1	Friday, 30 September 2022	1	MS FRASER BUTLIN: You are a British Kenyan.
2	(10.00 am)	2	MS REGINA CHEPTANUI: Yes, I am.
3	SIR BRIAN LANGSTAFF: Welcome, all. Let me just say	3	MS FRASER BUTLIN: And you moved to the UK in 1972 when
4	a word or two first to everyone who is here. It ha	4	you were about 25.
5	been quite some time since I last reminded those wh	5	MS REGINA CHEPTANUI: Yes.
6	are here to be very careful in taking photographs	6	MS FRASER BUTLIN: You lived in Barbados from 2002 to
7	around this building, because it may inadvertently	7	2016?
8	identify someone who does not wish their picture to be	8	MS REGINA CHEPTANUI: Yes, I did.
9	out there. They may not be anonymous but nonetheless	9	MS FRASER BUTLIN: But otherwise, since 1972 you have
10	they are entitled to their privacy, so please be	10	lived in the UK?
11	respectful, as you have been in the past, and I hop	11	MS REGINA CHEPTANUI: Yes.
12	you don't mind my reminding you. You will wonder	12	MS FRASER BUTLIN: You had two of your children when you
13	about the reason why Regina Cheptaniu sits closer t	13	were in Kenya; is that right?
14	me than she does to Ms Fraser Butlin, and it is for	14	MS REGINA CHEPTANUI: Yes, I did.
15	reasons such as that.	15	MS FRASER BUTLIN: And you did not require a blood
16	Now, in a moment or two Mary will invite you to	16	transfusion for either of those births?
17	take the oaths and then Ms Sarah Fraser Butlin will	17	MS REGINA CHEPTANUI: No, I didn't.
18	ask you the questions.	18	MS FRASER BUTLIN: Can you tell us why you are so clear
19	Mary.	19	about that? They were straightforward births at ho me,
20	MS REGINA ALICE CHEPTANIU (sworn)	20	I think.
21	MR WAQAR BASHIR AHMAD (sworn)	21	MS REGINA CHEPTANUI: In Kenya, you can request for
22	MS GHUFRANA QURESHI (sworn)	22	a midwife to come home, because if you don't wan
23	Questioned by MS FRASER BUTLIN	23	to go to hospital. Same thing how they do it here.
24	MS FRASER BUTLIN: Regina.	24	So my two children were born at home with a qualified
25	MS REGINA CHEPTANUI: Yes.	25	midwife.
	1		2
1	MS FRASER BUTLIN: Soon after you arrived in the UK you	1	have under that a table dealing with your obstetric
2	then became pregnant with your daughter.	2	history and we can see "1973", the third entry on the
3	MS REGINA CHEPTANUI: Yes.	3	table, and then circled we see "Bled - Transfused 2".
4	MS FRASER BUTLIN: And you gave birth to her in 1973?	4	MS REGINA CHEPTANUI: Yes.
5	MS REGINA CHEPTANUI: Yes, I did.	5	MS FRASER BUTLIN: And your understanding of this is
6	MS FRASER BUTLIN: And that birth was very different,	6	that sorry, the other point we see on the top
7	wasn't it?	7	right, starred, "Transfusion - 2 pints".
8	MS REGINA CHEPTANUI: It was very difficult in many ways.	8	MS REGINA CHEPTANUI: Yes, I did.
9	I was new in England and I was faced by all white	9	MS FRASER BUTLIN: And that's your understanding that for
10	people I'm not trying to say wrong thing and	10	your third baby, third delivery, you were transfuse
11	I was scared. Even just to go to clinic, I was	11	with two pints of blood.
12	scared. It was new life.	12	MS REGINA CHEPTANUI: Yes, I did.
13	MS FRASER BUTLIN: And during the delivery you lost a lot	13	MS FRASER BUTLIN: After the arrival of your daughter
14	of blood.	14	until 1994 what was your health like?
15	MS REGINA CHEPTANUI: Yes, I did.	15	MS REGINA CHEPTANUI: My health after my daughter was now
16	MS FRASER BUTLIN: And you required and were given a blood	16	very bad, because I start having pain, my back pain
17	transfusion.	17	I start having my body reacting like pain at night,
18	MS REGINA CHEPTANUI: Yes, I did.	18	but I put it that problem is a part of the child, a nd
19	MS FRASER BUTLIN: Could we turn to a document it is	19	as well I was in pain all the time with my back.
20	going to come on the screen, but Regina, you don't	20	MS FRASER BUTLIN: In 1994 you went to give blood?
21	need to particularly read it, it is so that Sir Brian	21	MS REGINA CHEPTANUI: Yes, I did.
22	can see what we have looked at.	22	MS FRASER BUTLIN: Can you tell us what happened after you
23	WITN6966002, please.	23	donated the blood?
24	It relates to a later time. We can see in the	24	MS REGINA CHEPTANUI: Yes. 1994 my manager said to me,
25	top left corner, it is very faint, "1976". But we	25	"Would you like to give blood? Can you come with me?"

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1	I said, "Oh, yes, why not? Somebody gave me	1	test. And he gave me test. He took my blood and t est
2	blood to save my life so I'm going to give blood to o."	2	it, but he never said nothing, he said to me, "You are
3	So I went with her and I donated blood and I was	3	okay".
4	so happy that I done that, to help somebody else. And	4	MS FRASER BUTLIN: Later on you then received another
5	coming Saturday, the following Saturday, I received	5	letter confirming that you had been infected with
6	a letter saying, "Refuse your blood donation becaus	6	hepatitis C?
7	we find you got jaundice". And I couldn't understand	7	MS REGINA CHEPTANUI: Yes, I did.
8	what is jaundice because I never heard of that. So my	8	MS FRASER BUTLIN: And you were asked to go for a biopsy
9	heart start beating and I'm worried. And because i	9	on your liver?
10	is Saturday I couldn't go back to ask no question t	10	MS REGINA CHEPTANUI: Yes, I did.
11	nobody. So I waited until Monday.	11	MS FRASER BUTLIN: So what happened when you attended the
12	MS FRASER BUTLIN: And at that point you then went to see	12	appointment at the hospital to discuss that?
13	a doctor about what this letter meant?	13	MS REGINA CHEPTANUI: I said to them, "What are you going
14	MS REGINA CHEPTANUI: Yes.	14	to do with me, with this biopsy?" Because I wanted to
15	MS FRASER BUTLIN: What did they tell you?	15	know what it is. And they said they will inject th
16	MS REGINA CHEPTANUI: I went to the same general hospital,	16	needle and pinch my liver. I said to them, "No, I'
17	Southampton General Hospital, where I gave blood, and	17	not having my liver pinched, if it is already damaged
18	I went and saw a doctor there and I asked him, "Wha	18	you will be spreading more viruses on my liver". S
19	is this jaundice?"	19	I refused to have it.
20	And he looked at me and he said, "Let me look at	20	MS FRASER BUTLIN: And your recollection is that your GP
21	your eyes". He said, "Oh, nothing wrong with you."	21	then did liver function tests for about a year.
22	I said to him, "No, you can't say nothing wrong	22	MS REGINA CHEPTANUI: Yes.
23	with me while you are saying to me to refuse my blo od	23	MS FRASER BUTLIN: But then you were told that the liver
24	donation."	24	was fine.
25	So I said to him I would like to have another	25	MS REGINA CHEPTANUI: Yes, I was told the liver is fine.
23		20	
	5		6
1	MS FRASER BUTLIN: Then after about a year no further	1	MS DECINA CHEDTANIII. Voc. I did
1 2	follow-up happened?	1 2	MS REGINA CHEPTANUI: Yes, I did. MS FRASER BUTLIN: When you saw the hepatologist, what
3	MS REGINA CHEPTANUI: No.	3	were you told then about the condition of your live r?
			•
4 5	MS FRASER BUTLIN: In 2018 you then went to your GP for a medication review.	4 5	MS REGINA CHEPTANUI: First of all they had to take the scan instead of pinching my liver. Then he said to me
	MS REGINA CHEPTANUI: Yes.	6	that my liver is affected with three or four millio
6 7		7	viruses and I have to have medication for it so
	MS FRASER BUTLIN: What happened when you met with the GP then?	8	
8 n	MS REGINA CHEPTANUI: That is after when I came back from	_	that to try and clear my virus. MS FRASER BUTLIN: What was the impact on your mental
9		9	•
10	Barbados I joined a new GP. Very near my house. M	10	well-being of being told that you were still infected
11	flat. When I went there I said to him, "Oh, I'm	11	with hepatitis C?
12	here", and he said to me, "I am going to ask you ab out	12	MS REGINA CHEPTANUI: I was annoyed because first of all
13	your repeats", and he said to me, "What do you take	13	I was told that after having liver function ever
14	for hepatitis C?" And I was in denial completely	14	other three months, I was told that I'm clear. And
15	because I was told that I am clear. And how can I be	15	when they said to me I'm not clear, I was so annoye d,
16	that I got hepatitis C?	16	and especially knowing that I'm still suffering and
17	So he said to me, "Don't worry" I said to	17	they said to me I'm clear. I felt that I'm nothing
18	him, "I haven't got it", and he said to me, "Don't	18	MS FRASER BUTLIN: You've said in your statement that
19	worry, we are going to do tests, we are going to take	19	finding out that you had hepatitis C made you feel
20	blood and test you for HIV and hepatitis C."	20	dirty?
21	MS FRASER BUTLIN: And those tests showed that you were	21	MS REGINA CHEPTANUI: Yes.
22	still infected with hepatitis C?	22	MS FRASER BUTLIN: Even though you know it is not your
23	MS REGINA CHEPTANUI: Yes.	23	fault, you still feel really dirty?
24	MS FRASER BUTLIN: You were then referred to	24	MS REGINA CHEPTANUI: Yes. Yes. Even up to today, I feel
25	a henatologist	25	that if I tell people I have benefitis C they will

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1 think I'm dirty, and that is making me to be lonely MS FRASER BUTLIN: But what's the situation now in terms 2 And even I worry about -- about it because I don't 2 of your health, your physical health? 3 3 talk about it. I try to avoid. But I did tell my MS REGINA CHEPTANUI: Mentally I'm not happy, the way 4 church to pray for me. 4 I was treated. I did not have nobody talking, telling 5 MS FRASER BUTLIN: And you've said in your statement they 5 me anything or counselling me to tell me what is 6 were supportive and have kept you going? 6 this -- hepatitis C is doing to me. So -- and my b ody 7 MS REGINA CHEPTANUI: Yes. 7 is completely different from the time I came to thi 8 MS FRASER BUTLIN: You underwent treatment for the 8 country before I had my daughter. I ache. And eve 9 hepatitis C. What can you tell us about the side 9 sometimes I ache there. If I'm lying on a mattress it 10 effects for you? will be so painful and I have to sit down and my 10 MS REGINA CHEPTANUI: The side effects was very bad, 11 sleeping is not good at all. I will sleep probably 11 because this medication was actually made for -- to 12 two hours in a night because of struggling -- I hav 12 suit me, to suit my liver, and I started -- I think it 13 13 to sit down to turn. I can't turn normal how peopl 14 is called Marvet (sic). 14 turn in the bed or how I used to turn in bed before 15 MS FRASER BUTLIN: It was Maviret, wasn't it? 15 MS FRASER BUTLIN: And you have continued to struggle with 16 MS REGINA CHEPTANUI: Yes, Maviret. Yes. I start taking 16 your mental wellbeing? them and every night I take them my stomach will be MS REGINA CHEPTANUI: Yes. 17 17 MS FRASER BUTLIN: Do you want to tell us anything about 18 bloated. As well, I have cramps in my feet. Very 18 19 uncomfortable. And then I get sick mixed -- like it's 19 20 white and -- like mixed blood, like when you mix 20 MS REGINA CHEPTANUI: I start worrying and thinking about 21 strawberry in yoghurt, you see how it will start when 21 is there any life, but I couldn't say that to doctors 22 blood was in it. 22 because if I say that I know they are going to give me 23 MS FRASER BUTLIN: The medication you were told did clear 23 tranquilisers, because I have been once in 24 the hepatitis C at that point? 24 tranquilisers when I was divorcing my husband. And MS REGINA CHEPTANUI: Yes, it did. 25 I never took them but still remain in my record up to 25 9 10 1 today. It is still there. So I just didn't want t 1 because you are old you can be left just to suffer" 2 talk to nobody even -- because doctors, they are no 2 And I said to him, "I don't want to see him again. 3 helping me. If I go there they are not giving me a ny 3 I don't ever want to see him". And it was put in the 4 good answer back. As one day I went there saying t 4 record I don't want to see him. 5 5 them, "My feet are burning", which was burning like MS FRASER BUTLIN: You were advised about the English 6 fire. And doctor call me back and he said to me it is 6 Infected Blood Support Scheme and you applied for 7 7 old age. And I was so annoyed to hear him calling me financial assistance. 8 8 MS REGINA CHEPTANUI: Yes, I did. time for going to -- going home. Because since Covid 9 you don't see doctor face to face, you got to wait 9 MS FRASER BUTLIN: Your application was rejected.

until they make appointment for you to go and see them. And he called me about nearly 6.30 and I think he was going home or he just remember, "Oh, I was supposed to call Cheptaniu but I didn't call her". So when he called me, he said to me, "Can I help you, it is Dr so and so, can I help you?" And I said to him, "Yes, I just want to know what's wrong with me, my feet are burning and burning like fire. I can even imagine if I close my eyes it is like fire coming out of my -- especially left foot". And he said to me, "Oh, that's old age". And I was so annoyed, I didn't even want to talk to him again.

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So the following morning I rang the surgery and I spoke to the surgery manager and I said to him, "I'm not happy for the doctor to say to me what I'm suffering is because of old age. Doesn't mean that

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10 MS REGINA CHEPTANUI: Yes. MS FRASER BUTLIN: What was the reason given for that? 11 12 MS REGINA CHEPTANUI: The reason, first, when I applied, 13 Dr -- my doctor was very keen for me to have that 14 application and then when I filled in, I took it back 15 to haematologist, Dr Wright, and I filled in but he 16 never send, because I was expecting him to send it 17 back to him so that I can post it and read what he 18 said but he never. He sent it direct to ...

MS FRASER BUTLIN: EIBSS. 19

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MS REGINA CHEPTANUI: Yes. Then they sent saying that my 20 application did not succeed. Before that they star

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22 asking me to send them my driving licence, and when

23 I sent my driving licence they said to me that "What,

you were born in Kenya?" I said, "Yes, I am Kenyan,

25 but I am a British subject". And he said to me, "Oh,

1	you got blood from G4".	1	right?
2	MS FRASER BUTLIN: That you had genotype 4?	2	MS REGINA CHEPTANUI: Yeah, that's what they said to me,
3	MS REGINA CHEPTANUI: Yes, genotype 4. And I said to him,	3	but it wasn't true. It wasn't true. Because G4 ty pe,
4	"What is that?" But that genotype 4 is in my recor	4	genotype 4 blood group, I'm not denying that, but w hat
5	of when I had my test for my daughter when I was	5	they are not saying, they are not saying that I had
6	before I went to have her. That is in the record.	6	blood transfusion in England in 1973. So they are
7	And I came to know about it because when my record was	7	trying they are trying to say to me genotype 4 i
8	transferred from my previous doctor to my new doctor,	8	from Kenya. I'm not denying that. Because I had i
9	they did transfer the 1973 record to my doctor, to my	9	before even I had my daughter. But they are not
10	GP.	10	trying to say, "You had this blood transfusion in
11	MS FRASER BUTLIN: So the reason given was explained to	11	England". So that is something they don't want to
12	you then as well by Dr Wright himself.	12	acknowledge all the time.
13	MS REGINA CHEPTANUI: Yes.	13	MS FRASER BUTLIN: Thank you.
14	MS FRASER BUTLIN: And if we look at that: WITN6966004.	14	Waqar, you were born in Pakistan.
15	If we just pick up five lines from the bottom.	15	MR WAQAR AHMAD: Yes.
16	He is explaining to you the decision that the EIBSS	16	MS FRASER BUTLIN: And came to the UK as a teenager in the
17	has made:	17	early 1970s; is that right?
18	"I think the crux of it is that the type of	18	MR WAQAR AHMAD: Yes.
19	virus you have (genotype 4) is most common in Afric	19	MS FRASER BUTLIN: You had an operation in Pakistan in
20	and it is quite uncommon in the UK and the assessor	20	your late teens to remove a kidney stone.
21	will have made a decision on a balance of probability	21	MR WAQAR AHMAD: Yes.
22	•	22	
23	that you are more likely to have acquired the infection outside the UK."	23	MS FRASER BUTLIN: But you didn't receive any blood on that occasion?
23	The letter from the EIBSS said it had most		
25		24 25	MR WAQAR AHMAD: Absolutely not.
25	likely come from a BCG vaccination in Kenya; is tha	25	MS FRASER BUTLIN: Then in 1984 you underwent an operation
	13		14
4	in the LUC in the Language of 104	4	nices blood devise that are setting
1	in the UK, in the January of '84	1	given blood during that operation?
2	MR WAQAR AHMAD: Yes. MS FRASER BUTLIN: to remove a bladder stone.	2	MR WAQAR AHMAD: Absolutely, yes.
3		3	MS FRASER BUTLIN: In 1988 you were told that you needed another operation to remove another bladder stone?
4	MR WAQAR AHMAD: Yes.	4	•
5	MS FRASER BUTLIN: Again, as far as you know, you didn't	5	MR WAQAR AHMAD: Yes.
6	require any blood?	6	MS FRASER BUTLIN: But you were warned that on that
7	MR WAQAR AHMAD: No.	7	occasion you might not be able to have children after
8	MS FRASER BUTLIN: You were then admitted again in	8	that operation?
9	October 1984.	9	MR WAQAR AHMAD: Yes.
10	MR WAQAR AHMAD: Yes.	10	MS FRASER BUTLIN: So you and your wife decided to wait
11	MS FRASER BUTLIN: And on this occasion it was a planned	11	for the operation
12	elective operation.	12	MR WAQAR AHMAD: Yes.
13	MR WAQAR AHMAD: Yes.	13	MS FRASER BUTLIN: until after you had had your two
14	MS FRASER BUTLIN: Again, to remove another bladder stone?	14	daughters?
15	MR WAQAR AHMAD: Yes.	15	MR WAQAR AHMAD: Yes.
16	MS FRASER BUTLIN: Before the October 1984 operation,	16	MS FRASER BUTLIN: So you then had that surgery you think
17	Professor Easthaugh came and saw you.	17	in late 1990 or early 1991.
18	MR WAQAR AHMAD: Yes.	18	MR WAQAR AHMAD: Yes, I did.
19	MS FRASER BUTLIN: What did he tell you?	19	MS FRASER BUTLIN: The operation was a success and you
20	MR WAQAR AHMAD: He said things was okay, and probably	20	went on to have another daughter and a son?
21	because they say in one year you having a second	21	MR WAQAR AHMAD: Yes, true.
22	operation, you might have to have some blood, you	22	MS FRASER BUTLIN: But you don't think you required blood
23	know, for in case anything happens. So that was	23	in that operation?
24	the discussion between me and him.	24	MR WAQAR AHMAD: No.
25	MS FRASER BUTLIN: Your understanding is that you were	25	MS FRASER BUTLIN: From about 1994 you have told us in
	15		16 (4) Pages 13 - 16

your statement that your health began to deteriorate. I had a massive stroke. 1 2 MR WAQAR AHMAD: Yes. 2 Excuse me. 3 MS FRASER BUTLIN: Take your time. 3 MS FRASER BUTLIN: What can you tell us about that? 4 MR WAQAR AHMAD: Well, I started getting unwell. If we 4 MR WAQAR AHMAD: I just get upset, you know, when I talk 5 were in night time and the swollen leg and the swollen 5 about stuff. 6 feet most of the time. So, therefore, I didn't kno 6 MS FRASER BUTLIN: I can read things out of your witness 7 what was happening and stuff and, you know ... so 7 statement if you prefer, or we can just take some 8 I approached to my doctor, because I used to go to see 8 9 Professor Easthaugh and Professor Bassendine for my 9 MR WAQAR AHMAD: No, it is okay. It's okay. 10 diabetes. And that's when they told me they are going 10 So after I had this stroke I was removed from to go and do some more investigation. And they did 11 hospital, Freeman Hospital to Cherryburn. 11 and they said I have a liver enzyme very high, and MS FRASER BUTLIN: And that is a rehabilitation unit --12 12 13 I said "What are they?" I was with my wife. And t hey 13 MR WAQAR AHMAD: Yes, that's it, for the -- yeah, for 14 didn't know. They had no answer for that. 14 stroke. So I was starting to get very unwell there. 15 But I did suffer quite -- pretty bad until, 15 And I asked my doctor, I think it was Dr Ruth, yeah 16 I would say -- it was keep going on but there was n 16 and she says, "I'll have to do some, you know, test". cure, they never said what exactly it is about my 17 So, therefore, they did the test and (unclear) and 17 18 18 liver. All I have been told by the Freeman Hospita I: I think during that day my wife used to come and se 19 you have -- your liver is pretty -- enzyme is high and 19 20 your liver is not working as much as it should be 20 MS FRASER BUTLIN: Just pause there. Let's take a few 21 working, and that was in 1995 and it was Dr Lee(?), 21 steps backwards. When you were at Cherryburn, you 22 Chinese doctor, who sat with me and my wife and 22 said you were getting very unwell. 23 explained. 23 MR WAQAR AHMAD: Yes. 24 And not until later on, in 1998 I believe, when 24 MS FRASER BUTLIN: You were having uncontrollable shivers 25 my wife was pregnant with my son and unfortunately 25 and high temperatures; is that right? 17 18 MR WAQAR AHMAD: 1 much about what's happening, what hepatitis C is. So 1 MS FRASER BUTLIN: Which seemed to be entirely unrelated 2 2 I did approach to Freeman Hospital, the specialist, 3 to the stroke? 3 the liver specialist and therefore they came and MR WAQAR AHMAD: Yes, they said it's got nothing to do 4 4 talked to both of us. with the stroke, no. 5 MS FRASER BUTLIN: What were you advised by the 5 6 MS FRASER BUTLIN: There was something else going on they 6 hepatologist, the liver doctor? 7 7 wanted to investigate? MR WAQAR AHMAD: Once they said what hepatitis C is and 8 MR WAQAR AHMAD: Yes. 8 what can that do to damage, not only you, to your MS FRASER BUTLIN: So they took some blood tests. 9 9 family, was the worst thing. 10 MR WAQAR AHMAD: Yes, they did. 10 MS FRASER BUTLIN: And they advised you to keep things MS FRASER BUTLIN: Were you told about those results at 11 11 separate; is that right? that point? MR WAQAR AHMAD: They told me to keep your clothes, your 12 12 13 MR WAQAR AHMAD: No, they didn't tell me. 13 everything separate from your family, and even one MS FRASER BUTLIN: Then your wife was with you one day and 14 point they said, you know, if you got a blood --14 tell us what happened? 15 because I used to have insulin and they say, "if yo 15 MR WAQAR AHMAD: Yes. One day she came and she sat on the 16 see any blood on your clothes, you must take them out 16 17 chair and she was just -- like, looked and there wa 17 and burn them or throw them away, put them in the 18 a few paper lying on the floor under my bed, and sh 18 bucket and throw them away". And it was very, very 19 picked the papers up and the papers said -- she start 19 hard and, you know ... very hard for me. It was very 20 reading it and she said, "Oh, what's this, hep C 20 hard. MS FRASER BUTLIN: At that point you had three young 21 positive?" I says, "I don't know". She says, "Oh, it 21 22 22 says here on the paper, it says you are hepatitis C children. 23 positive". I says, "Oh, I don't know". So therefo re 23 MR WAQAR AHMAD: Very young yes, children. 24 she called the doctor, a Dr Ruth, and she came in and 24 MS FRASER BUTLIN: And a fourth on the way. 25 she asked Dr Ruth. But Dr Ruth herself didn't know MR WAQAR AHMAD: My wife was heavily pregnant.

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1	MS FRASER BUTLIN: You talk in your statement about how	1	especially to my wife. She was very heavily pregnant
2	difficult that was for you, both having to keep	2	with the kid and, in real terms, she doesn't want m
3	separate.	3	to see the kids, to go near the kids in case. And we
4	MR WAQAR AHMAD: Yes, from my family, from my kids and the	4	weren't being told that exactly what we should do,
5	rest.	5	what we should not, all we were being told from the
6	MS FRASER BUTLIN: I think you have also said you were	6	specialists, "Try to be away as much as you can". It
7	very worried and frightened about what would happen to	7	was hard life like, you know, not going living i
8	you?	8	same house and not going next to your kids, can't talk
9	MR WAQAR AHMAD: It was the way we were told, you know, me	9	to your kids, can't, like, you know, love your kids
10	and my wife, that, you know, that that would kill a nd,	10	and stuff. And especially my wife, it was very,
11	you know, the whole thing, the diseases and stuff and	11	very she was very sick and, you know, she was du
12	we have to keep away from I have to keep away from	12	for a baby in a month or so and the life, you know,
13	other people, and that's you know, when they sai	13	was very, very hard and unbelievable we had a li fe
14	that things, like, you know, you have to be away from	14	like in those years. It was dreadful.
15	the people in case people can catch this thing from	15	MS FRASER BUTLIN: You also drifted apart from a close
16	you, and, you know so my kids was like, you know	16	family member.
17	I couldn't invite anybody to come to my house, and	17	MR WAQAR AHMAD: Yes.
18	even some people they find out and they were just -	18	MS FRASER BUTLIN: Why was that?
19	they would be apart from us. And therefore it is n one	19	MR WAQAR AHMAD: It was like they find out, you know, he
20	of my fault or anything and I was going through har	20	has hepatitis C and in those days, hepatitis C and
21	life.	21	AIDS, I don't know, they were thinking it is the sa me
22	MS FRASER BUTLIN: When you were able to return home from	22	kind of thing. So should be away from this person.
23	the stroke rehabilitation unit, what was your life	23	Right? And he is not only dangerous to himself and
24	like as a family, as an immediate family?	24	the kids but to other people as well. And all my
25	MR WAQAR AHMAD: Within the family it was very hard,	25	immediate family and, you know, my very good friends,
	21		22
1	they just departed away from me.	1	MR WAQAR AHMAD: Yes.
2	MS FRASER BUTLIN: You had been running your own business,	2	MS FRASER BUTLIN: And I think there was some verbal
3	very successfully.	3	discussion about that?
4	MR WAQAR AHMAD: Yes.	4	MR WAQAR AHMAD: Yes.
5	MS FRASER BUTLIN: But you struggled to work?	5	MS FRASER BUTLIN: What do you remember of that?
6	MR WAQAR AHMAD: Yes.	6	MR WAQAR AHMAD: We were sitting in there and my
7	MS FRASER BUTLIN: And the business failed?	7	step-sister was getting very annoyed with the thing s.
8	MR WAQAR AHMAD: Yes.	8	Well, you know, I was keep telling her, "Just ta ke
9	MS FRASER BUTLIN: And so since then you haven't been able	9	it easy", but she said, "No, well, you know, let me
10	to work?	10	talk to her". And she said to us, she says, "I'm
11	MR WAQAR AHMAD: No.	11	sorry, you have to give him the treatment", and she
12	MS FRASER BUTLIN: You were then, in relation to the	12	says she was a little bit I think it is come to
13	hepatitis C, too unwell and too weak to be treated; is	13	in a rude way and then later on she did apologise, she
14	that right?	14	says, "Oh well, because my mum wasn't well". But
15	MR WAQAR AHMAD: Yes. Because then I start going to see	15	anyway, they did agree they will start giving me
16	with my step-sister to the liver specialist at the	16	treatment for that.
17	Freeman Hospital and very first first year she s aid	17	MS FRASER BUTLIN: And they gave you interferon only?
18	I can't have it because, "You have a very weak body,	18	MR WAQAR AHMAD: Yes.
19	so we can't give you any treatment". And the next	19	MS FRASER BUTLIN: But that you were very unwell with
20	year was the same thing. Not until my step-sister	20	the interferon?
21	forced them that, "You have to do something about it".	21	MR WAQAR AHMAD: Yes. They give me for I think for
22	MS FRASER BUTLIN: And that happened in about 2003?	22	just over ten months and it didn't work, and that u sed
23	MR WAQAR AHMAD: Yes.	23	to make me I used to take it on Saturday and for
	MC FDACED BUILDING Verm step sistem sales of which were recorded	0.4	whole five pays days I was totally ways II. Total

25 unwell with the temperature and the rest, yeah.
23 (6) Pages 21 - 24

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whole five next days I was totally unwell. Total

MS FRASER BUTLIN: Your step-sister asked why you weren't

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being treated?

1	MS FRASER BUTLIN:	That unfortunately didn't clear the	1	MS FRASER BUTLIN:	But in terms of your	liver, what's your
2	2 hepatitis C. And how did you come to have your second			position been?		
3	3 round of treatment?			MR WAQAR AHMAD:	I was I was, like, y	ou know, a few
4	MR WAQAR AHMAD:	A year later again it was all to my	4	years I was okay, tl	hen I started getting u	nwell aga in.
5	step-sister who mad	le them to, you know, give me	5	And again I didn't k	now what was happer	ning and, you
6	another try.		6	know, so they sent	me back there. They	did the bio psy
7	MS FRASER BUTLIN:	So in 2003/2004 you were given	7	again, second time	, at Freeman Hospital	, and this
8	interferon and ribav	irin?	8	is I'm having a	fatty liver disease and	d it's
9	MR WAQAR AHMAD:	Yes, both.	9	something to go wit	th that.	
10	MS FRASER BUTLIN:	And I think you said that you have	10	MS FRASER BUTLIN:	Is it fibrotic liver?	
11	never formally beer	told that you have cleared	11	MR WAQAR AHMAD:	Yes. Fibrosis.	
12	hepatitis C but just	hat your condition was better	12	MS FRASER BUTLIN:	You heard about the	Skipton Fund
13	MR WAQAR AHMAD:	Yes. On the second time when, you know,	13	through some volur	ntary work you were d	oing through
14	I I think it was give	en again for ten months or	14	LIVErNORTH?		
15	whatever, and she	said, Professor I forgot her name	15	MR WAQAR AHMAD:	Yes, I did.	
16	again.		16	MS FRASER BUTLIN:	So you applied for y	our medical
17	MS FRASER BUTLIN:	Bassendine.	17	records?		
18	MR WAQAR AHMAD:	Yes, Professor Bassendine. She says "It	18	MR WAQAR AHMAD:	Yes.	
19	seems like you are	getting better", and therefore they	19	MS FRASER BUTLIN:	In relation to your re	cords, what were
20	stopped that.		20	you told?		
21	MS FRASER BUTLIN:	Since then though you have remained	21	MR WAQAR AHMAD:	Well, we applied for	my medical records
22	unwell?		22	because I was told	I can go for the Skipto	on Fund. So
23	MR WAQAR AHMAD:	Yes.	23	we tried and they s	aid, "Oh, well, you ha	ve to writ
24	MS FRASER BUTLIN:	Partly because of the stroke.	24	to a hospital", which	h we did, and they de	nied givin
25	MR WAQAR AHMAD:	Yes.	25	my whole treatmen	t days what I had with	them. Sorr y,
		25			26	
1	I get confused a bit,	you know. And so we ask agai	1	MR WAQAR AHMAD:	Yes.	
2	and three time when	n my step-sister asked them again,	2	MS FRASER BUTLIN:	Do you recall why th	nat was?
3	they said they lost t	he paper, right? And then thi rd	3	MR WAQAR AHMAD:	They said there was	n't enough evidence of
4	time when she said	she wrote a letter to head of	4	a blood transfusion	given to me in UK an	d I did
5	Newcastle, I can't re	emember his name, then we were	5	like didn't argue v	with them but I just sai	id, "Lo ok,
6	given part of my red	ords.	6	you know, I was rea	ally young when I cam	ne in this
7	MS FRASER BUTLIN:	Initially you were told there's nothing	7	country and, you kr	now, if I got hepatitis 0	Clgoti
8	there?		8	because I had so m	nany operations in Fre	eman Hospita
9	MR WAQAR AHMAD:	Yes.	9	and was given the	blood". And they said	, "Oh, well
10	MS FRASER BUTLIN:	Your step-sister persisted and got	10	you know, you migl	ht have this in Pakista	n". I said ,
11	a few records?		11	"No, 14/15 year old	l, why would I have it?	н
12	MR WAQAR AHMAD:	Yes.	12	So it was jus	st a mix of yeah. It	is very
13	MS FRASER BUTLIN:	But there's very little of them?	13	annoying but you	know, when they try	to blame to
14	MR WAQAR AHMAD:	Yes.	14	someone else. Yea	ah? Which is I think u	p to today
15	MS FRASER BUTLIN:	And there is no record of a blood	15	still happens.		
16	transfusion in there	?	16	MS FRASER BUTLIN:	And the letter from t	he Skipton Fund
17	MR WAQAR AHMAD:	I couldn't find this.	17	sir, we don't need to	o look at it, for your no	ote is
18	MS FRASER BUTLIN:	And there's nothing in the GP records	18	WITN4265003. It s	simply says:	
19	either?		19	"With regret	I must advise you that	nt the
20	MR WAQAR AHMAD:	Yes.	20	-	en declined. This is du	
21	MS FRASER BUTLIN:	But the records you have are very	21	lack of supporting r	medical records confir	ming that you
22	patchy and very lim		22	were treated with N		
23	MR WAQAR AHMAD:	Yes.	23	It is the stan	dard refusal without r	ecords.
24	MS FRASER BUTLIN:	You applied to the Skipton Fund and	24	Thank you.		
25	were turned down?		25	MR WAQAR AHMAD:	Thank you very muc	ch.
		27			28	(7) Pages 25 - 28
						1.7. 2522 20 20

MS FRASER BUTLIN: Ghufrana Qureshi, you are here to speak MS GHUFRANA QURESHI: Yes. 1 2 about your late mum, Mehmooda Adib Khanum. Your mu 2 MS FRASER BUTLIN: You lost your dad when you were 8 or 9 3 3 was born in Pakistan, grew up there, got married from a heart attack when you were on holiday in 4 there, and your sister was born in Pakistan in 1969 4 Pakistan? 5 MS GHUFRANA QURESHI: She was, yeah. 5 MS GHUFRANA QURESHI: Yes. 6 MS FRASER BUTLIN: Then your mum came to the UK, with your 6 MS FRASER BUTLIN: Although you stayed there for a little 7 7 bit of time, your mum decided to come back to England sister, to join your dad? 8 MS GHUFRANA QURESHI: Yes. 8 as a single mum to raise you here? 9 MS FRASER BUTLIN: In 1970 or '71 your mum had a 9 MS GHUFRANA QURESHI: We did stay in Pakistan for some 10 miscarriage and she was admitted into Staincliffe time and then we came back. And that's when mum, 10 General Hospital. 11 myself and my brother were here, and my sister and my 11 MS GHUFRANA QURESHI: She was. 12 younger brother were in Pakistan at that time. 12 MS FRASER BUTLIN: Which is now Dewsbury District, within 13 13 MS FRASER BUTLIN: Then in 1998 your mum had a heart 14 14 15 MS GHUFRANA QURESHI: It is. 15 MS GHUFRANA QURESHI: She did. 16 MS FRASER BUTLIN: Your mum was in hospital for three to 16 MS FRASER BUTLIN: So she came under the care of 17 17 four days. cardiologists? MS GHUFRANA QURESHI: According to what she said, yes. MS GHUFRANA QURESHI: She did. 18 18 MS FRASER BUTLIN: And she told you that she'd been there 19 MS FRASER BUTLIN: Then she also had some bladder 19 20 for a few days and required a blood transfusion. 20 problems; is that right? 21 MS GHUFRANA QURESHI: Yes. 21 MS GHUFRANA QURESHI: She did, but prior to that incident, MS FRASER BUTLIN: You were then born in 1972? 22 you know, prior to that -- while we were living in 22 MS GHUFRANA QURESHI: I was. 23 23 Pakistan, mum came back to England because she had 24 MS FRASER BUTLIN: And there were then two further 24 a kidney problem and she had some hard stones so it children, your two brothers? 25 25 needed an operation, so she came back with my young est 29 30 1 brother to England to have that operation here, while 1 mum, because obviously I was interpreting for my mu 2 myself and my sister and my brother were living wit 2 as well, so when I turned to mum and she said, "Yes, 3 my grandparents. 3 I had a blood transfusion just before you were born ". MS FRASER BUTLIN: So, because she needed some medical 4 And that was the first time I ever heard about mum' 4 5 5 treatment, she actually returned to the UK, after your blood transfusion or her having a miscarriage. 6 dad died, to have that treatment in the UK? 6 Because in a south Asian community, talking about 7 7 MS GHUFRANA QURESHI: Yes. marriage, sex, miscarriages, it is not something very MS FRASER BUTLIN: In the 1998 when she was under the care 8 8 common that they would talk about, so that was the 9 of the cardiologist and she was having the bladder 9 first time I ever came across that information, tha 10 10 problems, how did she come to know that she had bee mum had had a miscarriage. infected with hepatitis C? 11 So she just said that, "Just before you were 11 12 MS GHUFRANA QURESHI: So, following the heart attack, we 12 born I had a miscarriage". And I gave that 13 were having some follow-up appointments and I can't 13 information to the doctor and that information was 14 really remember whether it was the bladder appointment just left there. So it was just mentioned in passing. 14 15 or whether it was the heart consultant, so I did ta ke 15 It wasn't like -- the doctor didn't go into any 16 mum, and you know when they go through the records and 16 details or anything like that. 17 they double check this is the history of the patien t. 17 MS FRASER BUTLIN: Some further blood tests were then done 18 So when they were going through the history, the 18 and it was confirmed that your mum did have doctor said that, "So your mum's got hepatitis C" -19 hepatitis C? 19 they first said something else, which I didn't MS GHUFRANA QURESHI: Again, those blood tests were not 20 20 21 understand, so then had they said, "So your mum's got 21 done in our knowledge. Following that appointment --22 hepatitis C", so I quickly challenged it and saying 22 I am assuming this, that it was the consultant who 23 that, "No, she hasn't got hepatitis C and what is 23 oversaw my mum who must have raised that mum has go 24 hepatitis C?" So then the doctor asked my mum, "Ha ve 24 hepatitis, and the only thing that the consultant said 25 you ever had a blood transfusion?" So I turned to 25 at the time that -- in her notes it says there was 31 32 (8) Pages 29 - 32

1 a blood test done in 1999 and it says that she had somebody from the family. Majority of the 2 2 hepatitis, and we're talking about 2001 I think. S appointments I attended but there were a few in the 3 3 beginning that my brother attended because I wasn't this is quite a few years down the line. And that' 4 4 very comfortable driving to Leeds, due to the one-way the first time we were even told that there was 5 5 system and everything, until I got a bit used to it. a blood test done in 1999, and that's when it was 6 6 So there are a few appointments that my brother confirmed that she's got hepatitis. And nobody eve 7 7 told mum or myself about that. attended, but then the majority of the appointments 8 8 I attended until mum was diagnosed by cancer. MS FRASER BUTLIN: Your mum was then referred to St James' 9 9 MS FRASER BUTLIN: And a large part of that was because Hospital for the hepatology care that she required, 10 your mum's English was limited and she needed you a 10 and you have said in your statement that the care was 11 excellent from then on. 11 an interpreter as well as a support. 12 MS GHUFRANA QURESHI: I would like to say that, again, how 12 MS GHUFRANA QURESHI: And at that time I was working as 13 13 a qualified interpreter for courts as well. that process started or who referred her to St James. 14 again that was not in our knowledge, because following 14 MS FRASER BUTLIN: But you're not clear, or the family is 15 15 not clear how your mum ended up under the hepatolog that appointment I am assuming that that consultant 16 16 team at St James's, it just sort of happened? must have contacted another doctor to say that this 17 17 MS GHUFRANA QURESHI: Yes. patient is positive and that's how we got MS FRASER BUTLIN: In about 2005 your mum was started on 18 18 an appointment from St James's Hospital saying, "Your 19 mum's got hepatitis and she needs to come in for 19 interferon and ribavirin? 20 a check-up". 20 MS GHUFRANA QURESHI: She was. 21 MS FRASER BUTLIN: And she had six weeks of treatment, but 21 MS FRASER BUTLIN: Just to be clear there, you attended 22 22 all the appointments with your mum, until the cancer, then it was stopped? 23 23 MS GHUFRANA QURESHI: It was. which we will come to later, but for appointments 24 somebody attended with your mum? 24 MS FRASER BUTLIN: Why was it stopped and how did it come 25 25 MS GHUFRANA QURESHI: Yes. She was always accompanied by to be stopped? 33 34

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MS GHUFRANA QURESHI: Because my mum had already had 1 a heart attack, so it started giving her some 2 palpitations and it was interfering with her heart 3 problem, so that was the reason why they stopped it. 4 MS FRASER BUTLIN: How did it come to be stopped? 5 6 MS GHUFRANA QURESHI: I can't really remember exactly but 7 I think we went back and they did -- because obviously -- I think there was a letter sent to the 8 9 St James's Hospital saying mum is having heart problems, and that's why they stopped it. 10 MS FRASER BUTLIN: Your mum carried on after 2005 being in 11 okay health? 12 MS GHUFRANA QURESHI: She did, yes. 13 MS FRASER BUTLIN: Then in 2008 she was told she had liver 14 cirrhosis. How did she react to that news? 15 MS GHUFRANA QURESHI: To be honest, mum didn't understand, 16 17 neither did I, what cirrhosis meant. On questionin 18 the consultant, they just said that it's when your 19 liver gets hard and it doesn't start functioning, and 20 they explained that, you know, "Your liver has, like,

3 obviously it did take a toll on my mum. To be hone st, 4 before she started the treatment I would say she wa 5 quite fit and healthy. You know, despite having th 6 heart attack and the bladder problems, she was always 7 doing her on own -- she was very independent, doing 8 everything herself, loved her gardening and 9 everything, but since she started the treatment, 10 that's when her health started to deteriorate, so i 11 was a complete scenario where somebody goes for 12 treatment to recover, it was like mum was a fit and 13 healthy person, went for treatment and actually became 14 more poorly because of the treatment. 15 It did take a toll on her to the point that she 16 would have -- just like the gentleman sat next to me, 17 Mr Wagar, she would have her injection on the Thurs day 18 and the next day she would have all the symptoms, 19 aches and pains, mood swings, she would sleep quite 20 a lot, and by the time she would recover from all 21 those symptoms, it was time for her second injection. 22 So it was one of those cycles that she would get ac hes 23 and pains, recover and then it was a day later it 24 starts all over again. So it did take the toll on 25 her.

MS FRASER BUTLIN: What happened with that treatment?

MS GHUFRANA QURESHI: When she was on that treatment.

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500 jobs to do, so it means that your mum's liver i

MS FRASER BUTLIN: She then went back on the interferon

not working to the capacity it should be".

and ribavirin.

MS GHUFRANA QURESHI: Yes.

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		The infected bloc	diriquity 50 September 2022
1	MS FRASER BUTLIN: And the treatment was stopped at	1	that mum's liver is decomposing so we need to stop the
2	43 weeks.	2	treatment". My sister is a doctor and she explaine
3	MS GHUFRANA QURESHI: It was, yes.	3	that it is not decomposing, it is decompensation, and
4	MS FRASER BUTLIN: Because the doctor rang and told you	4	that's I didn't even understand what that meant at
5	she needed to stop immediately. Why was that?	5	the time. But for me it more like: what have I don
6	MS GHUFRANA QURESHI: I used to give her all the	6	wrong? You know, have I overdosed her? Have I don
7	injections. So it was it was one of the evening s,	7	something wrong? Because every week I was giving the
8	actually, it was, I think, like, 6/7 o'clock, it wa	8	treatment to her. And that's when the treatment wa
9	quite late in the evening that I did get a phone call	9	stopped.
10	from one of the consultants that mum used to see,	10	MS FRASER BUTLIN: The treatment had also not cleared the
11	Dr Rehman I think it was Dr Rehman, I can't	11	hepatitis C at that point?
12	remember exactly which one, so it was one of the	12	MS GHUFRANA QURESHI: No.
13	consultants from the team. So they just said that,	13	MS FRASER BUTLIN: A short time later you attended
14	"We just want you to stop the treatments immediatel	14	an appointment with your mum and were told that thi
15	because it is really fatal for your mum". So I was	15	was in fact a meeting about whether your mum could
16	quite shocked that, you know, something that I've been	16	have a liver transplant?
17	giving something to her every week, how can suddenl	17	MS GHUFRANA QURESHI: Yes.
18	it's becoming dangerous for her? So they said to,	18	MS FRASER BUTLIN: What can you tell us about that
19	"Stop the treatment because it is really, really ba	19	meeting?
20	for your mum, because her liver has started to"	20	MS GHUFRANA QURESHI: Again, you know, because mum was
21	I understood that he's saying that it's decomposing.	21	having follow-up appointments regarding her blood
22	You know? And when you think about decomposing, yo	22	tests, you know, every week she would go for her blood
23	think of something just going bad, really.	23	tests, nobody explained why we were going for that
24	So I took the phone call, spoke to my sister and	24	appointment. I was assuming it's just another bloo
25	I said the same thing, I said that, "They're saying	25	test that they're going to do and we'd be coming back.
	37		
			38
	31		38
1		1	
1	I took my son at the time with me, and that's when	1	you would do anything for your family. And again,
2	I took my son at the time with me, and that's when they said that she is having an assessment done for	2	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum
2	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more	2 3	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w
2 3 4	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that	2 3 4	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it
2 3 4 5	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that she's her liver has completely gone now. So she	2 3 4 5	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it straightaway". So, you know, she's and then the
2 3 4	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that she's her liver has completely gone now. So she was having her tests. I had my baby was crying as	2 3 4	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it straightaway". So, you know, she's and then the explained, no, it is not just like that, you know, we
2 3 4 5 6 7	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that she's her liver has completely gone now. So she was having her tests. I had my baby was crying as well. I was quite emotional, like, you know, am	2 3 4 5 6 7	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it straightaway". So, you know, she's and then the explained, no, it is not just like that, you know, we have to go through the procedures, but we will wait
2 3 4 5 6 7 8	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that she's her liver has completely gone now. So she was having her tests. I had my baby was crying as well. I was quite emotional, like, you know, am I going to lose mum?	2 3 4 5 6 7 8	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it straightaway". So, you know, she's and then the explained, no, it is not just like that, you know, we have to go through the procedures, but we will wait and see what the MDT decide, and that was
2 3 4 5 6 7 8 9	I took my son at the time with me, and that's when they said that she is having an assessment done for a blood for a liver transplant. That was even more shocking to think of a transplant. That means that she's her liver has completely gone now. So she was having her tests. I had my baby was crying as well. I was quite emotional, like, you know, am I going to lose mum? SIR BRIAN LANGSTAFF: Just take a moment.	2 3 4 5 6 7 8 9	you would do anything for your family. And again, maybe because we lost our dad at such a young age, mum was everything for us. It was me and my brother, w were like, "Yeah, yeah, we will go for it straightaway". So, you know, she's and then the explained, no, it is not just like that, you know, we have to go through the procedures, but we will wait and see what the MDT decide, and that was
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liver to sort of get better. And when it is family,

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(10) Pages 37 - 40

check-up and everything. It was Dr Davis who saw m um

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1 and he was quite shocked himself, and he was like. 2 "I can't believe these results, you know, they are so 2 3 3 good. That means your mum's liver is getting better". MS GHUFRANA QURESHI: Yes. So what happened on that 4 And I think it was just that news for my mum that m 4 5 5 liver is getting better, she just perked up sudden! 6 to a point where she was back to normal, her mood 6 7 swings was gone. I think that mentally not having 7 8 somebody to talk to, not having her husband there t 8 9 talk to, she wouldn't talk about her illness to us, in 9 10 10 terms of us children, you know, she wouldn't talk about what she was going through or what she was 11 11 12 feeling. She kept all that quite personal to herself 12 13 maybe. So it was quite a relief for her that she was 13 14 getting better. 14 15 So from that I don't know how -- whether it is 15 16 our prayers or whether it was the treatment, I don' 16 17 17 know, but she just suddenly started to get better t 18 18 a point that the doctor did say there is no point 19 telling her that she's still got the virus, we will 19 20 leave it to this point because she looks so good in 20 21 21 22 22 MS FRASER BUTLIN: So in 2016 your mum was still doing 23 23 well. 24 MS GHUFRANA QURESHI: Mm-hm. 24 25 MS FRASER BUTLIN: And she underwent treatment for the 25 41 1 are you not agreeing for it?" So in the end she wa 1 2 convinced and she did go for the treatment. 2 MS FRASER BUTLIN: And she did better on that treatment 3 3 4 4 than she had before? 5 5 MS GHUFRANA QURESHI: She did. It had a lot less side 6 effects, yes. I would not say any, compared to wha 6 7 7 she had gone through. 8 MS FRASER BUTLIN: Then in 2018 one of her routine liver 8 9 scans showed a small tumour in her liver? 9

occasion was that she was seen by a consultant who -or a doctor who she didn't see before. So it was the first time. It was a female doctor. And the first thing, they said that we have got a new treatment. Mum, she didn't even -- she didn't go any further, mum was like, "I don't want any more treatment". Becau se obviously the first treatment had such a bad impact on her health, her mood, the aches and pains. She was always complaining that she has this metallic taste in her mouth, which, when I spoke to the doctors, they said it's due to the ribavirin tablets. And they said it will be, but it wasn't as if it just finished, e ven finishing the treatment she always had that taste for quite some time. So it was like, "Okay, this treatment has got very less side effects, so we will let you have thi treatment. And the doctor actually did say that, "This is a very expensive treatment, we are not offering it to everybody, you were one of the lucky ones, it costs the NHS to about £30,000 to £40,000" And I was like, "Mum, just go for it, you know, the are giving you a treatment that is so expensive, wh 42 appointment with my mum after it was confirmed to b cancer. My mum was very upset and asked a lot of questions. I did not feel able to attend this cancer appointment as I could not cope with it at the time "51. Dr Jones explained that it was pea-sized and was not one of those cancers that would not develop rapidly. They explained that it would take roughly five years before my mum would experience any dramatic changes ... 10 "52. At this time there were also meetings to 11 consider options such as radio ablation treatment i 12 which the doctors could use a laser to burn the 13 cancerous area. However, the cancer was located in 14 the middle of her liver, so the doctors decided tha 15 it was not advisable to go ahead with that plan." 16 In fact, your mum's condition deteriorated quite 17 rapidly and she developed encephalopathy and became

hepatitis C, but with the new direct acting

antivirals, not the injections.

10 MS GHUFRANA QURESHI: Mm-hm. MS FRASER BUTLIN: What were you told about that? And if 11 12 you would rather, I can read it from your statement. MS GHUFRANA QURESHI: I think if you read it, please. 13 MS FRASER BUTLIN: Sorry, sir, there is two references to 14 15 it. I just want to make sure I pick up the right 16 reference. MS GHUFRANA QURESHI: It is the Dr Jones one. 17 18 MS FRASER BUTLIN: It is. MS GHUFRANA QURESHI: I didn't attend those appointments, 19 it was were attended by my sister and brother, and 20 there was an interpreter on the first appointment. 21 22 **SIR BRIAN LANGSTAFF:** That's paragraph 50. 23 MS FRASER BUTLIN: Thank you, sir. 24 "50. My sister and my brother, as well as 25 a professional interpreter, attended the follow up

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MS GHUFRANA QURESHI: To be honest, the encephalopathy --I can't say this word -- the confusion status, she did have it throughout her treatment, but then towards the end it was getting very, very frequent, that it was like from one hospital to the other, we were like one day we were in Dewsbury Hospital, then Pinderfields or Huddersfield, so we were always taking

very confused and disorientated.

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her to hospital, because it -- she developed into a pattern where she would start getting very confus ed, very disorientated. Her speech would get slurred, her lips would droop a little bit, so you could tell that something's not right. That became a pattern that we could tell. And then the doctors started to give her some lactulose to get her bowels moving a lot more so that those toxins don't make her more confused.

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interrupt me.

Those episodes were getting more and more frequent, to a point that it was getting very, very difficult for my mum as well because she would forg et things. She would go in the toilet, leave the tap open. She'd left the gas open a few times. We had to put a few measures put in place for those things. So it wasn't just the treatment, it is all the rest of the things that happened because of the treatment then.

MS FRASER BUTLIN: And you went with your mum to 18 19 an appointment on 11 May at Pinderfields where she 20 thought she was going in for a surgical procedure t 21 remove a blockage but you were told that the cancer 22 had spread to her lungs?

23 MS GHUFRANA QURESHI: Again, because mum had -- she had 24 a lot of oedema in her legs, you know, a lot of 25 swelling in her legs, and then her tummy was quite

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MS GHUFRANA QURESHI: Yes. 1 2 MS FRASER BUTLIN: And your sister, as you say who was 3 a doctor herself, actually spoke with the doctor an you have described it as telling him off for how he 4 5 had spoken to you, because she felt that what had 6 happened was inappropriate? 7 MS GHUFRANA QURESHI: Yes, because when I called my 8 sister, I just said to her get to Pinderfields really 9 quick and obviously, being a doctor, she was assuming 10 a lot of things which I didn't even think about, so she just asked me, "Is everything okay?" I said, "No, 11 12 just get here quickly". So she asked me, "Is it really bad?" Because I was told that mum might be 13 14 just with us for a few hours or a day, I said, "It is 15 even worse". 16 MS FRASER BUTLIN: Do you want to take a break, Ghufrana? SIR BRIAN LANGSTAFF: Let's take 5 minutes break, shall 17 18 we? (11.03 am) 19 20 (A short break) 21 (11.10 am) 22 MS FRASER BUTLIN: Sir, I am just going to read a number 23 of paragraphs from Ghufrana's witness statement and if 24

distended as well, the doctors came a few times at home and they did think that she might have a bowel blockage, so it would be better that she goes in to have that checked out and, if there is a blockage, they'll have to treat it immediately. That's what the intention was.

She wasn't in the surgical ward at the time. When she went and had the scan, it was to check whether she had a bowel blockage which would need operating, and that's when it appeared that the can cer had spread, the cancer that we were told is a pea size, it won't spread for another five years, won't impact on her, and it had spread to her lungs.

14 MS FRASER BUTLIN: And you were on your own when the surgical doctor told you? And he told you in a fairly 15 16 blunt fashion?

MS GHUFRANA QURESHI: Mum was asleep at the time. So I --17 18 you know, when the doctor came in, I just stood up. 19 And he was very blunt in the sense in that he was 20 like, "Well, I'm very sorry to let you know your mu m's 21 cancer has spread to her lungs and she can die with in, 22 like, three days, and it could be a matter of hours or 23 a matter of days". 24

MS FRASER BUTLIN: You struggled to take that in, but you organised for your siblings to arrive.

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In your statement, Ghufrana, you say this. "Following this, there were several doctors discussing with my siblings and me about next steps They were explaining the protocols, such as not resuscitating my mum. I could not even take in wha they were saying at the time. One of the doctors said, 'I am telling you, your mum is not going to walk out of this hospital alive'.

"62. I was in shock. I thought they were giving up on my mum. Either my brother or sister signed the forms, but I did not want to.

"63. I asked the doctors to show me the scans. which showed she had five lesions on the lower lobe of her lungs. The cancer had spread throughout her lungs ...

"64. We called my mum's brothers - my uncles, in Pakistan and relayed the news to them.

"65. My sister kept looking at my mum, and ... said that my mum's current condition did not match up with what the doctors were describing. My brother advised my uncles in Pakistan that they should immediately travel to the UK, and I liaised for the provision of a hospital bed for her discharge, whic

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1 the palliative care cancer team. Mum knew about th memories from their childhood. If felt like my who le 2 cancer but she didn't know about the spread and the 2 family moved in with my mum during that time." 3 3 end of life prognosis. In her mind, she had gone i Your mum died on 21 August 2019 and you talked 4 4 with a suspected blockage and come home with a medical in your statement of your ongoing grief and the hug 5 bed and commode, so she did not understand why she had 5 loss that she is to you. 6 been sent a medical bed and increased care package and 6 I want to deal with one last topic with you, 7 so she refused to sleep in the bed. She continued to 7 which is the Skipton Fund. Your mum never received 8 8 sleep in her bed downstairs at home. It wasn't until any support from the Skipton Fund. In 2009 you 9 9 she became so ill that she was prepared to sleep on applied to the Fund. Can we look at the applicatio 10 10 the bed. form. 11 "67. My mum knew something was not right, and 11 WITN6946007. It is page 7 that I would like to 12 she would say so, but other than that, she let it go. 12 look at please. 13 13 Her brothers arrived not too long after, and again my This is part of the form that the Inquiry has 14 mum guestioned why they were here. We explained that 14 seen for many people applying, and we see there tha they were coming to spend Eid with us, but she kept 15 15 the date of when the infection probably occurred is 16 saying, why are they coming? 16 "[query] "1960s", then: 17 "68. She was suspicious about it even when they 17 "Route of acquisition is unclear -- previous arrived, coming without their wives. I think she k new 18 transfusions in UK during pregnancy in the 1960s." 18 19 what was going on but none of us had the courage to 19 Was your mum even in the UK in the 1960s? 20 talk about it. 20 MS GHUFRANA QURESHI: No. She was in Pakistan and she was 21 "69. My uncles ended up staying for three 21 single at that time. 22 22 months until my mum passed away. I think she lived MS FRASER BUTLIN: So your family are left somewhat 23 a lot longer because of my uncles being there with 23 confused as to why it has been written in the form by 24 her. They gave her the best three months of her life. 24 the doctor that there were transfusions in the 1960 25 They were cracking jokes and laughing, recalling 25 in the UK? 50 49 MS GHUFRANA QURESHI: Yes, because I didn't see this 1 saying that, "You mentioned that your mum had a blood 1 2 evidence. When I left the form with the consultant. 2 transfusion and it was in the UK, and if it was in the 3 they filled in the document, you know, the form, th 3 UK, please look at the Skipton Fund". So the 4 sections that they had, and they sent it directly t 4 application form was sent by The Hepatitis C Trust. the relevant place. So I didn't even know that the 5 5 So I don't know where all this came from. So 6 put 1960 in there. 6 obviously initially it wasn't my responsibility to 7 7 MS FRASER BUTLINS: If we go further down there, in (iv) look for the records. I was given a form, I've 8 8 we do see that it is ticked that she had received completed the form, mum has given her statement to say 9 whole blood and there had been a transfusion during 9 she had a blood transfusion and I left it on that. 10 10

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pregnancy. That application was refused because there were no records of a transfusion. And so you sough 12 records for your mum. There weren't any within the hospitals available to you but you also applied to the 13 14 West Yorkshire Archive Service.

15 MS GHUFRANA QURESHI: I did.

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16 MS FRASER BUTLIN: Why did you try them for the records?

MS GHUFRANA QURESHI: Because initially I didn't even know

18 about the Skipton Fund. I don't know if you might 19 come to it later, when I started doing some work with

The Hepatitis C Trust, that's actually when

I mentioned mum's story, you know, in terms of what

had happened to mum about the blood transfusion, an

23 it was actually an email that I was sent by The

Hepatitis C Trust. It's from Samantha, I know she is

25 in the room today. I had an email from Samantha

Because there were no records, I had to get some more evidence, because that's what the rejection letter said, that there wasn't enough evidence as well. S requesting from the archives was because mum's name was spelled in quite a few different ways on her passport: it is M-A-H for Mahmooda; in some spellings she had M-E-H; somewhere she had Mrs Khanum; somewh ere it was Mrs Jameel, which was my father's name. So because there were so many names, I had to send an application to say, "Could you find the record of this

MS FRASER BUTLIN: I want to look at the email you got back from the West Yorkshire Archive Service. It i page 21 of the same document, please, Lawrence.

if you can find any blood transfusion records".

person with these names, with these spellings, and see

We see their response, that:

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"We only hold general admission registers of in-patients to Dewsbury hospital up to 1961. We have though no actual files of individual patients who attended this hospital. However we wonder if it wa actually Staincliffe Hospital where your mother was admitted as maternity services had been transferred there in 1972. Again, unfortunately we have no patient records held here of that hospital for that "We presume that registers covering those hospitals at the time may no longer survive if they

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have not been deposited in our service by this time This is probably also the case for individual patient files for these hospitals. You appear to have been informed via the NHS trust that records only go bac to 1975 that they now hold ..."

It is just to note the existence of registers of inpatients at hospitals in the Archive Service rather than necessarily within the NHS. Although they weren't able to assist you.

You appealed the refusal in 2010 and that was also -- the appeal was also refused.

MS GHUFRANA QURESHI: Mm-hm.

24 MS FRASER BUTLIN: If we could turn to page 11 of this 25

document, we have the refusal letter. The first fe

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didn't know about anything else. So it wasn't something that, you know, she knew about. She didn't even know what hepatitis C was at the time. So, I only feel she wasn't believed. Just because people in Pakistan with genotype 3 have hepatitis doesn't mean that mum contracted it from Pakistan -- when s he has had a blood transfusion and there is a statement, which I did pass on, where mum goes into a lot of detail saying, "I was admitted in hospital, I was there for three days, my doctor was (unclear)", you know, she knew all the details, you know, exactly when and what happened. So just by saying that, you know, she's got it from Pakistan means they are not believing her, they're not believing she got the hepatitis C from UK. They are not saying that she' had the blood transfusion, and it means that they are not believing her just because she is from a Pakistani background.

MS FRASER BUTLIN: For your note, sir, there is a statement that Ghufrana has translated and it is all signed and written down. It is on page 14 of this document. So it is the same URN but page 14. I want to pick up your work with The Hepatitis C

Trust in our thematic discussion, if I may. And I' conscious of the time. Sir, I wonder if we take

paragraphs are the standard refusal, but if we turn over the page, page 12, it is the second and third paragraphs and this is the substance of the refusal

> "It would be unusual for a person to be given a blood transfusion after a miscarriage in the absence of any particular circumstances that would make it necessary. There is no evidence of any as much circumstances in your case. In addition genotype 3 Hepatitis C with which you are infected is 90% prevalent in Pakistan (as opposed to 50% prevalent in the UK). This suggests that you may well have been infected in Pakistan before arriving in the UK.

"As a result of these considerations we are not satisfied that it is probable that the infection resulted from NHS treatment and accordingly regret that we must refuse your appeal."

In your statement you feel you have said you feel like no one believed that your mum had contracted the hepatitis C in the UK from her blood transfusio n. Do you want to tell us anything about that?

MS GHUFRANA QURESHI: It's because why would mum say that she had a blood transfusion when it was asked as a passing -- you know, that, "Have you ever had a blood transfusion?" Mum said that at the time. At the time we didn't know about the Skipton Fund, we

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a break now and then return for a discussion across 1 2 the whole panel? 3 SIR BRIAN LANGSTAFF: Yes. Let's take a break until 4 11.50 am. 5 (11.21 am) 6 (A short break) 7 (11.50 am) 8 SIR BRIAN LANGSTAFF: Yes. 9 MS FRASER BUTLIN: Thank you. I want to spend a bit of 10 time now with all three of you discussing some 11 thematic issues that have arisen in your evidence. 12

First of all, do any of you have any reflections on whether being part of a minority ethnic communit has had any impact on the treatment you or your loved ones have received from clinicians?

Regina, I don't know if you want to start?

MS REGINA CHEPTANUI: Can you repeat the question? MS FRASER BUTLIN: Of course. Whether being from a minority ethnic community has affected the treatment you have received or the communications you have ha with clinicians, people in the hospital?

22 MS REGINA CHEPTANUI: Yeah, I find out that being black or 23 being minority, because we are all different, when you 24 say anything to doctor, he seemed to change his moo 25 and -- either if it is medication, he will start,

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like, talking to you like you are a child, you haven't got no common sense. And I think that is wrong because we are all human and they haven't got compassion. To me, since I -- since they say -- st art treating me with this viral, this hepatitis C, I find out, oh, the nurses have more compassion than the doctors. I never met my Dr Wright face to face, bu even by him writing to me letters or refusing to sign my form, it is like: you don't get a right, Regina, this don't belong to you, belong to people in this country.

But I did have blood transfusion, so why can't you say, "Maybe you caught it from here or maybe yo caught it from Kenya"? As well, when I think of it when I was younger, we were under British until 1963. So who gave me BCG? It is the British. So he should not judge me like I'm a child that -- or I don't kn ow nothing. We are all equal in God's eyes.

18 19 MS FRASER BUTLIN: Wagar, Ghufrana, do you have any 20 reflections on that?

21 MR WAQAR AHMAD: Yes, absolutely. Yes. Ethnic minority,

especially from India, Pakistan, Bangladesh; 22

23 Asia people, as most of their first language has no 24

been English, I think they have been let down, they

have been let down quite a lot. Yeah? And when

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1 they are talking to?

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MR WAQAR AHMAD: Yes. 2

MS FRASER BUTLIN: Ghufrana, do you have any reflections?

MS GHUFRANA QURESHI: Yes. I would like to say that

I think in terms of the doctors, they didn't show a ny attitude that mum came from Pakistani background or anything like that, but, looking beyond that point, they did have in their head, or they did have it in their mind that she was from Pakistan so that means she's got it from Pakistan, so maybe that came across.

But what I would like to highlight is that nothing was

put in place as a support for mum.

So if you think about it, yes, we were mentioned that there is a buddying system, that was from St James's Hospital directly. When I did inquire, you know, what is the buddy system, there was nothing i place for anybody who couldn't speak English. Mum was never offered -- never offered -- counselling. Whether she took it or not, that would have been a different scenario, but she was never offered counselling pre-treatment, post-treatment, going through cancer, never.

As a family, we were going through it as well, we were never offered any counselling, any support. There was nothing put in place. Whether that was

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I see -- when I go back and see that, a lot of -- s oon 2 after I recovered a bit, I start working with the 3 liver people and try to take them to the hospital, 4 talk on behalf of them and stuff, you know, and a lot 5 of times they have been given a lot of refusal from 6 the hierarchies, from the doctors and that thing, and 7 they have been let down a lot.

It is not -- have I been let down by the -- by that? I think I have been let down. And if my step-sister would never come to rescue me, I wouldn't have been given that treatment what I was given. Because my step-sister was English, white, majority and they will listen more to her than to me, you know? And I think since has things gone better? I think it has gone a bit better, but, you know, not the same what would we accept from -- expect from the doctor s. No. And we have been let down, you know, a lot of the time by them. But things are getting a bit better. And a lot of -- I have seen a lot of people been le down by the doctors and stuff, you know?

21 MS FRASER BUTLIN: And that work you have been doing is 22 through LIVErNORTH.

23 MR WAQAR AHMAD: Yes.

24 MS FRASER BUTLIN: You have accompanied others with liver

25 conditions to try to help them with the clinicians

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1 because we come from an ethnic minority, because no 2 when I look back, you know, there's lots of support 3 groups, there's lots of peer support, there is a lo

happening now, but why not for the BAME community? 4

5 Why not for people who don't speak English? Why no 6 for people who come from a background or come from

7 a country that they don't know what is available?

8 Nothing was put in place.

9 MS FRASER BUTLIN: And in terms of the financial 10 assistance schemes, so the Skipton Fund and the EIBSS, do you have any reflections on the impact of coming 11

12 from a minority ethnic community on your engagement

13 with them?

MS GHUFRANA QURESHI: For my mum's case it was bang in the 14

15 face, wasn't it, that: you come from Pakistan, it i

16 more prevalent in Pakistan, so your genotype C is

17 because you might have got infected from Pakistan. So

18 it was like the doors are shut you on there and the n.

19 And my mother was very independent, she lived her life

20 with her own principles. Money wasn't something that

21 she was going for. I do remember I was more

22 challenging it, to say, "Mum, we will apply again, you

23 know, we'll get more evidence", and she was like,

24 "Just leave it". You know, "Just leave it". So sh

25 didn't want to pursue it any further because it was

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1	like as if she was feeling that, "I don't want anyb ody
2	to judge me that I'm going for the money". So it
3	wasn't that personal financial gain there. It was
4	more for me to accept what has happened, that she had
5	been given a transfusion, she had hepatitis,
6	cirrhosis, cancer, the whole lot, and nobody is there
7	to take that accountability.
8	MS FRASER BUTLIN: Do either of you want to tell us your
9	experiences?
10	MS REGINA CHEPTANUI: My experience with applying for
11	funds, I was told straight when my Dr Wright sig ned
12	the form, I never saw it. Then I was turned down.
13	And at that time it was 2020 lockdown, so I didn't
14	apply in time reapply in time. So they say now you
15	have to fill the form again from to start again.
16	And I did that. I asked for the form. They sent m
17	forms and then I filled my part, and the other part
18	which was supposed to be Dr Wright to sign, I recorded
19	delivery letter all the pack to him to sign and he
20	never replied me. As he's professional, he should
21	reply me, and he never replied. I still got a receipt
22	for when I sent it to him. And then I was ringing
23	them all ringing his office most of the time and
24	the reply was, "Oh, he is going to ring you back", but
25	he never.
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who were born after the transfusion. I was the one who was looking and checking and asking them, "Go and check with your doctor if you have this hepatitis C ".

So this fund, I never got it. And then one day I saw Samantha on the television and they were talking about people who had been rejected not to have the fund, and that's how I end up again repeat -- applying again, because of their help.

So, I did apply again, and this time I had text from my doctor, after Samantha, and -- I can't remember her name -- Susan got in touch with my doc tor to say to them they have to sign this form because it is not up to him to make that decision, if I can ge it or not. And I don't know what they said to him, and I was in Asda doing my shopping and suddenly a text came on and I read the text and the text said that -- I can't remember all of it, but it is still on my phone -- that Dr Hutton has agreed to sign my form and can I bring the form back to surgery? And I wa in tears in Asda. I was so happy that at last somebody agreed to sign my form.

22 And that was in June, I think June 28. And then 23 I think it was Sam or -- why am I forgetting her na me? 24 MS FRASER BUTLIN: Susan, I think.

MS REGINA CHEPTANUI: Susan, who rang me by accident, not

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So last day was when I was told that, "Oh, you cannot get this fund, this fund don't belong to people who receive hepatitis C from overseas".

Then I said to him, "How about people who receive blood transfusion? Because I received bloo transfusion here."

And he said, "No, your G4 type is not found in this country, only in Africa."

So then I asked -- I rang the people who supplied -- who gave this fund and I said to them m doctor refused -- hepatologist refused to sign my form, and they said to me, "You can ask your doctor to do it". So I asked my doctor. So I got another ne form, I asked my doctor to fill it in, and he refus ed. He said to me, "It is only specialist, Dr Wright, who can fill your form". So I was back and forward. And all the time they are giving me the same letter, saying that it is a copy of the letter which Dr Wri ght sent to my surgery, saying that I'm not entitled fo this fund.

So I stop and I say, "Well, I'm not after the money but if there's any help I can get, because I' not getting no help from doctors, I'm not" -- I nev er even one day been asked, "How do you feel?" Or asked how is my children who were born -- the two childre

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knowing what's happened, and I was so over the moon saying, "Oh, the doctor says I can take my form in, he is going to sign for me", and I -- whoa, she was happy, because I had been going through this with them. And then suddenly, on 29 June, another text came, in the morning time, saying, "My apologies" this was the secretary -- "My apologies", that Dr Hutton has refused to sign my form. And I was s upset about it. I cried. And I thought: why are they playing with my life? Because you can't tell somebody, "Yes, I will do it", and then suddenly you've changed your mind.

So to me I start suspecting that he's -- they were talking together with Dr Wright, because the all he put inside my form and said, "You can -- we are going to post it to you", is the same letter from Dr Wright. So, to me, I feel that they are playing with my life. It is better to say to me, "I'm not doing it", than having to say, "I'm going to do it" and then suddenly you've changed your mind. Who do you think you are? You should not treat me like a child. Even I wouldn't do that to my children. I wouldn't say to them, "I'm going to give you this ", and then change my mind.

So there must be something between them which

(16) Pages 61 - 64

1 I find out, because when he said he would sign my you why have you tested for hep C. And they said for 2 form, he did say, "And I will find more notes to 2 so many reason from them: we can't have you as a --3 3 support your claim". So what is this other thing that because you have been tested for hepatitis C, and w 4 they haven't told me or shown me about my -- what h 4 can't -- you can't have insurance for so many reason, 5 is saying, "There are more things -- I will look fo 5 life insurance or that insurance or that insurance. 6 other evidence in the letters in your file to add into 6 So it is a big impact on my family rather than me. 7 your application form"? And then suddenly change his 7 Then, again, you know, Skipton Fund -- has it 8 8 affected me (unclear)? Not really, but, you know, it 9 MS FRASER BUTLIN: We spoke about it earlier, but because 9 has on lot of other people, as I have been working 10 you'd had a BCG in Kenya, then that was the reason for with the LIVErNORTH for years and years and years. 10 the refusal by the Skipton Fund? 11 yeah, and it does affect because of you are -- wher 11 MS REGINA CHEPTANUI: Yes. 12 you belong and where you -- you know, if, like, you 12 13 MS FRASER BUTLIN: Wagar, do have you any reflections on 13 know, ethnic minority, it does affect. It does 14 your interactions with the funds? 14 affect. Honestly speaking, it does affect on them, 15 MR WAQAR AHMAD: Yes. It did impact a lot, right, but by 15 right, because you are only certain -- belong to 16 saying that, like, does it -- you know, what I woul 16 a certain group, right? And as I said previously 17 17 like to say is, like, my wife is -- has impact a lo that, you know, I have a -- like, you know, my 18 on my family and especially on my wife. She --18 step-sister is prone to say that, and she has been 19 whenever -- a couple of times she has applied for -19 telling me, "Oh, go forward, go on, go on, right, y ou 20 maybe for insurance reason and she has to fill 20 deserve for this, you should get this, you should get 21 a form -- but -- am I going out of the way? I don' 21 that, you deserve for this". But, you know, fairly 22 22 speaking, its effect on ethnic minority, they have think I am going out of the way. Anyway, you know, 23 she had -- on certain question conferences or have you 23 been treated differently than to the other 24 been ever tested for hepatitis C? And she marks: yes, 24 communities, yeah. 25 I have been tested for hepatitis C. They don't ask MS FRASER BUTLIN: Because your application was also 65 66 refused because you were born in Pakistan. 1 the patient themselves, that -- the person who's 1 MR WAQAR AHMAD: Pakistan. That's a stigma attached with 2 saying that, "I've had a blood transfusion", why ar 2 3 that, because you were born there, and "You can't have 3 you not taking that on board? Would it have been the 4 this, you can't have that", you know? 4 same if I was a white British person applying and I 5 5 It is sad, like, but this is what is happening, would have put my foot down, would that have been 6 you know. We have moved on but still there is 6 accepted? Or just because she was somebody who 7 7 a stigma attached with us, like, you know, being as couldn't speak the language, I was translating what 8 8 a ethnic minority groups, yeah. she was saying and it wasn't taken on board more 9 MS GHUFRANA QURESHI: I was just going to add to that. In 9 seriously the way it was. 10 terms of the Skipton Fund, when mum's application was 10 MS FRASER BUTLIN: Your mum actually decided not to get 11 rejected the second time and I called again to say. 11 those statements from her friends, because she didn't 12 you know, "I have given the evidence I can get, I have 12 want to make a fuss. You said in your statement that 13 tried to get them from the archives, I can't get 13 your mum was actually very fortunate that there was n't 14 anything else, what else can I provide you to make you 14 a significant difficulty within her close community 15 15 about her hepatitis C but that you have done some work

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realise she has had a blood transfusion?" And the gentleman, I won't mention his name, but, you know, what he did say was that, "Has your mum got any friends that you can get a statement from, from tha time, that can recall that mum had a blood

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transfusion?" And it boggles my mind that the

21 patient, the person having the blood transfusion, has

22 given it in writing, she signed it, I signed it, I've

23 translated it, you are not taking that on board but

you are okay to take another person's statement to

25 consider that, yes, she's had a transfusion. Why not

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MS GHUFRANA QURESHI: I got in touch with The Hepatitis C Trust after mum had gone through her second treatment

MS FRASER BUTLIN: Can you help us what your reflections

are of hepatitis C within the Pakistani community and

what you have seen in terms of how it impacts peopl

25 and I thought, "Well, I've enough knowledge there t

with The Hepatitis C Trust within the Pakistani community particularly and hepatitis C.

MS GHUFRANA QURESHI: I have.

within their communities.

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1 support other people", because mum didn't get any 2 support, there was no counselling, no information 3 shared, because of the language barrier. I was an 4 interpreter, a qualified interpreter at the time --5 well, I still am -- and I knew that there is -- tha 6 value as well, so that was my main reason, to give 7 something back to my own community, to make them aw are 8 about hepatitis C. But when I started doing a lot of 9 work, I actually learnt things from The Hepatitis C 10 Trust. I trained up to be one of their health -- you know -- is it health adviser? I can't remember wha 11 12 it is called. They were delivering some health day 13 where they were explaining what hepatitis is, you 14 know, what you should be eating, you know, how can you 15 change your diet, do exercise. Things that the 16 doctors should have been telling mum. It came from 17 the Trust rather than the hospital. 18 My awareness sessions, I used to go out -- we 19

stands there and try to engage with Asian community

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did some testing on the hepatitis C bus, testing where it was just taking swabs to check whether anybody has antibodies. And we used to go to the Mailers(?), which is more like a concert type thing, where lots of people will be there, lots of stalls, music, it's it's got a very positive vibe, so we used to have the

2 going to take a couple of minutes", and people were 3 reluctant and it was back to what was discussed 4 before, because it is classed as -- because it is 5 linked with HIV as well, because it is linked with, 6 "Oh, it's a bad disease, you're going to spread it" --7 similar to what you were saying, not -- I do know 8 a lot of people in Pakistan do have those 9 misconceptions, that, you know, they are going to pass 10 it on if they're going to sleep with their partner, or 11 they can pass it on to their children, plates were put 12 aside. You know, these were the things that the 13 community were saying. So we did do a lot of work in 14 the mosques, on the Mailers(?), you know, general 15 awareness at events.

and say, "Come on, just have your swabs done, it is

And it was quite scary to think that, you know, why are the people not coming forward? It is because of the taboo. It is because of that stigma attache d. And then being from a BAME background, being from an Asian or minority background where language is also a barrier, not understanding what's the process, no understanding the disease, not understanding the illness, the side effects; there's a lot more barriers than we are sort of touching on.

MS FRASER BUTLIN: Waqar, do you have any reflections on

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         that problem of stigma in the community?
     MR WAQAR AHMAD: Yes. A lot, yes. One thing is like, you
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         know, if I'm going to see my doctor, right, the -- and
         I said I should have been -- "You should have been
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5
         doing this", right? It wouldn't affect anything. But
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         once my step-sister come with me and go and tell th
7
         doctor, "He needs this and you should be doing that",
8
         I don't know why, she will do it. My doctor will d
9
         it. But when I go, even though my English is not bad
10
         as like -- you know, I shouldn't be saying anything
11
         bad about anybody, about English barrier and stuff
12
         like that, but it did affect on doctor and -- and the
13
         other people when my step-sister come with me or wh en
         I go talk to the doctor; it make a big effect on
14
15
         doctor. Why does it affect on doctor? I still don't
16
         understand. Being as a doctor, you've got a degree of
17
         this, this, this, and you've been told to be equal,
18
         you know? But a lot of times it hasn't been
19
         happening. It hasn't been -- and still.
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     MS FRASER BUTLIN: Within the Pakistani community, your
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         own friends and neighbours, what effect has the
22
         hepatitis C had on your relationships with others i
23
         the Pakistani community?
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like, to learn hepatitis C is lot more than -- you know, you've got to understand what hep C is. But they don't want to come out and to learn what is th difference between hepatitis C and AIDS. They -loads of time they think it is AIDS and hepatitis C I mean, I feel sorry for the people who have AIDS, honestly speaking, you know, what they go through. It is a very, very hard life they are having. Well, hepatitis C is the same. Like, you know, in my community, if I say, "Oh, well" -- if they say, "Oh well, he has got hep C", and -- they don't want to learn where and why I've got a hep C, and that can be treated, it is very hard -- it's very hard in our community to learn. It should be learning but, you know, we're a little bit behind. But, you know, things are getting better. I will say, yes, they are -- sure they are getting better, with knowledge with people and stigma attached, oh, the hepatitis C kills you. Well, it is a killer disease, it's -- you know, but if you have been affected with it and, you know, treated on the right time, right way, yeah.

MS FRASER BUTLIN: Regina, you mentioned in your evidence a feeling of stigma within your community as well. Do you want to tell us anything more about that?

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MR WAQAR AHMAD: Well, it is a stigma attached with hep C.

1	MS REGINA CHEPTANUI: Yes, the friends I had before,	1	things which I didn't want to do.
2	really they are no longer my friends because I have	2	I was very active person, I was outgoing person.
3	this hepatitis C. And first they ask what it is.	3	When I was young I was doing all the sport, I was
4	I say it is a blood transfusion I was given. But i	4	taking part in Kenyan sports. And now I don't feel
5	the language they think you've got HIV. But even i	5	even to do my knitting. I used to do knitting with
6	I I was lucky I didn't have HIV, because I was	6	the knitting machine, but I don't. All my comfort now
7	given blood at that time, but I don't really apart	7	is my Bible, because I know God is love.
8	from my church and my children, I try not to say	8	MS FRASER BUTLIN: Do any of you have any thoughts on how
9	nothing to anyone. But I feel that even to have	9	those barriers and the stigma within your communities
10	social life, I can't. Because I have to be to	10	might be tackled and challenged and addressed? Do you
11	speak the truth, to tell people. If I'm going out	11	have any thoughts of what might change things?
12	with them, I will say to them, "Oh, I was diagnosed	12	MS GHUFRANA QURESHI: I think professionals need to know
13	with hepatitis C because of blood transfusion", the	13	as well, because, like, I remember when mum was
14	I feel I can't tell people that because I think the	14	positive, round about 2009, I went to the doctors
15	will put me aside completely.	15	myself, to my GP, because I've got eczema,
16	So I rather suffer silence. Only my children	16	obviously my skin can flare up quite bad at times, and
17	and their family knows. But I don't like talking too	17	I was mum's carer as well at the time, so when I we nt
18	much about it because I still feel that it's something	18	to the GP and I requested to have a blood test done
19	I didn't do it knowingly. If it was something I do ne	19	for hepatitis C, and he was like, "Why do you want to
20	knowingly then I can take that blame, but I didn't	20	have this blood test done?" And I had to explain why,
21	know. So the only people I talk to when I feel low	21	which if you consider that I went there, it just
22	a bit, not my doctors, only Susan and Sam, because	22	needs to be regarding me, that I am asking for a blood
23	it is easier, because they said to me, "We are just at	23	test. Because it is not a routine blood test. But
24	the end of the phone", and to me they are my life	24	then I have to explain that mum is positive, that's
25	saving because they show me and they help me to do	25	why I need to have mine done, which they did go ahe ad
	73		74
	10		74
1	with.	1	a hepatitis C patient and you have to go to the
2	But then, on the other hand, whoever did mum's	2	hospital".
3	blood test it is not a routine blood test, so	3	And seeing it is, like you know, it's
4	I don't know how that happened, so nobody conveyed	4	affecting a lot on my community, right? Being as a
5	that message back. So those barriers need to be	5	hepatitis C. Right? And I think we have to
6	overcome as well, like the professionals need to	6	certain people have to come out to help us, right?
7	convey the message in a proper way, so that the	7	Even though we should be helping each other. But
8	patient knows what's happening. And if they can	8	I can say hierarchy people should come out and talk
9	understand how to treat somebody or how to respond to	9	about hepatitis C clearly: what does it affect and
10	something, then obviously the community will	10	what doesn't it affect on people.
11	understand better. Because if somebody goes to the	11	MS GHUFRANA QURESHI: I think it is part of the
12	doctors, if the doctors don't know what hep C is, how	12	understanding that it is a blood-borne virus. That
13	do you expect the patient to know?	13	never gets mentioned. Nobody told me or mum that, you
14	MS FRASER BUTLIN: Do either of you have any thoughts on	14	know, you need to be careful when she goes for bloo
15	how communities might be supported to understand	15	tests or you have mentioned the dentist. That's
16	hepatitis C better?	16	why it's just recalled that. Nobody told me tha
17	MR WAQAR AHMAD: Yes, you know, I'll just I take you	17	I've got to tell the dentist, I've got to tell the
18	back. After I had hepatitis C, you know, and going	18	staff that were taking the bloods and stuff. It wa
19	back to my doctor to my dentist, right, and he	19	actually my own sister who said that, "Whenever you
20	found out, like, I had a hep C and, you know, he	20	take mum, just let the professionals know that, you
21	refused to treat me, my dentist, and he said, well,	21	know, mum's positive", and then they would put the
22	I needed to go to a dental hospital because he can'	22	sticker on, the highlighted yellow sticker to say, you
23	treat me. I did say to him a couple of times before,	23	know
24	"Why can't you do it?" I mean, you know? He says,	24	But why did I have to go around telling
25	"I'm sorry, we can't treat you because you are	25	everybody?
	July, in the control of the con	_0	

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1	Again, it is, like, that is the main cause. You	1	were going to have the BCG done, and we would queue
2	know, like, if people don't know, you are going to	2	and waiting for these doctors or qualified peopl
3	spread it more. Hepatitis C Trust is doing so much	3	to give us BCG, and then we would be checked again in
4	work that that awareness is there, but then	4	two weeks' time. If it hasn't swollen then you hav
5	professionals need to be trained up a lot more.	5	to have another one. But if the needles were dirty
6	MS FRASER BUTLIN: Regina, do you have any thoughts?	6	who knows? I don't know. All I knew that they are
7	MS REGINA CHEPTANUI: I think we should really have	7	going to protect us from tuberculosis and all
8	education for even in school, telling children,	8	different infections. So we had no choice to say no.
9	because even little children, some of them got	9	SIR BRIAN LANGSTAFF: Do you know if any of your
10	hepatitis C and they get stigma. So it is good to	10	classmates from school have got hepatitis?
11	explain to people that hepatitis C is not that	11	MS REGINA CHEPTANUI: No, because I left Kenya in 1972,
12	dangerous. You cannot catch it just by shaking hands.	12	and after school we all went separate ways. So
13	It has to be blood transfusion. Because if they know	13	I don't know if they because some of them, they
14	that, then they won't segregate other people becaus	14	never got tested or given blood, so I don't know.
15	of hepatitis C.	15	SIR BRIAN LANGSTAFF: You haven't kept in touch?
16	MS FRASER BUTLIN: Sir, those are the questions I have for	16	MS REGINA CHEPTANUI: No.
17	the Panel. Is there anything you would like to raise?	17	SIR BRIAN LANGSTAFF: That's all that I wanted to ask.
18	SIR BRIAN LANGSTAFF: There is just one thing I would like	18	MS FRASER BUTLIN: Regina, is there anything else you
19	some more details of, and it is from Regina. It is	19	would like to say before we finish today?
20	about your BCG in Kenya. Where were you living in	20	MS REGINA CHEPTANUI: Yes, before we finish today I would
21	Kenya at the time?	21	like to say that we should not be treated like we a re
22	MS REGINA CHEPTANUI: I was living in Kenya, I was born in	22	nothing. Because to me I feel that, up to today, i
23	Nanyuki. I don't know if you know Nanyuki. But	23	I didn't have Samantha and
24	that's when when I went to school, we were told	24	MS FRASER BUTLIN: Susan.
25	you know, we were under British and we were told we	25	MS REGINA CHEPTANUI: Susan. I don't know why I keep
	77		78
1	forgetting her name I could apply for this fund,	1	Skipton Fund. We applied three of us for
2	because it is only by watching television and I saw it	2	Skipton Fund. It was me and two other people, and the
3	and suddenly I took the number straightaway and	3	other two people belonged to, I would say nothin
4	I said, "I have to find out how I can get this help ".	4	wrong with that it was two of them was my very
5	All I rely on I don't want too much, whatever it is	5	close friend, white, and it was me. But they have
6	they give me, it is okay, because I I receive my	6	been given the fund (a) on their first application.
7	pension, occupational pension, and I receive my	7	Right? And I was refused. Right?
8	working pension. So it is only I will get less wha	8	I was refused because they say I was born in
9	I had because I retire medically. I did not retire on	9	Pakistan and, therefore, I got the disease from the re.
10	my retirement age.	10	But we are saying that, you know, the gentleman jus
11	I think when doctor say, "No, you are not	11	said asked her that, you know, "Where you are
12	entitled for it", and the people who are supposed t	12	born?" To me, I was born in a very clean atmospher
13	make judgment, they are not getting that form because	13	in Pakistan, and the place was called Lyallpur, which
14	he don't want to sign, I think that's bad. And	14	was you know, the person who was there, they built
15	I can't tell him to do it, I can't force him becaus	15	a new city, Lyallpur, on his name, and it was a ver
16	I'm the underdog and he is the hierarchy, because h	16	clean atmosphere, very clean when I left Pakistan.
17	is a doctor and I'm nothing, I'm a patient.	17	And I went back again I hardly been back to
18	And what they done to me I feel the last one	18	Pakistan.
19	was the worst even to treat me like, "I will sign your	19	So they are saying that, you know I always
20	form", and then suddenly change their mind. That's	20	get confused when they say that to me, "Oh, because
21	not the way to treat people, human beings, we are a ll	21	you were born in Pakistan and you got it". I'm sor ry
22	equal.	22	to say that it is not the case. It is unfair to sa
23	MS FRASER BUTLIN: Waqar, is there anything else you would	23	that. You know, when they write, "Oh, you have bee
24	like to say?	24	refused because you were born in Pakistan". Excuse
25	MR WAQAR AHMAD: Yes, you know, particular to the	25	me? What? Because I was born in Pakistan? And if
	70		00

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1	I would have been born here and my name had been	1	problem in the communities of which you are also part	
2	different and that? So it is a very confusing thin g.	2	with stigma, but it makes it all the more important	
3	You know? Yeah?	3	for people with your experiences to be prepared to	
4	And sometimes you are let down by the people, by	4	come here despite the difficulties, the difficultie	
5	the organisation, which I think we shouldn't.	5	of health, the difficulties of having had a stroke,	
6	MS FRASER BUTLIN: Ghufrana, is there anything you would	6	difficulties of the deep emotions that have been on	
7	like to add?	7	display, that you have been able nonetheless to com	
8	MS GHUFRANA QURESHI: Nothing can bring my mum back but	8	here and to say out loud what others may shrink fro	
9	I think it is about time somebody takes the	9	doing simply because they feel in some way	
10	responsibility; somebody puts their hands up and says,	10	disadvantaged by the system.	
11	"Yes, we gave the blood. She did have a blood	11	So it is very important, all the more important	
12	transfusion. She did get hepatitis C from that blo od	12	that you have had the greater challenges in coming	
13	transfusion. She had cirrhosis, she had the cancer".	13	forward to tell your story, and it is not easy for	
14	Somebody has to take accountability and that's what	14	anyone, let alone for yourselves. So thank you ver	
15	I think.	15	much.	
16	It does make me angry. It makes me very angry	16	MS GHUFRANA QURESHI: I want to say thank you to	
17	because, yes, she wasn't believed; she is the one w ho	17	everybody, even during the break, the support I hav	
18	went through it, we are the ones who are going through	18	got and, again, there is that connection. So thank	
19	it, and there's nobody taking accountability and	19	you, everybody.	
20	that's what needs to happen, somebody needs to take	20	MR WAQAR AHMAD: I appreciate everyone. I got a lot of	
21	accountability.	21	help from all of you and it makes me more stronger to	
22	SIR BRIAN LANGSTAFF: Thank you, all of you. I shan't	22	go out and fight for the people. Thank you.	
23	thank you individually but can I thank you together	23	MS REGINA CHEPTANUI: Thank you very much. As you know	۷,
24	Given that you have been asked about stigma and eac	24	many of us are on the same road and when I was aske	
25	of you has indicated that there is a particular	25	to come and speak, I was scared, but now I am stron	
	81		82	
1	that I can pass on to others if they need help. Th ank	1	INDEX	
2	you.	2	MS REGINA ALICE CHEPTANIU (sworn)	,
3	MS FRASER BUTLIN: Sir, on Monday we will be hearing from	3	MR WAQAR BASHIR AHMAD (sworn)	
4	experts from the Public Health Administration Group	4	MS GHUFRANA QURESHI (sworn)	
5	SIR BRIAN LANGSTAFF: So the Public Health and	5	Questioned by MS FRASER BUTLIN	
6	Administration Group experts Monday and I think	6	•	
7	Tuesday	7		
8	MS FRASER BUTLIN: Monday and Tuesday.	8		
9	SIR BRIAN LANGSTAFF: of next week.	9		
10	10.00 am, Monday.	10		
11	(12.34 pm)	11		
12	(The Inquiry adjourned until 10.00 am on Monday,	12		
13	3 October 2022)	13		
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