELIZABETH NEVE: At the time, no, I wasn't. 9 MS FRASER BUTLIN: How did you come to find out you had been 10 infected with hepatitis C?

11 MS MARLENE ELIZABETH NEVE: I got a letter from I think it 12 was the Blood Transfusion Service informing me I had 13 been infected by hepatitis C as a result of the blood 14 transfusion, the transfused blood that was tested and 15 found to be positive.

16 MS FRASER BUTLIN: So I think your recollection is the 17 letter suggested that the donor who had donated the 18 blood had now been identified as hepatitis C positive?

MS MARLENE ELIZABETH NEVE: That's right, yes. 19

20 MS FRASER BUTLIN: So it was perhaps part of the look-back 21 exercise?

22 MS MARLENE ELIZABETH NEVE: Possibly, yes.

23 MS FRASER BUTLIN: At that point you made an appointment 24 with your GP?

25 MS MARLENE ELIZABETH NEVE: Yes.

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MS FRASER BUTLIN: And had a blood test, and what were you 1 2 told then? 3 MS MARLENE ELIZABETH NEVE: It was inclusive at that time 4 I was told and I was told I would need a liver biopsy to 5 make a final decision, which I eventually had. 6 MS FRASER BUTLIN: After that biopsy you were then told that 7 you had been infected but had cleared it? 8 MS MARLENE ELIZABETH NEVE: Yes. 9 MS FRASER BUTLIN: And what information were you told about 10 what that meant? MS MARLENE ELIZABETH NEVE: Not a lot, really. Like most 11 people for most things these days I was given the 12 13 leaflet. They didn't really tell me any more than 14 I knew anyway. I was also told -- well, I was also 15 asked when I had had malaria and I said I hadn't. They 16 said, "You have", and I then described what I thought 17 was just a simple viral illness but I'd been very ill 18 with it. I wasn't able to get out of bed really. I was 19 fluctuating rapidly between absolutely burning up and 20 pouring sweat and being really cold, ice cold, shaking 21 with what's known as rigors and just fluctuating between 22 the two. This went on for three weeks. They just said, 23 "That's malaria". I said, "Well, I've not been to 24 a malarial area", and we talked about the areas I'd 25 holidayed. They said, "No, there's nothing there", so 17

I said, "Well, where's that come from?" And he kind of shook his head and said, "Well, that's another can of worms, isn't it?"

4 MS FRASER BUTLIN: In terms of the hepatitis C, in relation 5 to the risks that the infection might pose, what were 6 vou advised?

MS MARLENE ELIZABETH NEVE: I was told that I had cleared it, which was brilliant, so I was okay. However, I had to pretty much act as though I was hepatitis C positive, so I had to inform anyone who was going to do any invasive procedure on me, like taking blood, operating on me, doing anything at all. I had to be cautious in terms of sexual activity. I had to be -- use protection, inform people.

15 MS FRASER BUTLIN: Did they explain to you why that was necessary if you had cleared the virus? Was there any discussion about that with you?

18 MS MARLENE ELIZABETH NEVE: They couldn't really answer 19 that. They just said just better err on the side of 20 caution.

21 MS FRASER BUTLIN: After the diagnosis, what was the impact 22 of that on your mental wellbeing?

23 MS MARLENE ELIZABETH NEVE: Not too good really to be perfectly honest. I felt as though I had something 25 horrible crawling around my body. Still do at times.

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It is not a nice feeling. It makes you feel violated. 1 2 I suppose, without sounding too dramatic, yeah. 3 MS FRASER BUTLIN: And you had a young family at the time. 4 MS MARLENE ELIZABETH NEVE: Yes, I did. 5 MS FRASER BUTLIN: And did that cause anxiety for you? 6 MS MARLENE ELIZABETH NEVE: Yes, because nobody could really 7 answer the questions as to whether I would be okay or 8 not and, yeah, I had two young children. They were 9 probably, what, 6 and 13 at the time. They had a lot of 10 time that they were going to need a mum and I didn't 11 know if I was going to be there.

12 MS FRASER BUTLIN: And in terms of your physical health, 13

what's that been like? 14 MS MARLENE ELIZABETH NEVE: It deteriorated quite a lot. 15 I have been subsequently diagnosed with various 16 autoimmune conditions. The first one being 17 fibromyalgia. That's just -- that just deteriorates 18 year on year and causes a lot of problems. It is 19 a syndrome of very many symptoms, probably hundreds of 20 symptoms. I have also been diagnosed with Sjögren's 21 disease, which is another autoimmune, and more recently 22 a skin condition called pityriasis lichenoides, which is 23 a bit strange because it is a condition that in itself 24 is rare but when it does hit, it tends to hit juvenile 25 males, not somebody my age as a female.

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Again, it's just another autoimmune thing, it is quite debilitating all of it together. It's quite debilitating.

MS FRASER BUTLIN: And you have spoken in your statement particularly of the fatigue and the memory problems and the joint pain that you have suffered?

MS MARLENE ELIZABETH NEVE: Yes. The muscle pain is -- the best way I can describe it is, it is almost as if -your muscles have a covering. It is almost like the body's cling film. It is almost like the inside of that covering is fine sand paper and every time you move, any movement, it hurts. You get flares.

When I first started with it, I used to get a flare about once a month and it would probably last a day. I now tend to get one a week and they are more like three days by the time they have cleared.

Yeah, memory problems. They call it fibro fog and it is like some days you struggle to remember your own name. It's ridiculous. You laugh it off but it isn't funny.

The fatigue is absolutely crushing. You can't push through it. It is a fatigue that you have to experience to really understand it. It just stops you doing anything. And some days, again it sounds dramatic, but you have to be careful sort of what you

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1 are eating because the effort of lifting a knife and 2 fork or a spoon is just too much. It's horrible. 3 MS FRASER BUTLIN: What have you been told by the 4 rheumatologists about the fibromyalgia and your 5 hepatitis C? 6 MS MARLENE ELIZABETH NEVE: I've moved house a few times, so 7 I've seen various rheumatologists and one of the first 8 questions is, "Have you been exposed to hepatitis C? Or 9 hepatitis generally", and, yeah, hepatitis C is brought 10 up, because there does appear to be some kind of link 11 so I'm told, and so I've read. 12 MS FRASER BUTLIN: So despite having cleared it, there is 13 still a question, when you meet the rheumatologists, of 14 whether there is a connection between fibromyalgia and 15 hepatitis C? 16 MS MARLENE ELIZABETH NEVE: Yes, and autoimmune conditions 17 in general. 18 MS FRASER BUTLIN: Your marriage broke down in 2004. 19 MS MARLENE ELIZABETH NEVE: Mm hm. 20 MS FRASER BUTLIN: What's the impact of the hepatitis C been 21 on subsequent relationships?

23 reared its head and has brought potential -- some 24 potential relationships to an end. 25 MS FRASER BUTLIN: I think in your statement you saythat's 21

22 MS MARLENE ELIZABETH NEVE: Quite poor really. It has

1 because there that difficult conversation that has to be 2 had --

3 MS MARLENE ELIZABETH NEVE: Absolutely.

4 MS FRASER BUTLIN: -- about the fact that although you've 5 cleared you've been advised you have to explain.

6 MS MARLENE ELIZABETH NEVE: You have to be honest with 7 people, yeah.

8 MS FRASER BUTLIN: In terms of your working life, what's the 9 effect been on that?

MS MARLENE ELIZABETH NEVE: It has had quite an impact. I'm the sort of person who will try to just get on with things but, yes, it's -- I changed careers from being a radiographer to a chiropodist.

Chiropody I chose because at the time I retrained I realised I had the fibromyalgia, didn't know a lot about it at that time so when I chose another career, I chose one which, if I needed to, I could do from a wheelchair.

I didn't realise the whole body impact of it at all. It has shortened that career dramatically and made it -- the actual working of it very difficult. For example, I would -- the last -- my last few working years up to retirement were -- I got down to two days a week and that was a struggle. And so I would work --I would do the morning and see perhaps four patients and 22

1 then I would have a long lunch break, which meant that 2 I would just go and get into bed, set my alarm and have 3 a sleep so I could get through the afternoon. And then 4 after the afternoon, it is like ready meal for tea 5 because I couldn't have prepped and made a meal. And 6 it's brought my -- it reduced my earning capacity. It 7 has definitely shortened by career by a lot, so I have 8 had to give up. 9

MS FRASER BUTLIN: And in terms of the financial assistance 10 schemes, you haven't applied to them?

11 MS MARLENE ELIZABETH NEVE: I applied to the Skipton Fund 12 when I found out about it and was turned down. And 13 I haven't applied for anything since because when I read 14 the criteria for application, we are just not a part of 15 that.

16 MS FRASER BUTLIN: Thank you.

17 Steven, you have mild haemophilia A? 18 MR STEVEN TOWSEY: That is correct. 19 MS FRASER BUTLIN: And that was diagnosed in about 1978? 20 MR STEVEN TOWSEY: Yes.

21 MS FRASER BUTLIN: And at that point you were treated about 22 four or five times a year at Lewisham Hospital,

23 initially?

24 MR STEVEN TOWSEY: That's right, yes.

25 MS FRASER BUTLIN: You know you received Factor VIII in

October 1979 to treat a particular bleed?

2 MR STEVEN TOWSEY: Well, it was told to me it was a bleed at 3 the time, yeah, 1979.

4 MS FRASER BUTLIN: And it was a bleed in your left hip.

MR STEVEN TOWSEY: That's right. 5

6 MS FRASER BUTLIN: Otherwise I think you were unsure whether 7 you received cryoprecipitate or when you received 8 Factor VIII and how that balance flowed through your 9 treatment?

MR STEVEN TOWSEY: What, from 1978? 10

MS FRASER BUTLIN: Yes.

MR STEVEN TOWSEY: I received treatment in 1979 for the hip, 12 13 I don't know if I'd had any prior to that.

14 MS FRASER BUTLIN: Can you tell us what your health, your 15 physical health was like during your teenage years?

16 MR STEVEN TOWSEY: During primary school it was awkward just 17 because of haemophilia. I was treated different, like 18 you can't play the sports, you have to be careful in PE. 19 In fact, the only sport they would allow me to do was 20 swimming. It wasn't until I got to secondary school 21 that I was tired all the time. It was -- I was coming 22 home, I was just collapsing on the sofa and it just got

23 to the extent that my mum thought I was on drugs because 24

I was falling asleep all the time. I was collapsing at

school. Twice this happened in secondary school and the

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1 teachers said, "Oh, you just fainted", and I listened to 1 it wasn't -- we didn't just receive a letter and was 2 2 them. I believed what they were telling me. told, it was more vague than that. It was, "You've" --3 3 There was another time I was on the train to visit it was -- they spoke about it when you got to the 4 me auntie in Strood and again collapsed on the train. 4 hospital but it was, "You've been infected with" -- or, 5 Passengers took me off the train and left me on the 5 "You've come into contact with hepatitis C. Now, it is 6 platform. Again, in secondary school I wasn't allowed 6 not causing you any problems at the moment, it is just 7 to do any sports at all. 7 something you get. Something you need to deal with". 8 MS FRASER BUTLIN: In terms of those times when you 8 And that was it. There was no information. No 9 collapsed, did you see your GP about them at all? 9 leaflets. Nothing at all. 10 MR STEVEN TOWSEY: Never seen a GP. The only time I would 10 MS FRASER BUTLIN: I think your recollection is that it was in about 1992 that you got that initial letter, maybe 11 have seen my GP as a child was for vaccinations or 11 unless there was something that was quite obviously 12 12 a little bit earlier? 13 wrong, like an ear infection or maybe you have got 13 MR STEVEN TOWSEY: 1992 was when I was aware -- more aware 14 chickenpox. That's it. I never really see my GP. It 14 of what I'd received, yeah. Because I think I got 15 was hospital, everything. 15 a leaflet at that time to explain the symptoms of 16 MS FRASER BUTLIN: Did you mention the collapses to the 16 hepatitis C and what that actually means. But there was 17 haematologist at all? 17 never any other advice, there was no support, nothing. 18 MR STEVEN TOWSEY: No, because I assumed they were due to 18 It was just, "Oh, right", and that was it. But because 19 faints. I'd never fainted before in my life. 19 I had been told that you don't worry about them things, 20 Throughout primary school. It wasn't until I got to 20 we didn't. We just -- we got on with our lives. 21 secondary school that this extreme tiredness just hit me 21 MS FRASER BUTLIN: Then in 1996 you went to ask doctors 22 and I was collapsing. 22 about your hepatitis? 23 MS FRASER BUTLIN: How did you come to find out that you had 23 MR STEVEN TOWSEY: That's right. 24 been infected with hepatitis C? MS FRASER BUTLIN: And you saw a haemophilia nurse. 25 MR STEVEN TOWSEY: It would have been in the late '80s, and 25 MR STEVEN TOWSEY: Yes. 25 26

1 MS FRASER BUTLIN: Why did you go to ask them about it at 2

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MR STEVEN TOWSEY: I wanted confirmation. I was with my girlfriend at the time and she didn't understand and I couldn't explain it, so we wanted confirmation.

We booked to see Lewisham Hospital and what they done is they couldn't give me the confirmation, they had to test me. I think it was over a period of six to 12 months, regular intervals, I had to have various different tests. I was told to use barrier methods of contraception. [Redacted]

And eventually they gave me that -- well, what they told me wasn't the all clear, they said, "Yes, you have come into contact with hepatitis C, the virus is below our detectable limits". So what does that mean? Does that mean that I've got it or I haven't got it? All that meant was it is below what we can detect for and all the time it remains at that level, it is not a problem.

20 MS FRASER BUTLIN: In your statement you have described the 21 nurses as saying that you had natural immunity and that 22 you should consider yourself very lucky?

23 MR STEVEN TOWSEY: Yes, that was -- after speaking to the 24 haematologist nurse, "Yeah, you've effectively got 25 immunity against hepatitis A" -- I'd been vaccinated

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against hepatitis A, vaccinated against hepatitis B --"You should consider yourself very lucky", and I didn't

3 consider myself lucky.

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4 MS FRASER BUTLIN: And why was that?

MR STEVEN TOWSEY: [... redacted ...] 5

6 MS FRASER BUTLIN: After you were married you applied for 7 some life insurance, in about 1997. What happened with 8 those applications?

9 MR STEVEN TOWSEY: I applied for life insurance and they 10 asked me a question, if I had ever been -- if I had ever 11 had a test for hepatitis C. And I'd never been asked 12 that on previous occasions for any sort of insurances, 13 it just took me back a bit. So I had to be honest, 14 I said, "Yes, I have", and as a result they refused me

my life insurance.

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16 MS FRASER BUTLIN: And on the application form were you able 17 to make clear that you had cleared it?

18 MR STEVEN TOWSEY: No, it was just a tick box.

"Have you been infected?" 19

20 Or, "Have you been tested?"

21 Yes, I have. That was it. There was no other box 22 for putting a reason down, it was that's it.

23 MS FRASER BUTLIN: In about 2000 you moved to Cambridgeshire and transferred your care from Lewisham to 25 Addenbrooke's.

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MR STEVEN TOWSEY: That is correct. 2 MS FRASER BUTLIN: And you sought your records from Lewisham 3 Hospital in about 2003. 4 MR STEVEN TOWSEY: That's right. 5 MS FRASER BUTLIN: What did you discover was missing when 6 you obtained the records? 7 MR STEVEN TOWSEY: I was missing I think it's from about 8 1979 to 1985 all my microbiology blood results. So 9 there was no liver function test results. No blood 10 results, anything during that period. And being 11 a haemophiliac under Lewisham, we were tested -- or had 12 blood tests taken every year under the annual review. 13 So they were all taken but none in my medical records at 14 15 MS FRASER BUTLIN: In 2004 your application to the Skipton 16 Fund was refused. Do you recall why -- what the reason 17 for the refusal was? 18 MR STEVEN TOWSEY: The first time I applied for Skipton 19 I filled out the form, sent it off, it was refused 20 because I didn't meet the criteria. I applied again and 21 this time I got help from a lot of people. I went to 22 various organisations, got letters of support. The 23 doctor at the time from Lewisham, she wrote me letters. 24 I had The Haemophilia Society, I had -- I want to say 25 Contaminated Blood --29

MR STEVEN TOWSEY: That's right, yeah, The Hepatitis C 2 3 Trust. There was another one as well. But I got as 4 many people as I could to write letters of support. 5 I even had a solicitor fight my case for me. He felt so 6 strongly, he done it free of charge. It was not 7 a no win no fee, it was free of charge. And I thought, 8 I've got this this time, great. And sent it all off. 9 Refused. It went to appeal and again it was refused on 10 the -- because I wasn't meeting the criteria. And again 11 it said on the reason why I was refused that I should 12 consider myself lucky. 13 MS FRASER BUTLIN: In terms of the letter from your 14 haematologist, I think it would be helpful to put that 15 up so that we can look at it. The reference is

MS FRASER BUTLIN: It was The Hepatitis C Trust, I think.

please.

Just picking up from the third paragraph and I'm going to read quite a chunk of it out, Steven.

COLL0000010, and I think it is page 45 that we want

"Mr Towsey first received Factor VIII in 1979 for seven days. This was in the context of a bleed in one of his hips.

"His notes are unfortunately incomplete in that they no longer contain records of his early review visits, and that none of the biochemical screenings he 30

would have undergone in the early 1980s are in his notes.

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"There is a period, therefore, between 1979 and 1985 when it is likely that Mr Towsey had a transaminitis, but we are not in a position to prove this or indeed disprove that he had an active hepatitis C infection at the time.

"Regular records of biochemical screening, in the form of a summary sheet, are not available until 1985, and have been normal since, noting that our results in Lewisham stop in 2000, when his care was transferred to Addenbrooke's. Mr Towsey was first noted to be hepatitis C antibody positive in 1992 and his first PCR result was in 1995 and negative.

"In addition, and even though his hepatitis C PCR has been undetectable on the four occasions when it was tested, most recently in 1999, there is no guarantee that the 15% or so of hepatitis C patients who become PCR undetectable without undergoing any treatment will never reactivate. There is certainly evidence, however, that some 5% or so of hepatitis C positive patients who become PCR undetectable after treatment, will reactivate.

"Given that Mr Towsey first became aware of his hepatitis C status in 1992, there were at least

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three years during which he had no reassuring information in the form of negative PCR as the technology was not available. [... redacted ...].

"The psychological distress caused to Mr Towsey under the circumstances has been considerable, given his knowledge of his own infection by the same or similar agent. I would therefore recommend Mr Towsey very strongly for compensation under the Skipton Fund scheme."

That was the letter that was provided by the Lewisham consultant?

12 MR STEVEN TOWSEY: That is correct.

13 MS FRASER BUTLIN: And despite that letter your applications14 were still refused?

5 MR STEVEN TOWSEY: Still refused.

16 MS FRASER BUTLIN: Thank you.

Wayne, you have severe haemophilia A.

18 MR WAYNE GATHERCOLE: Yes.

19 MS FRASER BUTLIN: And you were generally treated at20 Nottingham Hospital?

21 MR WAYNE GATHERCOLE: Yes.

22 MS FRASER BUTLIN: And that was with a variety of
 Factor VIII products and cryoprecipitate in the 1980s
 and 1990s.

25 MR WAYNE GATHERCOLE: Yes.

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MS FRASER BUTLIN: When were you told you had contracted hepatitis C? MR WAYNE GATHERCOLE: I can't remember, probably 12/13 maybe 14, around about that age. MS FRASER BUTLIN: Do you recall how you were told? MR WAYNE GATHERCOLE: Yes. I was -- we'd come to the hospital I think just for a routine appointment. Because I was there every, like, three months to six months, and we were waiting outside in the corridor and one of the nurses came out and I think my mum asked, "Why are we here today, because I don't think it is normal?", and she said it is, "Oh, it's because Wayne's got hep C". And we were just told in a corridor because the room -- you'd walk through one of the main corridors and there were just chairs outside and then you'd go and see the doctors into the main bit and we were sat waiting there and people walking past and a random nurse just kind of told us off the cuff. And then we went in to see the doctor. So ... 20 MS FRASER BUTLIN: What was your mum's reaction to that --

MS FRASER BUTLIN: What was your mum's reaction to that -MR WAYNE GATHERCOLE: Shock, I think. For me, I didn't
really understand it at the time. We went in to see the
doctor. They kind of explained it more, in vague terms,
but then we -- I can just remember we went -- we left,
got in the car, me mum was really emotional, and then we

drove home to find my dad, because my dad was working, he was a window cleaner at the time, so he was somewhere around, so we drove around trying to find where he would be working. And then me mum went and told me dad. Yeah. And then -- so, not a nice day, but ...

MS FRASER BUTLIN: What was your mum advised about precautions you needed to take in light of your infection?

MR WAYNE GATHERCOLE: We needed to take -- make sure all of my toothbrushes and toiletries and stuff like that were in a second bathroom. They asked us do we have a second bathroom. We were like, yeah, we have a main bathroom and a -- me mum and dad had got an en-suite. They're like, "Well, can you separate everything from everybody else in the family, we don't want contact, toothbrushes especially", with my brothers, or anything like that, and to separate everything and keep them out the way.

18 MS FRASER BUTLIN: Did anyone outside of the immediate19 family know that you had hepatitis C?

MR WAYNE GATHERCOLE: No, we were told -- we told never to mention it in front of anybody. It was never mentioned really in front of my brother again for a long time and then we were told not to tell anybody. So, yeah, so we didn't because -- I didn't either.

25 MS FRASER BUTLIN: Sorry, I missed that.

MR WAYNE GATHERCOLE: I didn't either. It was one of those things we didn't tell people about or speak about. It was a small village where we lived and everything that occurred with AIDS appearing and stigma, it is like you didn't want that to come out as well, with the hepatitis C, so yeah. Didn't mention it.

MS FRASER BUTLIN: When you were a teenager can you describe what your health was like?

what your health was like?

MR WAYNE GATHERCOLE: Not good. Very similar to how everybody else has been describing it. And it was probably when I was more getting into like 11/12 is when it really started. Just fatigue, not just feeling unwell. I had my haemophilia, which is, you know -- I had days where I had bleeds and I was unwell. I know what that feels like. It is not nice; it's horrible. But then I would wake up and the bleed has gone, yay, but then you are just feeling horrible.

The best way of describing it is I recently got Covid and I was feeling not very good from Covid, drained, and that was pretty much how it was like most days when I'd -- yeah, for those couple of years, just getting up, no energy, washed out, just hard and it was just really hard to get motivated to do anything, because I didn't have the energy because I didn't feel very well. I was jaundiced quite a lot. Younger than

my teenage years as well. Yeah, very similar to how everybody else has described it really.

MS FRASER BUTLIN: I want to just look through three of your medical records and then I will ask you about them, if I may.

COLL0000012, if we can start with that, please.
We see the date is 27 July 1995, and if we go down to the middle of the page, we have this note:

"Main complaint is of recurrent episodes fatigue, listlessness, disinterest. [Occasional] nausea, vomited once only. No major abdominal pain. Appetite maintained. [About] once [a] month. Stays in bed or around the house. No [weight] loss. Stays off school 1-2 days.

"- Mum more concerned about it than Wayne is. Also thinks he looks 'too pale'. At same time says prophylaxis allows him to be more active."

Then if we could turn to COL0000013, please.

This is a letter from the -- we can see on the top right corner that the clinic was held on 24 August 1995 although the letter is dated 30 August. If we go down to the third paragraph:

"Wayne's main complaint was of recurrent episodes of fatigue and listlessness. These are occasionally accompanied by nausea but no vomiting. He has no

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1 abdominal pain, his appetite is maintained and they 2 occur approximately once a month. He does however stay 3 off school for a day or two when they occur. I must 4 confess I got the impression that these were concerning 5 his mother far more than Wayne but she is obviously 6 concerned lest it be related to his Hepatitis C status." 7 Then COLL0000011, please. A clinic note from the 8 22 February 1996, and if we go down to the third point: 9 "Back to having lots of time off school. Only one 10 full week at school since Xmas. 11 "Due to: Fatigue, lethargy, Headaches, nausea. 12 Appetite normal. 13 "Non specific mid abdominal discomfort, worse when 14 hungry." 15 Do those notes, Wayne, accord with how you felt 16 during your teenage years? 17 MR WAYNE GATHERCOLE: Pretty much, yes. 18 MS FRASER BUTLIN: In terms of the references to your mum 19 being more concerned than you, what's your kind of 20 perspective on that? 21 MR WAYNE GATHERCOLE: Yes, my mum was worried but more than 22 me was because my way of dealing with my entire life and 23 my haemophilia is, I'm perfectly fine. It is like I am 24 fine, I have got a bleed it is fine, that's just -- in 25 my own little head it is me versus my body, my body 37

versus me, so it treats me like crap, I'll treat you like crap. Best way of dealing with it as a kid was to be that way. It's -- yeah. And then not tell anybody really about it apart from being in pain, I need some treatment, and then you just deal with it and I'm fine. And I still do it to this day. If somebody asks me, "Are you okay?", "I'm fine".

My wife moans at me all the time. She knows me best and she knows when I'm not and pulls me up on that, but at the time I used to do that to my mum. If I was really ill, she would know and I would tell her if I was really ill, but most of the time I would be fine. I'd go to the hospital, stuff would be wrong but I would say to them, "Are you okay?"

"Yeah, yeah, I'm really good."

I still do it now when I go to the hospital. "Are you okay?"

"Yeah, yeah, I'm fine."

I think I've done it this morning to a bunch of people.

"Yeah, yeah, I'm fine."

It's just my natural response. And I'm not but what's the point in moaning about it? Because it doesn't really achieve much because that stuff is still going to be there. So, yeah.

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1 MS FRASER BUTLIN: Have you talked to your mum at all about 2 her interactions with the clinicians at that point? 3 MR WAYNE GATHERCOLE: Yes. I always felt my mum quite a lot 4 of time was looked down upon -- talked down to. 5 Especially, she was -- she had me young. She was 6 only 20 when she had me, so a lot of time when she was 7 dealing with the doctors, I -- she was still young. 8 Younger than I am now. You are being told things by 9 somebody who you are supposed to trust and take every 10 that they say and a lot of the time they would be quite 11 dismissive towards her, "There's nothing to worry about, 12 he's fine. He is a typical teenager".

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My mum was like, "But I've got" -- my brother is only sixteen months older than me. She knows what a typical teenager is like. My brother is super fit. He has been in the army 22 years. He is that level of fitness. I'm not. And I would have like -- you have got -- he's just a normal teenager. He is just lazy. He is just tired. It's like, no, that's what Clinton can be like, but Wayne is another level. Yeah. 21 MS FRASER BUTLIN: What was the impact on you mentally of

being told that you had hepatitis C? 23 MR WAYNE GATHERCOLE: Not great. I probably dealt with it and I still deal with it just literally putting everything in a box in my own little head and not

dealing with it and ignoring it and going, "I'm fine, everything's fine", because what else could I do? I could not do anything about it. I could deal with my bleeds by having my factor, try and not injure myself or anything like that, but the hep C I couldn't do anything about that, so it's just try and stick it in a box and leave it there. And I've only just started to open that box lately in the last few years. So, yeah. So not great, but ...

10 MS FRASER BUTLIN: And how did you come to find out that you 11 had cleared the infection?

MR WAYNE GATHERCOLE: I can't remember my exact age but I'd have been in my late teens, maybe 17-ish. I'd gone to -- started going to the hospital on my own and it was due to the fact that I'd got a girlfriend at the time and I -- you know, you want to be more active, so I think I'd asked them about that and then the response is, "Oh, you don't have to worry about that. You cleared that ages ago. It's fine. It's gone, you don't have to worry about it."

"Oh right."

"So, yeah, yeah, you're this and you're that. You're PCR positive" -- I can't remember which way round it is. I came home and mentioned it to my mum and dad and said, "They told me I'm fine with that". They were

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1 like, "Did you get any more information?" I'm like, 1 I'll go through your notes. I'll get all the relevant 2 "Maybe I need to go back". Yeah, I'm 17, I'm an idiot. 2 stuff and then we will send off and apply for it". Then 3 3 If somebody tells you you've cleared it, like, yay. I got -- so I was quite excited. I can remember ringing 4 I didn't ask the questions that I would have asked if my 4 my mum and dad about it because I was just about to 5 5 finish uni, I thought that's a bit of money, I can put mum and dad had been there, and I think I went back for 6 another meeting with my mum and dad and we asked more 6 it down as a deposit on a house or a flat. I can 7 7 remember getting excited and then the next time I saw questions because, as a typical teenager, you only ask 8 8 them a few months later they were, "I've been through certain questions. 9 MS FRASER BUTLIN: Do you recall that second meeting what 9 all your notes and there is not enough for you to meet 10 you were told, having cleared --10 the criteria so there's just no point us applying 11 MR WAYNE GATHERCOLE: No, I can't remember that second 11 because you just don't -- there are so many medical notes missing you won't pass, so there's no point". 12 meeting. I don't know if we did go back for another one 12 13 at all. I just remember being told and it being like, MS FRASER BUTLIN: But you have applied to the EIBSS? 14 "Oh, right", something -- "You don't have to worry about 14 MR WAYNE GATHERCOLE: So I have and I was awarded that in 15 that. You cleared it ages ago. Why are you whittling?" 15 December ... 16 MS FRASER BUTLIN: You applied to the Skipton Fund? MS FRASER BUTLIN: 2020. 16 17 MR WAYNE GATHERCOLE: I never applied. 17 MR WAYNE GATHERCOLE: 2020, thank you. 18 MS FRASER BUTLIN: Apologies. 18 MS FRASER BUTLIN: Can you tell us how you came to apply to 19 19 MR WAYNE GATHERCOLE: So when I went to university I was -the EIBSS? 20 I transferred when I was about 21/22 to Sheffield and 20 MR WAYNE GATHERCOLE: Yes, so my social worker at the time -- I was applying -- reapplying for my PIP, so 21 the -- Professor Macross there, when I first moved there 21 22 and met him, he said, "Are you aware of this?" I was 22 I had contacted my social worker at the hospital and she 23 like, "No". So he was like, "Yeah, this is the Skipton 23 said, "Oh, by the way, are you aware of the Inquiry?" 24 Fund and, from looking at your notes, you should be 24 I was like, "I'm vaguely aware of it". She said, "Also, 25 25 are you aware of the new EIBSS system?" I was like, eligible for this", so he was like, "I'll look into it. 41 42 MS FRASER BUTLIN: Thank you. I want to start with some 1 "Nope". She was like, "Would you be willing to go 1 2 2 through that if we take you on as a test case to go discussion with you about the periods of physical ill 3 through EIBSS, and we will get as much information as 3 health that all of you have described, either growing up 4 possible and we will see if we can get that one?" I was 4 or as an ongoing issue. What discussions have you had 5 5 like, "Okay". with doctors about any connection between those bouts of 6 So that took a long time. Eventually, with the 6 ill health and your hepatitis C? 7 7 help of my social worker and then Carol, one of the MR WAYNE GATHERCOLE: None really, I have had none that 8 nurses there, and then Professor Macross, I think wrote 8 9 9 a very strong letter saying, there are all these things 10 that happened, these notes are missing but there is no 10 11 way you would have done my liver biopsy or anything like 11 12 that without having some notes -- some liver tests that 12 13 were showing something wrong, so we do think like Wayne 13

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15 December 2020. 16 MS FRASER BUTLIN: Sir, I'm about to move on to a more 17 thematic discussion but I wonder whether now is a good 18 time to take our morning break and then we can return to 19 those themes after our break?

qualifies for that, so I was awarded it in

20 SIR BRIAN LANGSTAFF: Yes. Well, we have heard the personal 21 stories of each and the general discussion of the type 22 that we had yesterday can follow at 11.30, so 11.30.

23 (11.02 am)

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24 (A short break)

25 (11.32 am)

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I can remember other than what's in my notes at the time. Since then I've had conversations about it. MS FRASER BUTLIN: Steven, you are shaking your head as MR KEVIN ROBERTS: Nothing at all. Nothing whatsoever from my doctors at all. Anything I ever learnt is from here, from the victims.

15 MS FRASER BUTLIN: Marlene, you have obviously had some 16 17

MS MARLENE ELIZABETH NEVE: Yes, it has depended on which 18 rheumatologist I've seen. I've had rheumatologists, as 19 I say, who've said had there been a connection, you 20 know. I've had other rheumatologists and other doctors 21 who, "Well, you know, if you lost a bit of weight you 22 wouldn't have these aches and pains", and really just 23 brushed it aside, so some simply don't want to go there.

MS FRASER BUTLIN: And each of you were told that you had 24 25 cleared the hepatitis C in very different ways. Do you

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1 have any reflections on how you were told and perhaps 2 how you should have been communicated with about it? 3 MR STEVEN TOWSEY: It was very vague to start with. Again 4 [... redacted ...] and we never got a sit-down chat with 5 any of the doctors, "This has happened". I can't even 6 give a date when it was found out that [redacted] had 7 been infected with hepatitis C. It was only after 8 seeking the doctors for clarification that it is 9 confirmed, "Yes, you've got it and you've cleared it", 10 MS FRASER BUTLIN: With hindsight do you think that should 11 12 have been more proactive in terms of telling you that 13 you've cleared it. 14 MR STEVEN TOWSEY: Yes, there's a lot of things in hindsight 15 they should have done differently. [... redacted ...] 16 were not even told what [redacted] were tested for. I 17 to you, with the bloods that were taken. You said. 18 what, 14 bottles? 19 MR KEVIN ROBERTS: Yes 14. 20 MR STEVEN TOWSEY: 19 on one occasion that was taken. 19 21 bottles of blood. It was just annual reviews. They take 22 blood. [Redacted] didn't know what it was for. Then 23 you're just, "Oh, you need to go up there for the --24 with your hepatitis B vaccination". Again, in hindsight 25 [redacted] didn't question this [... redacted ...].

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1 "I'm not that lucky", in my head I was like, "I can't be 2 that lucky". In my head I was going to die from this. 3 I'm not that lucky. I have never been offered the 4 treatment so I wouldn't want to get through it that way. 5 It look a long time, months if not a year, to actually 6 think, "I'm going to be okay". It took that long. 7 MS FRASER BUTLIN: Reflecting on how it should have been 8 communicated?

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MS MARLENE ELIZABETH NEVE: I found that I was told after the biopsy by my GP, "Brilliant, you've cleared it", the same thing, "You are really lucky", you know, and blah, blah, blah.

So I was then asking questions about does that mean it is definitely gone? "Well, you know, who can say absolutely a 100 per cent but you are fine, you are fine". I was concerned about potentially passing it on to my children and I had just become a grandma for the first time as well then and it was like, "Well, what about dealing with my grandchild, you know, that's just come along?" Because I had him a lot. "Well, you know, if you have any little cuts or anything then you will have gloves around, won't you", because they knew what I did for a living. So I said, "Well, I treat everything like barrier nursing, basically". They said,

"Well, it's the safest option I suppose, but you're 47

What does that mean? What's a carrier? {... redacted ...] Again, unnecessary, [redacted] was treated with more cryoprecipitate for the vaccinations, ten bags, five bags for the first dose and the another five bags the second dose, and [... redacted ...]. It was unnecessary.

MS FRASER BUTLIN: Just thinking back to that conversation about having cleared the hepatitis C, do others have any reflections on how that was done, how it could have been

MR WAYNE GATHERCOLE: I can remember -- I can always remember at one pointbeing told you have cleared it and you are one of the really lucky ones because the chance of clearing it are like 0.01%. Now, it's like -- it seems to be a lot higher than that. So you should think yourself really lucky. I was like, "Yay ... but no". It was kind of like, "Yeah, you should be really grateful", and I was and I am but it was like, "Yeah, well done. You've cleared it but -- yeah, your chances of doing that were really slim so you are a special one, well done". I can always kind of remember that and then virtually most of the things you've just said that, the reply -- the hep B stuff as well --

24 MR KEVIN ROBERTS: You're dead right, when I was told 25 I didn't jump around. I didn't do a dance. I went, 46

fine, you're fine, you're really lucky". Again, this 1 2 "You're really lucky. You are one of a very, very few", 3 but there is a lot of us.

4 MS FRASER BUTLIN: What would you have wanted to happen in 5 that communication about clearing?

MR WAYNE GATHERCOLE: It would have been nice if I'd had. like, a proper formal -- like, gone in and said, "By the way, we have tested you now and it is showing that you did have it, but you have cleared it and you are now negative", and then explained what that meant and what that would mean for the future, anything like that. I have never had that. I have never really had anybody really explain to me what it would mean for my future. Will it mean ongoing health problems going forward? It is just that I got told, "You've -- pretty much you've have cleared it, that's it, going forward you don't have to worry about ever again. That thing you used to have that could kill you, you don't have to worry about it now, well done". It was, like, that's pretty much the information I got given in a really blase kind of way. like off the cuff. "Why are you worrying about that? You cleared it ages ago". Never got, like, a nice meeting, coming in -- yeah.

24 MS FRASER BUTLIN: So you would have preferred a more structured discussion about whats happened and what the

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7	future looks like	7	doesn't come back, and we are going to monitor you later
2	MR WAYNE GATHERCOLE: Yes, even if it was just one in my	2	to make sure you're not going to have any" none of
3	regular, like, quarterly or six-monthly meetings, of,	3	that. He was just like, "Don't know how you've done it,
4	like, "By the way, we are going to set aside	4	Mr Roberts, but you seem to have cured it". And that
5	five minutes and, here we go, we are going to go over	5	was that. No followup.
6	this thing that you had and go over it in a lot of	6	MS MARLENE ELIZABETH NEVE: I think for me it was more
7	detail". I can never remember that happening at all.	7	I think because of the job I was doing, I recognised
8	MS FRASER BUTLIN: What about others?	8	that they didn't actually know themselves, my GP
9	MR STEVEN TOWSEY: I would like to them to have been more	9	particularly, so I thought and as was pointed out to
0	open. If they sat me down and spoke to me, "Right,	10	me, I asked awkward questions to which they just didn't
1	you've picked this up, this is where we think you have	11	have the answers. You know? I think if they would have
2	picked this up", what's the chances of anything else	12	been probably allowed to be a bit more open and say,
3	happening in the future. But there was nothing.	13	look, we really don't know what we are dealing with
4	I would have liked that. I would have liked the doctor	14	here, I think that could have been accepted a bit more.
5	to have sat down and explained it all to me. As I say,	15	But I think we have all had the brush off basically. We
6	it took till well into the '90s before I could get	16	are all telling a similar story. We have all had this,
7	confirmation. Even still it wasn't like "It's okay,	17	"You're fine, it's okay, go away".
8	it is fine, there is no risk left whatsoever". Even now	18	MR STEVEN TOWSEY: The further risk should have been spoken
9	I have got that over my head that it may come back. If	19	about. They should have said, "Look, if you continue
20	my immune system takes a knock, it may rear its head	20	this treatment there are these risks". But I have
21	again.	21	done better than everyone else but I was never informed
22	MR KEVIN ROBERTS: I completely agree with that. It what	22	of the risks. And I can't imagine for one second that
23	he should have said, and took more time to do it, was,	23	my mum and dad had any idea about the risk it involved
24	"Right, we don't know how you've done it, you have self	24	having this treatment, because any parent, they'd
25	cleared, now we are going to monitor you to make sure it	25	"Is it life saving they have this treatment or will it 50
1	get better if they don't?" They would choose no	1	"Oh, it's a liver test. You had a liver function
2	treatment if it's over you could catch something that	2	test?"
3	could potentially kill you.	3	"I don't think so."
4	MS FRASER BUTLIN: In terms of that ongoing conversation	4	"Why not?"
5	about hepatitis C, have any of you had any ongoing	5	I said, "I just don't".
6	follow up with a hepatologist or about the condition of	6	And from this I went back to my haematology
7	your liver?	7	doctor, rang him up, and I said, "We need a meeting".
, 8	-	8	"What's this about? You know, you've got your
9	MR WAYNE GATHERCOLE: No, none. None that I can remember.	9	six-monthly meeting, you can wait for that."
0	MR STEVEN TOWSEY: I have yearly annual reviews with a to check my liver function tests.	10	
1	•	11	I said, "No, no, I need a meeting", I needed one
	MR WAYNE GATHERCOLE: I think they may do that without		now.
2	they may do it. I'm going to ask next time I'm there to	12 13	He says, "Why is this?"
3	see if they do do that. But I'm yeah.		"Well, I've been to the Blood Inquiry, I'm
4	MS FRASER BUTLIN: Kevin, I think you've had a bit more	14	a Core Participant."
5	input?	15	"You are? Why is that?"
6	MR KEVIN ROBERTS: Yes, I had a asked when I first come	16	"Well, I was infected with hep C, you know that."
7	up and the victims told me what I should be asking for	17	He said, "Oh, the Blood Inquiry?"
8	to my haematology doctor.	18	I said, "Yes, I'm with the Blood Inquiry, and
9	MS FRASER BUTLIN: So you attended the Inquiry and then went	19	I have been told what I should be asking for."
20	back to your hospital?	20	"Oh. What do you want?"
21	MR KEVIN ROBERTS: Because I'm naive. I did not have a clue	21	I said, "I would like liver function tests."
22	about anything, apart from that one pamphlet that I had.	22	"Well, you are cleared, you don't need it."
23	And I learnt from the other victims. They said, "Hang	23	"And I would like a FibroScan."
24	on, mate, do you have any FibroScans?"	24	"What's I'm not sure you want one of those."
25	"What's a FibroScan?"	25	I said, "No, I want a FibroScan, I want peace of
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1	mind."
2	"Oh, well, we better have you in."
3	And got a phone call a couple of days later.
4	"Oh, by the way we booked you in for this come in
5	for Wednesday afternoon. Oh, hope you don't mind, we
6	would like to bring a legal representative to be there
7	with us."
8	"Really? Why do you need one of those for?"
9	"Just for us."
10	"Do what you like."
11	And I went there and he said and I said, look,
12	it's for my peace of mind."
13	And said, "Well, we have not done FibroScans much,
14	we don't know much about it", he said, "but we will book
15	you in one."
16	"That's all I'm asking. And, you know, when I do
17	my blood tests, can you do a liver function test for
18	me?"
19	Because
20	"Yes, yes, we will do that for you as well.
21	Lovely."
22	"Okay, great."
23	Popped in again about a week later and I said,
24	"How are things going?"
25	And he says, "Well, Mr Roberts, it has been 53

interesting because we had" -- my doctor, Dr Kreuger said, "Oh, we -- after we had the visit with you, I had a meeting at the -- haematology meeting in Wales where all the doctors got together, and, at the end of the meeting, as they said, 'Any questions?', I said, 'I've got a patient of mine who managed to self clear and he brought up a very valid point, he said to me, he has come from the Inquiry, he said he would like a FibroScan and a liver function test'. And he says, 'It is actually he is very right, it is very valid. Is there anything out there to bring in people who cleared with interferon or self cleared on their own, to give them these tests?' And everyone looked at each other and said no, there's nothing in writing about it. It is a very valid point. And from that meeting they sent a letter out to try to pick up these people who have been -- slipped the net, to bring them back in and offer them a chance to have these tests to check their future health."

MS FRASER BUTLIN: So you will now have -- or have had a FibroScan to check your liver? 23 MR KEVIN ROBERTS: I did until Covid, and I've been slipped out the net again, so I have to rattle some cages and get back on it again. But yes, since Covid I have

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And that made me feel really good. Really good.

slipped out, and I said fair enough, but yes, when I come back from here, I shall be back on it again. MS FRASER BUTLIN: Marlene, what has your experience been? MS MARLENE ELIZABETH NEVE: Yeah, I was monitored annually. liver function tests and saw a haematologist in outpatients. Up to about 15 years ago. And they just said, "There is no point doing them anymore, but if you have any problems let us know". And that was it really. Heard nothing since at all.

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I was then contacted probably ten years ago by a research group based in Cambridge who were looking at people like us, who had self cleared, and they wanted to do -- have bloods to try and find out why we had self cleared, with a view to helping perhaps a vaccine or whatever be produced. And that went on for probably about 18 months, I think, and then they just suddenly dropped out of the picture. They are not contactable. Don't really know what happened to that information. But that's it.

MS FRASER BUTLIN: All of you have spoken about the impact on your mental wellbeing of knowing that you had the infection and that you have cleared it. Has there been any recognition of this by clinicians with whom you continued to engage?

25 MS MARLENE ELIZABETH NEVE: No, nothing. Nothing at all.

MR KEVIN ROBERTS: Never been asked.

2 MS FRASER BUTLIN: Do you think there should have been?

3 MR KEVIN ROBERTS: Yes, most definitely, yeah.

4 MS FRASER BUTLIN: What would that look like for you?

MR WAYNE GATHERCOLE: I don't know. For me personally, 5 6 after -- my plan was to try to get a bit of therapy 7 because I've (inaudible) -- but my plan was to get today

out of the way and then I'm on that. And my wife is probably going to kick my butt until I go and do it. 10

But, yeah, that had been something.

I kind of feel like I was told at a very young age that I had got something that was probably going to kill me. I had seen on the news and grew up with people around me contracting and dying of AIDS, and had known about that, that I'd got something guite similar to that, at a young age knew I have got something that's probably going to kill me, probably has altered the way I have lived most of my life, if I'm honest. Yeah, and dealt with it by bottling stuff up and putting it away and trying not to deal with certain things because, yeah, it is the easiest option. It is probably not the best thing for me but it has been an easier option.

MS FRASER BUTLIN: Marlene, you are nodding to that. MS MARLENE ELIZABETH NEVE: I recognise the bottling it up and putting it in little boxes in your head thing, and

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I think a lot of that comes from the attitudes that we have had from the medical profession in terms of, "Well, you've cleared it, you're lucky, it's not that bad, you lot can go away, we have poorly people to deal with". But it is only recently that I have actually managed to sort of put it in my head in that, okay, we haven't lost our lives, we are still here, but we have lost the lives we expected to have through no fault of our own. You know, you can have an accident which can change the 10 course of your life. You can develop an illness that can shorten your life, can change your life. But this has been done to us. And I think to have had that 12 13 recognised would have been a big step. And yeah, 14 perhaps some support in terms of, I don't know, 15 counselling, whatever, to actually help you to get your 16 head round that and to work out, you know, where you are 17 going, really. But yeah, we have just been brushed 18 aside and left to get on with it.

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19 MR KEVIN ROBERTS: Same, vague. Growing up I was never told about help groups -- and it would have helped -- The Hepatitis C Trust, The Haematology -- Haemophilia Society. I was on my own. I never talked to anybody about it, not even my own family, my own mum and dad, my own brothers. Just never talked to anyone about it. Fear, shame. I thought I was the only one. The doctors

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other than that nobody knows because I have never really told anybody about it. Because I was told to do that.

MS FRASER BUTLIN: A very different theme. Some of you also had problems obtaining insurance. Can you tell us how that felt and what effect it has had on your lives?

Steven, do you want to start?

MR STEVEN TOWSEY: Okay. I -- it's going back nearly 25 years. I got life insurance because I had a mortgage and I wasn't asked any questions about hepatitis C. Got the insurance no problems whatsoever. Now, I consider myself fortunate on that side of things, because that has still got a couple of years left to run, that insurance, but it wasn't very competitive.

The insurance I went for, when I met my wife now, I was refused. And that was because they specifically asked me questions about hepatitis C. As a result of that, any further insurance I have to now tell them, yes, I have had insurance refused. I did appeal it. I did get it -- I still got the insurance accepted but they increased my premium, so I have special conditions attached, so every time I go for any more insurance now I have to say that, that in turn increases my premiums. When my current insurance runs out ina couple of years, that's it, it is not even worth me getting any more insurance.

should have acknowledged this; they knew the stigma attached and they could have helped.

MR STEVEN TOWSEY: There was no professional support given whatsoever. The only support I have ever had throughout my life has been through my family, that's it. There has been nothing. Even now I have had no professional support at all. And it is something we have had to deal with -- well, I've had to deal with from a child. I agree with all these guys. It's -- you bottle it up, you don't talk about it, anyone asks, "Yeah, I'm good".

MR WAYNE GATHERCOLE: I think that stems as well from being told by the doctors don't tell people, don't -- don't -because they knew -- they can imagine in a way the stigma that would be attached to it, so, "Don't go mentioning this to people".

It's like, today I still haven't mentioned to most of my friends -- they don't know I'm here. Only my wife, my mum and my dad know I'm here today. My brother knew I was coming but he is currently away with work so he doesn't know exactly that I'm here today because I haven't spoken to him for a couple of weeks, but other than that nobody else knows I'm actually here today because it is something I don't talk about. A couple of my friends, close friends, for a long time knew about my hepatitis C, because I have now told them about it, but 58

MS FRASER BUTLIN: How does that make you feel?

MR STEVEN TOWSEY: Frustrated, angry. It is something that's -- it is not my fault. This is something that I haven't done to myself and I'm just being refused the same level of insurance anyone else would be entitled to. It is frustrating. I'm just everything, annoyed, hurt, everything. It should never have happened.

MS FRASER BUTLIN: Kevin, have you had any experience of

MR KEVIN ROBERTS: To be fair, I don't even have a pension. Never planned a future. So therefore I've never even tried. I didn't think I would get accepted anyway, so for me -- starting to deal with my future now, and now I'm like I hope to get a pension. How do I get this? Do they look at age?

So, yeah, I'm feeling better about myself and I think I do have a bit of a future. It is something I will approach but looking at the problems these guys are getting, it's another wall to climb and I'm not looking forward to it. It is hard enough battling with EIBSS and trying to make a future for my children and then to have another fight for something that's not my fault. Yeah, tough.

24 MR STEVEN TOWSEY: See, with insurance there is no guarantees that if something happens to me it is going 60

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1 to pay out. I don't know that, and that's a worry. 2 Even though I'm paying that premium are they then going 3 to say, "Actually, you didn't tell us about this. We 4 are not going to pay out"? Because that is a worry and 5 a fear of me with the insurance I've got. 6 MS FRASER BUTLIN: Marlene, do you have anything you want to 7 8 MS MARLENE ELIZABETH NEVE: Same thing, really. Sort of 9 when they found out about the hep C contact, which is 10 all -- you know, that's what it has been, there's no --11 I think someone else mentioned it earlier, there is no 12 opportunity to say how this came about. I think they 13 just assume it is a lifestyle situation. And that in 14 itself is upsetting -- not to put down somebody who has 15 problems with drugs, they've got big problems, but it's 16 wrong because they do tar us all with the same brush, 17 and to just say, "Right, well, okay, you might have 18 cleared it but you are too big a risk, we are not going 19 to do it", and you don't apply again. You don't go 20 there. 21 MS FRASER BUTLIN: Wayne, do you want to chip in? 22 MR WAYNE GATHERCOLE: I've never applied for any due to the 23 fact that I knew I probably wouldn't get it. I've never 24 owned a house. I've never applied for a mortgage or 25 anything like that. So, yeah, currently I don't have 61

life insurance, currently I have rented my entire life. So, yeah, so I have never really experienced it, but I got told that probably I'd be rejected for most life insurances anyway due to my haem ophilia and then the hep C being the -- I was kind of told that. I've never then been in a position to go and get a house, to actually go through the whole procedure of doing it. I might be now. It's something I'm looking to do in the future but, yeah, it's something I have never actually experienced it because -- the only thing I have experienced is just increased holiday insurance, which is hilarious when I go away and the family's entire insurance is like £17 and mine is like £160, just because I've clicked I had hep C. Something like haemophilia means it's about £50 and then you do the hep C thing and the price goes up. You're like, Eh, what? How does that work? It's like, that's not the main thing. The haemophilia is going to cost you the fortune. The hep C is not going to cost you that much if something happens to me. So, yeah, that's the only thing I have experienced really.

22 MS FRASER BUTLIN: Some of you have obviously had significant struggles with Skipton and EIBSS, and we have talked a little bit about that, but in the light of the insurance difficulties what are your reflections 62

then on not receiving, not accessing Skipton and EIBSS? 1 2 MR STEVEN TOWSEY: I'm just disgusted with it. That money 3 there is earmarked for everyone that's been infected and 4 the criteria says, yes, you can apply and then you get 5 the response, "Oh, you don't actually meet the 6 criteria". I feel hard done by. I feel let down. 7 I seem to fall through the cracks all the time in the 8 system, [... redacted ...]. {... redacted ...}; I don't 9 get a penny. It's been hard.

10 MR KEVIN ROBERTS: I absolutely agree. It is says it's England Infected Blood Support Scheme, run by the NHS, with a duty of care. I'm a victim and I'm not being supported or I'm being victimised for being a victim. The records that I require are in NHS's hands. The support is in NHS's hands. Where's the communication? Why have I got to fight to get what is there -- or supposed to be there for our support? All it does is mentally make us worse. I actually am getting worse for something that's supposed to support us. That can't be right.

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21 MS MARLENE ELIZABETH NEVE: Yes, it feels very unfair. It does feel very unfair, like you say. It is supposed to be for people who have been infected and affected by it, which we all have been and, yeah, we are just cut off and said, "Right, well, you don't really meet the

criteria", and that is -- it is very upsetting and again 1 2 like you say notes missing, all these things, you know, 3 we are just not considered valuable enough.

MR WAYNE GATHERCOLE: I'm slightly feeling guilty because I have it. I have been awarded my EIBSS. I didn't get the Skipton. That would have helped my life a lot, at the age I was, but I'm sat here feeling guilty because I can imagine my medical notes are probably identical to you guys' and I feel like it's just because of the supporting letter that came from the medical team in Sheffield helped me get that, but the anxiety and everything of going through that, everything that I had to -- we had to get together and how long it took and the stress of it and the worry and then the anxiousness of, "Jesus, if we do get awarded this, it is kind of a little bit life changing for me", but that -- sat there and worrying about that process, it took a long time. If I had then got to that point and then been rejected, I would have appealed but that would have been more stress and everything, and then I feel like if that appeal had gone, there is no way I would have done it again. I'd have just gone, "There you go, that's something", how it happened with Skipton, years ago I got told, "You're not going to get it". I was like, "Fair dos", put that at the back of my mind, never do

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1 that again, walk away, and I would have done that with 2 the EIBSS. If they'd turned around and said, "You can't 3 get it", I'd have gone, "Okay, there we go. Don't get 4 it. Walk away", and just have to deal with the fact 5 that this thing happened to me a long time ago but I've 6 put that aside. 7

But I'm sat here feeling really guilty. There's people in this room who deserve it more than I do, who haven't got it, and I'd feel guilty for that.

10 MR STEVEN TOWSEY: You shouldn't feel guilty for that.

11 MS MARLENE ELIZABETH NEVE: No, don't.

12 MR KEVIN ROBERTS: No way, we are all victims and we all 13 should be supported. Everyone has got their own story 14 but you should never feel guilty.

15 MS MARLENE ELIZABETH NEVE: I think the fact that you got 16 it, other people have had the supporting letters and 17 haven't, which in a way makes it a little bit of 18 a postcode lottery, doesn't it?

19 MR WAYNE GATHERCOLE: That feels wrong, that. 20 MR STEVEN TOWSEY: I think the system itself is very, very

21 divisive

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22 MS MARLENE ELIZABETH NEVE: It doesn't work.

23 MR STEVEN TOWSEY: It's flawed.

24 MS FRASER BUTLIN: Sir, those are the questions I have for

25 the panel. Is there anything you would like to ask?

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SIR BRIAN LANGSTAFF: Just this, you have all spoken about the effects of it and how, in the words of Kevin, you have felt like victims who have been victimised, but where in the set of consequences that you've faced do you place coming today and facing the stresses of having to bring yourself, because you want to, but being in the position where you feel you have to give evidence?

MR KEVIN ROBERTS: I wanted to give evidence. I wanted to have a voice. Everyone, including my own doctors, told me I'm not a victim, "Bit of bad luck but you're not a victim", yet I speak to these people in this room, they look me in the eye and they say, "You're one of us". I'm not wrong; they're not wrong. EIBSS is wrong. My doctors are wrong.

15 SIR BRIAN LANGSTAFF: Marlene?

MS MARLENE ELIZABETH NEVE: For me, it's -- yeah, we've all been wronged by this. There are a lot of people who, for whatever their reasons, haven't been able to come and be a part of this today or any of the other days and I would like to feel that I'm here to say, "This isn't okay", not just for me but for those who can't come.

22 SIR BRIAN LANGSTAFF: You are all nodding. The reason I'm mentioning that is that nods don't go down in the transcript. You have heard me say that before.

Steven?

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1 MR STEVEN TOWSEY: It's just my opportunity to get my story 2 over, to be heard. I'd applied to the various funds and 3 always told, "No, you don't qualify. You don't meet the 4 criteria". I've done various statements. Again, they 5 just -- they never seem to get me anywhere, even with 6 the supporting letters from various doctors and 7 organisations. No one was listening. And I just kept 8 that all to myself over the years and this was my 9 opportunity to be heard.

10 SIR BRIAN LANGSTAFF: Wayne?

MR WAYNE GATHERCOLE: I agree with everybody on the panel. with everyone here. For me it feels, having been awarded it, it feels like an opportunity to say it seems a bit unfair that my notes should be virtually the same as theirs and I have been awarded it and they haven't. It seems, yet again, a bit random luck that a scheme that's there to help people and support people is a little bit on luck.

I don't know who assessed it that day to award it me, what supporting evidence was given, but most of my medical notes aren't there. All the supporting evidence isn't really there apart from the fact that I had a liver biopsy and there's a couple of little random notes in it and that gets me support, where everybody else here isn't entitled to it.

It just feels a little bit wrong and I feel like 1 2 I just needed to make people aware of that. That there 3 is that -- what feels a bit of a wrongness in the way 4 the system is set up at the moment.

5 MR STEVEN TOWSEY: Even now on the EIBSS criteria, you read 6 through it, "Ah, I do match that criteria, I can apply". 7 But it is specifically that they want the liver function 8 test results and if that section is missing from your 9 medical records, you can't apply, and that's the biggest 10 problem.

SIR BRIAN LANGSTAFF: That's all that I ask.

MS FRASER BUTLIN: Kevin, is there anything else you would like to add?

14 MR KEVIN ROBERTS: To sum it up, please, Sir Brian, and all your staff, thank you for your compassion. It means so much to us. We have belief. We have a voice, something we've never had before. I really appreciate that. Thank you. My wife and family for putting up for me, because I can be a handful, especially when I sometimes leave here dark. I built up a wall years ago to hide this away. That wall came down and it opened up some very dark times and I'm glad I'm starting to be open 23 about it. Thank you for letting me do that. I'd also like to thank the bravest, most beautiful, caring people

24 25 I have ever known in my life, that's my Blood family.

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1	You mean so much to me, thank you.	1	the whole team here, for giving us this opportunity, and
2	MS FRASER BUTLIN: Marlene?	2	then, last, I would like to thank my wife for support
3	MS MARLENE ELIZABETH NEVE: Very similar. Thank you to all	3	and my mum and my dad for everything they have ever
4	of you and Sir Brian for the Inquiry and for letting us,	4	given me and, yeah, just say thank you.
5	like you say, have a voice. Let us be heard as to how	5	SIR BRIAN LANGSTAFF: Well, can I for my part thank you
6	this has affected even us who were supposedly very lucky	6	because this Inquiry, as you know, depends upon people
7	and have cleared it, that we have actually still got	7	from different perspectives telling their account and
8	a lot of things to live with every single minute of	8	you have done that and done that I think there is one
9	every single day and we don't know where this is going	9	theme that links a lot of what you've said, you've felt
10	to go but it's definitely, as I said before, not taken	10	that you have been giving voice not only to yourselves
11	our lives but it has taken the lives we thought we	11	but to others, and a sense of the community that you
12	should have had and we'd worked hard for, exams,	12	feel now at least part of, even if you may not have done
13	qualifications, just simply working hard, and it all	13	throughout it all. So thank you for that and thank you
14	comes to nothing because we are no longer capable of	14	for making the effort and coming today.
15	following that through. And, yeah, that needs to be	15	It's never easy, even though each of you have said
16	heard and recognised.	16	you wanted to do it, which is why I asked, because it is
17	MS FRASER BUTLIN: Steven?	17	simply not easy being in the spotlight and in
18	MR STEVEN TOWSEY: I would just like to say the same, thank	18	an unfamiliar situation even though you may be
19	you for giving me a voice. I'm disgusted by the	19	familiar with the Inquiry, an unfamiliar situation. So
20	treatment I've received over the years, me and my family	20	it is very much appreciated that you have been prepared
21	and everyone else in this room. It should never have	21	to be there as part of this panel. Thank you.
22	happened and it is something we've got to live with for	22	Tomorrow?
23	the rest of our lives.	23	MS FRASER BUTLIN: Sir, tomorrow we will be hearing from
24	MR WAYNE GATHERCOLE: I just want to mirror everything	24	a panel of witnesses about the experiences of people
25	everybody has said and just thank you, Sir Brian, and	25	infected with hepatitis B. The panel will be
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2	Dorothy Wright.	2	MR KEVIN THOMAS ROBERTS (affirmed)
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2 3 4	Dorothy Wright. SIR BRIAN LANGSTAFF: Thank you. So tomorrow hepatitis B, 10.00.	2 3 4	,
2 3 4 5	Dorothy Wright. SIR BRIAN LANGSTAFF: Thank you. So tomorrow hepatitis B, 10.00. (12.11 pm)	2 3 4 5	MS MARLENE ELIZABETH NEVE (sworn) 1
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