

1

Friday, 10 May 2019

1
2 (2.31 pm)
3 **SIR BRIAN LANGSTAFF:** Our next witness would I understand
4 wish to be known as Colette.
5 **MS RICHARDS:** That's right, sir, Colette Wintle.
6 **COLETTE WINTLE, affirmed**
7 **Questioned by MS RICHARDS**
8 Q. Colette you're a symptomatic carrier of haemophilia A.
9 Can you tell us what that means.
10 **A. Well, females generally have in the past been**
11 **understood to be carriers of the defective gene,**
12 **Factor VIII, but in my family that has not been the**
13 **case, that many of the women in my family have been**
14 **symptomatic of the condition as well and there are**
15 **other bleeding disorders that have come into play,**
16 **that have been discovered later, as happened in my**
17 **case, so I'm not just symptomatic of haemophilia A but**
18 **I also have Factor XI deficiency as well.**
19 Q. The Factor XI deficiency was diagnosed in the mid-90s?
20 **A. Yes.**
21 Q. In terms of being a symptomatic carrier of haemophilia
22 A, can you tell us how that was diagnosed and how the
23 symptoms, whether of that or that combined with the
24 Factor XI bleeding disorder, have manifested
25 themselves over the years.

3

1 **A. Yes.**
2 Q. And you continued to experience bleeds over the years?
3 **A. Yes, that's right.**
4 Q. You were first given factor products, Factor VIII
5 products, in 1976 when you were 17 years old?
6 **A. Mm-hm.**
7 Q. Can you tell us about the circumstances in which you
8 were given those products.
9 **A. Yes. From a very young age, I think the age of three,**
10 **I suffered from chronic throat infections and my**
11 **mother's doctor in the early days did not want --**
12 **I should have had my tonsils out when I was small, and**
13 **because there was not -- you know, there was a risk.**
14 **He knew that there was a risk because my mother had,**
15 **you know, was a problem herself with the bleeding and**
16 **they were terrified that I would have an issue, so it**
17 **was put off and put off and, eventually, I lost a lot**
18 **of schooling because I was constantly off with**
19 **tonsillitis and throat infections, et cetera, and sore**
20 **ears, et cetera.**
21 **So it was decided that they would take the**
22 **tonsils out. So I was still a minor in those days so,**
23 **obviously, it was my parents who would have been**
24 **talking to the doctors about it.**
25 **My parents were never counselled by the doctors**

2

1 **A. I was diagnosed at the age of three. My mother was**
2 **known to the professor of haematology who established**
3 **the haemophilia centre in the Glasgow Royal and when**
4 **my mother started a family he asked that, you know,**
5 **her children be brought in so that he could test.**
6 **I am one of twins. I have a brother and an older**
7 **sister.**
8 **So in 1962, Professor Douglas as he was known**
9 **tested both my sister and myself, didn't expect to**
10 **find it in my brother and, of course, did not but we**
11 **were found to be carrying haemophilia A.**
12 **But the difference was that, as I was growing**
13 **up, I was much more like my mother in the way that**
14 **I demonstrated that symptomatic behaviour in terms of**
15 **bleeding pattern. So I bled every day from my nose**
16 **all the way into adulthood. I have spontaneous bleeds**
17 **into muscle and tissue, small joint bleeds. I still**
18 **do and have had some serious internal bleeds.**
19 **It's had a huge impact on my life. I can't**
20 **really remember a period of time where I've not been**
21 **going to hospital for something and it's involved the**
22 **bleeding aspect, yes.**
23 Q. In your teens, by the time you got to the age of 16
24 you were severely anaemic. That affecting your
25 schooling.

4

1 **on what type of clotting products that they would use**
2 **if I bled so there was no informed consent on what**
3 **they would use, and it's interesting that laterally,**
4 **years after this has happened, and I sought to get my**
5 **records from the Glasgow trusts, which it was a hell**
6 **of a fight to get them, I discovered a slip of paper**
7 **demonstrating clearly that the intention from the**
8 **haematologist at the time was that I would be given**
9 **cryoprecipitate.**
10 **Someone put a line through that and put**
11 **Factor VIII but they didn't sign that letter to say**
12 **why they had chosen to change that course of**
13 **treatment.**
14 Q. We can have a look at that document. It's 1056003,
15 please, Paul. If we could just have -- thank you.
16 "This patient is a" -- we've got the date
17 10 June 76:
18 "This patient is a haemophilia carrier and has
19 been given ..." and as you said "cryoprecipitate" is
20 crossed out and "Factor VIII concentrate" handwritten
21 over by the haematology staff.
22 "After-care: routine plus", and then again it's
23 crossed out and we have "Factor VIII" written over
24 that, "... the latter under the direction of the
25 haematology department", et cetera.

5

1 You've subsequently discovered the particular
2 factor products that you were given in 1976. What
3 were they?
4 **A. Hemofil and I think Profilate was the other one.**
5 Q. You have said you don't think your parents received
6 proper counselling about the nature of the products?
7 **A. Mmm.**
8 Q. As far as you are aware were your parents told
9 anything at all about any risks of infection
10 associated with such products?
11 **A. No, not at all. In fact, my mother expressed shock**
12 **years later after I discovered what I'd actually been**
13 **given. She said, "I had no idea. I assumed that what**
14 **you would be given was British products". The idea**
15 **that, you know, I was being injected with blood**
16 **products which we now know were 100 per cent risk of**
17 **hepatitis and the source form where they same, which**
18 **was disgusting, and it would have absolutely broken**
19 **the protocol of how we collected blood in this**
20 **country.**
21 **You know, why on earth would you go to the**
22 **United States where people, the wrong type of person**
23 **is attracted because they are paid for their blood,**
24 **when you have a system in the UK here where that --**
25 **it's a gift, you know. So, yes, it blows my mind that**

7

1 **finally recovered and she's going home but your**
2 **daughter will never be the same again".**
3 **That for me, knowing what I know now, was quite**
4 **a significant thing to say. My mother sadly didn't**
5 **question it, but those were the days of the doctor's**
6 **paternalistic attitude. You didn't question them.**
7 **The white coat knew everything and you just didn't**
8 **question. So my parents, my mother particularly**
9 **because she was the one that was, you know, looking**
10 **after me, my father was at work so he wouldn't come in**
11 **and question, but my mother was very upset for years**
12 **after that and regretted not questioning.**
13 Q. You didn't receive any further blood products between
14 1976 and 1982 following the treatment you have just
15 described, although you did have bleeding episodes
16 during that time?
17 **A. Yes, I did. I actually at one point bled for several**
18 **days from a duodenal ulcer. I did suffer, well, as**
19 **I said I never stopped having daily nose bleeds and**
20 **they could stretch up to several hours but I was never**
21 **offered any treatment or encouraged to come in and**
22 **have treatment.**
23 Q. In that period those five or six years before we get
24 to what happened in 1982, what, if anything, do you
25 recall about how you were feeling and your physical

6

1 **any doctor, you know, would be happy to take that risk**
2 **and I'm afraid to say that I know that by 1976 it was**
3 **quite evident that the knowledge of that had been**
4 **there for some years of what those risks were but they**
5 **most certainly were not imparted to my parents and, of**
6 **course, I was a minor so I had no opportunity of**
7 **discussion at all.**
8 Q. There was a comment a doctor made to your mother on
9 the day you were discharged from hospital which has
10 resonated over the years with you and, prior to her
11 death, with your mother. What was that?
12 **A. Yes. I'd had a pretty traumatic month of being in**
13 **hospital. I lost a tremendous amount of blood.**
14 **I haemorrhaged very, very badly -- very poor nursing,**
15 **I have to say, post surgery. There was a nurse on the**
16 **ward insisted that I swallow down large lumps of meat**
17 **and they tore the clots away from the back of my**
18 **throat and, well, I actually almost died. The priest**
19 **was called and I was given the last rite's. I had the**
20 **curtains drawn around me for a whole week because they**
21 **were just expecting me to pass. I just couldn't stop**
22 **haemorrhaging.**
23 **I did recover and on the day that I was**
24 **discharged the doctor came to see my mother and he**
25 **said to my mother, "Well, I'm glad that Colette's**

8

1 health generally?
2 **A. Well, it took me a long time to recover from all that**
3 **blood loss and, you know, physically drained. I had**
4 **dropped down to six and a half stone. It took me**
5 **a very long time, but one thing that never was right**
6 **again was my levels of energy. I would describe it as**
7 **almost permanent malaise and as a young woman, 17 and**
8 **growing into, you know, future adulthood, it's a time**
9 **of your life when you expect to be full of energy and,**
10 **you know, bouncing around.**
11 **I used to sleep for hours. I remember one**
12 **occasion I think I slept solidly for 24 hours. My**
13 **mother kept coming in to try and get me awake and**
14 **I just would drift off again. I was exhausted all the**
15 **time.**
16 Q. By 1982, you'd moved to Kent and you were either about
17 to start or had started training as a nurse.
18 **A. Yes.**
19 Q. You were treated in Kent, in Tunbridge Wells, again
20 with blood products, factor products. What can you
21 recall about that? What was the intervention and what
22 happened?
23 **A. I had developed quite, you know, marked pain in my**
24 **back and I had terrible sciatica down one side of my**
25 **body and they identified I had scoliosis but also**

9

1 I must have had a trapped nerve and it was decided
2 that the course of action to get me sort of back into
3 my training was to do a spinal manipulation under
4 general anaesthetic.

5 The cover for that would be DDAVP. The advice,
6 as I understand it from letters that, you know, I've
7 now seen laterally, to my GP and I think Dr Townsend,
8 who was the orthopaedic surgeon who was doing the job,
9 would be that he would liaise with Dr Taylor at
10 Penbury Hospital, which was the nearest hospital, and
11 although I think I had at that point I was registered
12 at the Royal Free but they were sending the advice
13 down to the local hospital, and it was quite clear in
14 that letter that I was supposed to be given safe --
15 well, what I know now would be a safer blood product.

16 Q. What blood products were you in fact given in the
17 course of this surgery in 1982?

18 A. I was given Factor VIII.

19 Q. You've subsequently ascertained and we will come on
20 later to subsequent meetings you had with the doctor
21 in question, but you've subsequently ascertained that
22 it was probably Factor VIII products from
23 a pharmaceutical company called Immuno?

24 A. Yes.

25 Q. On this occasion in 1982 were you advised now as an

11

1 really, really bad and that's why I consulted with the
2 GP.

3 I was, at that point I was working in a surgical
4 ward and I was struggling to get through the day and
5 so I knew that there was something not right. So
6 I consulted with two GPs and their attitude was,
7 "I think you might be just imagining the symptoms of
8 some of your patients that you are nursing", a pretty
9 appalling thing to say.

10 No, I wasn't imagining. The physical
11 evidence -- also I was saying to them, "Well, look, my
12 urine's really dark, you know, that's not right and
13 I just feel terrible and I feel sick. I want to be
14 sick all the time". No investigations, no follow-up,
15 nothing.

16 On this one particular day I just simply
17 couldn't get up and go to work and my sister said,
18 "I'm going to call the GP out", so she called the GP
19 out and he did the same thing. Completely dismissive,
20 didn't ask about any history or, you know, why this
21 might be happening and just said, "Oh, you know, she's
22 fine. She can go back to work. There's nothing wrong
23 with her".

24 Q. Now, you did go back to work --

25 A. Yes.

10

1 adult or informed about any risks of infection or
2 given any -- involved in any discussions --

3 A. No.

4 Q. -- with the doctor about different products?

5 A. No. In fact, what actually happened was, as often
6 happens with mild haemophiliacs because they are not
7 treated prophylactically, they don't have bottles in
8 front of them with warnings or labels or anything.
9 What you are presented with is the syringe with the
10 already made-up product ready to inject into your arm.
11 So there's nothing, you know, to say that there's any
12 risk there, so there was nothing evident for me, and
13 most certainly there was no discussion. You simply
14 turned up and said this is your clotting products, and
15 they were injected and that was it.

16 Q. Now, after you had had those products in 1982, in the
17 period 1982-1983 you began to feel very unwell and you
18 went to see the GP or, indeed, more than one GP.

19 A. Yes.

20 Q. What kind of illness were you or symptoms were you
21 experiencing and what reactions did you get from the
22 GPs?

23 A. I was starting to lose weight rapidly. My colour was
24 odd. I felt highly nauseous. Just smelling food made
25 me feel sick. I had no energy. I just generally felt

12

1 Q. -- as a nurse.

2 A. Mm-hm.

3 Q. There came a point in 1983 when you were diagnosed
4 with hepatitis B but not by your GP or via the GP
5 route. Can you tell us how that diagnosis came about.

6 A. Yes. This particular day I had been left to draw up
7 various injections and drugs for the next drug round
8 that was going to happen in the afternoon. Sister had
9 gone off the ward and left me to do that and I can
10 remember, it was an old fashioned hospital and I can
11 remember the old china sinks they had, hanging over it
12 thinking, "Oh God, I'm just not going to get through
13 this. I don't know how I'm going to keep going but
14 I have to do this".

15 Just at the point where I was standing doing
16 that, across the doorway came a lovely chap. He's now
17 an eminent liver surgeon at King's, but he was
18 a registrar in those days, called Nigel Heaton, lovely
19 chap, he came past and then he walked backwards and he
20 looked at me, and he said, "Colette, can I have
21 a word? Come here". Anyway, I went and spoke to him
22 and he said, "Just turn around and look at me". He
23 said, "Do you know you're jaundiced? How do you
24 feel?" I said, "I've been feeling terrible". He
25 said, "Why haven't you been to a doctor?" I said, "I

13

1 have. Three times I have consulted with a GP". He
 2 shook just his head and he said, without knowing it,
 3 "I think you've got hepatitis". He said, "You look
 4 dreadful. You are jaundiced".
 5 So he said, "Look, stop what you are doing."
 6 I said, "Oh, I'll get into terrible trouble", because
 7 the sister that I worked for, she was an old tartar of
 8 an Irish sister. You didn't dare cross her and not do
 9 your job because she'd be on you. He said, "I'll deal
 10 with her. You go off and do what you know to do". He
 11 said, "You know how to test the bilirubin in your
 12 urine". He said, "Do that, meet me on the other ward
 13 next door, a female surgical, and I will take a sample
 14 of your blood but I won't sent it locally. I will
 15 sent it off to London", and he did. And he said, "Get
 16 your" -- because we used to wear the nurse's cape in
 17 those days, "Get your cape and go home". He said,
 18 "You should not be on this ward, you're not well, and
 19 don't come back until I tell you".
 20 I said, "Okay", so I went home and told my
 21 sister and she said, "Oh my Lord", she said, "I knew
 22 there was something wrong with you". Okay, so we
 23 waited a week and he phoned me at home and said, "I'm
 24 sorry to tell you, Colette, but", he said, "you have
 25 got hepatitis B and you can't come back to work".

15

1 have up on screen please 1056010.
 2 You will see, Colette, this is a letter dated
 3 22 February 1984 and it's from the Royal Free from
 4 Professor Kernoff, consultant haematologist, to your
 5 GP and it's about you and your sister; is that right?
 6 **A. Mm-hm.**
 7 Q. When did you first see this letter?
 8 **A. This morning.**
 9 Q. You've asked for your medical records over the years
 10 on a number of occasions --
 11 **A. Mm-hm.**
 12 Q. -- from the Royal Free; is that right?
 13 **A. Yes. I actually had to write not once but three times**
 14 **to the Chief Executive to complain because they would**
 15 **send out parts of my records. Interestingly, and most**
 16 **haemophiliacs will connect with this, general records**
 17 **are kept in a separate part of the hospital but the**
 18 **blood treatment records are kept in the haemophilia**
 19 **centres, so they are separated, so they have complete**
 20 **control over them. So when I requested my full**
 21 **records I was getting them in portions, bits here and**
 22 **bits there.**
 23 **That letter -- that's the first time I've seen**
 24 **that is today. I've never seen that before but that**
 25 **makes it all the worse, that first sentence there,**

14

1 So I then had to phone up and discuss this with
 2 my training tutor and as soon as the hospital found
 3 out they couldn't wait to get rid of me, and I asked
 4 about, "If I get over this and I'm well enough, can
 5 I come back and finish my training", and I was told,
 6 "No".
 7 Q. Can you recall what, if any, treatment you received
 8 for the hepatitis B at that point in time?
 9 **A. None.**
 10 Q. What impact did that attack of hepatitis B have on you
 11 at the time? Obviously, you weren't able or weren't
 12 permitted to go back to work. How else generally do
 13 you recall feeling?
 14 **A. Desperately ill for a long time. In fact, I was ill**
 15 **with that hepatitis for a further two years and**
 16 **I didn't -- I wasn't able to return to work until 1985**
 17 **and I was reliant on my sister keeping me living with**
 18 **her and looking after me, and she was a young Mum and**
 19 **struggling herself because she actually had also been**
 20 **infected the same year, earlier that year, after her**
 21 **first baby was born.**
 22 So there you had two of us infected from the
 23 same hospital by the same doctor and neither of us had
 24 any follow up.
 25 Q. Now, I'm going to ask you to look at a letter. Can we

16

1 **because as I read it it's quite obvious they were**
 2 **aware of the risks of using commercial products.**
 3 Q. Just for the sake of clarity, this is a letter
 4 supplied to the inquiry by the Royal Free and shown by
 5 the Inquiry to you.
 6 **A. Yes.**
 7 Q. If we just look at it, it refers to a phone
 8 conversation on 20 February of that year and then it
 9 says this:
 10 "Because of the risk of hepatitis after
 11 transfusion of Factor VIII concentrate being very high
 12 in infrequently-treated patients, we try to minimise
 13 blood product exposure when treatment is needed to
 14 prevent or stop bleeding."
 15 Just pausing there, Colette, were you ever told
 16 at the time, 1993-1984, that there was a very high
 17 risk of hepatitis for infrequently-treated patients
 18 such as yourself if Factor VIII products were used?
 19 **A. No, never, and this makes it all the more horrific**
 20 **because exactly a year later the Royal Free reinfected**
 21 **me with hepatitis C.**
 22 Q. We will come on to that. The letter continues:
 23 "DDAVP injection has proved to be very useful in
 24 this respect ..." and goes on to explain why and then
 25 in the last sentence of that paragraph:

17

- 1 "If DDAVP fails or a major elective procedure is
2 to be undertaken, we would prefer cryoprecipitate to
3 Factor VIII concentrate, because the former is
4 prepared from the plasma of many less donors."
5 **SIR BRIAN LANGSTAFF:** The other thing which it notes is
6 that you have what it describes only mildly depressed
7 Factor VIII levels.
8 **A. Interesting because my Factor VIII levels started off
9 in single figures as a child. At the point that they
10 were talking about mildly depressed it might have been
11 23 per cent and it's gradually come up over the years.
12 It still floats below 50 but, of course, also I had
13 Factor XI that hadn't been diagnosed at that point
14 which didn't help so it made things worse when I had
15 a bleed. But, yes, they would often describe it as
16 mildly depressed. Of course they still held the
17 attitude in those days that I was just a carrier.**
18 **MS RICHARDS:** Now, were you told anything at all at the
19 time about the availability of DDAVP?
20 **A. I don't honestly recall. I was mildly aware of the
21 fact that the DDAVP was mentioned but there weren't
22 any discussions --**
23 **Q. Was there any --**
24 **A. -- that I can recall.**
25 **Q. -- discussion with you about there being this**

19

- 1 your sister were given a supply of DDAVP at home?
2 **A. No.**
3 **Q. No, you don't recall or, no, you weren't given?**
4 **A. No, we weren't given a supply, no.**
5 **Q. Were you given -- it seems unlikely if you weren't
6 given the DDAVP, but was anything told to you about
7 record sheets or the collection of national data or
8 assessment of the impact of DDAVP?**
9 **A. No.**
10 **Q. Then if we have the last paragraph, please, Paul,
11 first sentence. It says this:**
12 "If treatment with DDAVP is unsuccessful blood
13 product therapy may be indicated and I think it is
14 important again for you and your sister to appreciate
15 this."
16 Were there discussions with you about the
17 potential for future need for blood product therapy?
18 **A. I mean, it seems quite incredible to me that, you
19 know, this advice and, you know, suggestion of
20 treatment, et cetera, and, you know, Dr Taylor would
21 be established with the local hospital and Dr Taylor,
22 Dr Taylor not only did he not impart to me when he was
23 busy injecting the commercial product into me, not
24 only did he not impart to me the risks of what he was
25 doing, but he also failed to tell my sister in the**

18

- 1 hierarchy of treatment and for you or your sister
2 ideal was DDAVP, if that failed or there was to be
3 a major procedure, cryoprecipitate, and only if those
4 two were unavailable, effectively, Factor VIII? Was
5 that discussion ever held with you?
6 **A. No, because if it had been have been then I would have
7 been aware there was risks involved in this treatment
8 and I wasn't aware of the risks at that stage, no.**
9 **Q. If we then just look at the next paragraph there's
10 a reference to a number of the Professor's patients
11 with mild Factor VIII deficiency being treated by GPs
12 with DDAVP and that is suggested for the GP to
13 consider as a practical proposition.**
14 Then if we go over the page please, Paul, we'll
15 see the second paragraph on that page, Colette, we'll
16 see the professor saying:
17 "If you have problems in obtaining supplies of
18 DDAVP, I should be willing to give you and your sister
19 a limited supply to keep at home."
20 Then there's reference to record sheets being
21 completed for the purpose of national data being
22 collected, the view being expressed there that we're
23 interested in assessing the blood product saving
24 impact of DDAVP.
25 Do you recall whether at this time, 1984, you or

20

- 1 **earlier part of that year and, in fact, he refused to
2 see her in clinic.**
3 **She twice tried to get an appointment to see him
4 and she was rebuffed. She then approached him when
5 he -- because she was nursing in the other hospital
6 that was linked to the one I was working in. She
7 actually approached him on the ward twice and said,
8 "I need to speak with you", and he rebuffed her again
9 and actually told her off for being unprofessional in
10 approaching him, you know, whilst on the ward and
11 that, you know, "See me in my clinic", and she said,
12 "I've tried twice and I can't get an appointment with
13 you".**
14 **So the communication level was utterly
15 disgraceful and, you know, when I think about the way
16 she was treated the obstetrician when my sister was
17 rushed back into hospital after a massive haemorrhage
18 actually stood at the end of her bed and said, "people
19 like you shouldn't be allowed to have children".**
20 **So you can see the level of contempt that we're
21 talking about, so all this -- this letter would
22 suggest that there's great communication going on and
23 advice. No, that's not the case.**
24 **Q. So you have said none of this was imparted to you by
25 Dr Taylor?**

21

- 1 **A. No.**
 2 Q. It's a letter between the Royal Free, [redacted], and
 3 your GP. Was any of this information shared with you
 4 by your GP or by the Royal Free Hospital?
 5 **A. No, no.**
 6 Q. That's 1984. In 1985, you were given treatment again
 7 for a third time with Factor VIII products.
 8 **A. Yes.**
 9 Q. Where was that treatment given?
 10 **A. The Royal Free.**
 11 Q. You were given treatment with Factor VIII made as you
 12 understand it by Alpha Pharmaceuticals?
 13 **A. (The witness nodded)**
 14 Q. Were you given any options to have either
 15 cryoprecipitate or DDAVP instead?
 16 **A. No.**
 17 Q. Were any of the matters set out in that letter
 18 discussed with you by the Royal Free at the time you
 19 were given this Factor VIII treatment in 1985?
 20 **A. No, no. And really it's quite appalling because they**
 21 **reinfected me with non-A non-B, or hepatitis C as it's**
 22 **now known. Not only did they infect me but they**
 23 **didn't follow me up. They would have known using**
 24 **commercial factor on me was high risk. They've laid**
 25 **it out the year before, what's the safer option, so**

23

- 1 **Rizza, who was Oxford Haemophilia Centre director**
 2 **actually is in print saying, "By the mid-'70s and '80s**
 3 **we knew all the products were infected". Why the hell**
 4 **did they use them then for a further ten years? It**
 5 **doesn't make sense.**
 6 Q. Having been given those factor products in 1985, you
 7 remained a patient at the Royal Free Hospital and in
 8 June 1987 you married your first husband and in the
 9 early spring time of that year, prior to your first
 10 marriage, you and your husband Keith attended the
 11 Haemophilia Centre at the Royal Free for some advice
 12 and genetic counselling?
 13 **A. Yes.**
 14 Q. What had particularly prompted your attendance on that
 15 occasion and who did you see?
 16 **A. I'm pretty sure it was Eleanor Goldman and the prompt**
 17 **was that we were getting married, we were going to**
 18 **live abroad, management of my haemophilia and**
 19 **naturally genetic counselling because we intended to**
 20 **have children. So I felt it was important for Keith**
 21 **to fully understand what the risks were if we had**
 22 **children, a 50/50 risk of passing on the haemophilia**
 23 **gene. Were I to need any haematological intervention**
 24 **or care, you know, how we would go about setting up**
 25 **advice from England so that whoever was, you know,**

22

- 1 **they know, so they knew what they were doing when they**
 2 **took that bottle all of the shelf.**
 3 **I would suggest that they were using up old**
 4 **stock as a lot of haemophiliacs had happen to them,**
 5 **and that's what they did, they took that off the shelf**
 6 **knowing it was high risk and they used it on me, and**
 7 **that particular batch is registered in the American**
 8 **courts, because I went to America, you know, and it**
 9 **was acknowledged in the American courts as a defective**
 10 **batch.**
 11 Q. One of the particular concerns you have about the fact
 12 you were given commercial Factor VIII products in 1985
 13 was the state of knowledge by 1985 about, at the very
 14 least, the risk of HIV.
 15 **A. Absolutely, and that's what horrified me because**
 16 **I realised that, you know, they infected me with non-A**
 17 **non-B, but it could have been HIV. I mean, for many**
 18 **haemophiliacs they will know the pattern here. It's**
 19 **like a Russian roulette every time you're treated.**
 20 **HIV was the only thing I wasn't exposed to.**
 21 **But I'm horrified that they did that to me in**
 22 **'85 and retrospectively, you know, in the years of**
 23 **campaigning and researching and so on, that I can say**
 24 **because it's in the public domain and it's in**
 25 **a published book called, "HIV the myth" Dr Charles**

24

- 1 **looking after me potentially when we moved would know**
 2 **what they were doing and that was the main purpose of**
 3 **going in. That's what was discussed.**
 4 Q. You and Keith were planning a move to Oman in the
 5 Middle East?
 6 **A. Yes.**
 7 Q. You said in your written evidence that there was
 8 discussion on the issue of you having had hepatitis B?
 9 **A. Yes.**
 10 Q. An episode from which you had recovered from, and
 11 there was some particular discussions about hepatitis
 12 B and issues of immunisation. Is that right?
 13 **A. I hadn't -- what they'd found was that I, despite**
 14 **having had it chronically for two and a half years,**
 15 **I hadn't raised enough immunity to protect me from**
 16 **getting it again, so they needed to vaccinate me, so**
 17 **I had a series of three vaccinations so that, you**
 18 **know, I could mount some form of level of protection**
 19 **within my body.**
 20 Q. Was there any discussion with you at this meeting in
 21 1987 with Dr Goldman and Keith and yourself about what
 22 we now know as hepatitis C, what was then referred to
 23 as non-A non-B hepatitis --
 24 **A. No.**
 25 Q. -- was there any discussion at all?

25

1 **A. No and, retrospectively, looking back now, again, the**
2 **contemptuous attitude because they actually placed us**
3 **both, me particularly but placed us both in grave**
4 **danger because you are not allowed to go to live in**
5 **countries like Oman or the United Arab Emirates if you**
6 **have hepatitis.**

7 **I don't know what the rules are now but in those**
8 **days you would never have been allowed entry into that**
9 **country and if you were discovered to have it and**
10 **hadn't declared it, it was a jailable offence, so**
11 **nobody in their right mind would put themselves in**
12 **that position in the first place.**

13 **So, obviously, if I had known I'd got chronic**
14 **non-A non-B we wouldn't have been moving abroad. So**
15 **I just can't believe that, you know, they must have**
16 **been aware of that. They must have known that you**
17 **couldn't -- you couldn't go abroad and live in**
18 **a country and not declare you'd got something like**
19 **that.**

20 **Q.** Let us look at another document, Colette, 1056004.
21 This is a letter from the Royal Free again to a GP,
22 20 June 1985, and we'll see from the first paragraph
23 it refers to you having had bleeding episodes. It
24 refers to you having used Factor VIII concentrates and
25 then if we go to the second paragraph -- sorry, third

27

1 saying that there is potential infectivity to any
2 child, baby in the womb, and that has simply not been
3 mentioned to Colette?

4 **MS RICHARDS:** Colette, if we look at this, and you can
5 assist us with your understanding of the letter, it
6 says -- it sets out the doctor's view that:
7 "The non-A non-B hepatitis is only mild, suspect
8 the prognosis is good, no contraindication to
9 pregnancy. At the present time we do not know whether
10 the virus will be transmitted to the neonate. The
11 amount of non-A non-B virus in the blood is much lower
12 than with the hepatitis B virus. For this reason the
13 level of infectivity to the infant should be lower [it
14 doesn't say non-existent]. I have not mentioned this
15 aspect of the problem to her."

16 **A. Mmm. There you are.**

17 **Q.** Was there is ever any discussion of any of these
18 concerns or issues with you?

19 **A. No.**

20 **MS RICHARDS:** Thank you, sir.

21 That's 1985, and then moving forward to 1987
22 when you were having this counselling session with
23 your then future husband, Keith, and Dr Goldman, was
24 the information that had been set out in this letter
25 two years previously by the Royal Free shared with you

26

1 paragraph, please, could we highlight the first two
2 lines.

3 So 20 June 1985 your GP is being told by
4 a professor at the Royal Free Hospital:

5 "I agree that this lady has chronic non-A non-B
6 hepatitis. This has presumably been transmitted from
7 Factor VIII concentrates."

8 Were you told in 1985 that you had chronic non-A
9 non-B?

10 **A. No, and, actually, the first time I saw that letter**
11 **was when I accessed under Freedom of Information my**
12 **GP's files and records, and when I pulled that letter**
13 **out I couldn't believe my eyes because they'd been**
14 **communicating about a condition that I had not been**
15 **informed of.**

16 **Q.** In terms of you first seeing this letter, that was
17 a number of years later?

18 **A. Yes, quite a number of years later.**

19 **Q.** But in 1985 you were not told that the view was that
20 you had chronic non-A non-B hepatitis?

21 **A. No.**

22 **Q.** And moving forward to the meeting in spring of 1987
23 that you and the Royal Free --

24 **SIR BRIAN LANGSTAFF:** Just before you move forward, can we
25 have a look at the rest of that paragraph. Is it

28

1 at that stage in 1987?

2 **A. No, not at all.**

3 **Q.** As you have said you had a particular concern, you and
4 Keith, about the fact that this wasn't disclosed
5 because you were going to Oman for the reasons you
6 have explained?

7 **A. I went to live in Oman. What happened was that we**
8 **went out to Oman. I was there for three months and**
9 **then my husband was asked to go and establish**
10 **a publishing house in the United Arab Emirates so**
11 **I had to come back home and then a residency**
12 **application had to be put in before I then went back**
13 **out to the UAE.**

14 **Q.** You had expressly requested a medical letter to whom
15 it might concern.

16 **A. Yes.**

17 **Q.** The purpose of which was if you became ill whilst
18 away, you would show the letter to any doctor who was
19 treating you; is that right?

20 **A. Mmm.**

21 **Q.** We should just look at that letter, Colette. It is
22 1056005. We see it is 18 September 1987:

23 "To whom it may concern."

24 It's a letter signed by Dr Eleanor Goldman and
25 we should just look at the second paragraph of the

29

1 letter, please, Paul, if we could just highlight that
 2 second paragraph.
 3 You will see there, Colette, it refers to the
 4 events of 1976. It refers to treatment with
 5 Factor VIII, it says there in 1983, followed by an
 6 acute attack of hepatitis B and then it says:
 7 "Liver function tests remained mildly abnormal
 8 afterwards, you remained had been negative since
 9 February 1984 when she came under the care of the
 10 Royal Free Hospital."
 11 Then it says this:
 12 "She had a further attack of hepatitis, probably
 13 non-A non-B, in 1985."
 14 Do you recall whether -- this letter was given
 15 to you at the time, I think, to take with you; is that
 16 right?
 17 **A. Yes, it was a protective letter and really it was just**
 18 **to say she's had hepatitis B, recovered from it, and**
 19 **I didn't actually pick up on that particular bit**
 20 **because I didn't know what she was talking about.**
 21 **I should have questioned it but I didn't know what she**
 22 **was talking about. But the idea it was probably non-A**
 23 **non-B, well, blimey, they should have known because**
 24 **they knew they had given me an infected batch off**
 25 **their shelf and I think the reason they didn't explore**

31

1 non-A non-B either?
 2 **A. No.**
 3 Q. Then reference to, in the bottom of the page:
 4 "Had I/we been informed I would never have put
 5 Colette's life and freedom at risk by moving to the
 6 United Arab Emirates", and over the page he explains
 7 why that would have been particularly problematic.
 8 Top of the next page please, Paul. Because
 9 having such a condition would have been exceptionally
 10 difficult to treat in the UAE and having it as an
 11 expatriate resident could have led to serious legal
 12 consequences.
 13 **A. Yes, exactly.**
 14 Q. In 1991 by which time you had met your current husband
 15 Steven, who sits beside you, and you were intending to
 16 get married in the course of 1991?
 17 **A. Yes.**
 18 Q. Is it right that at some point in the first half of
 19 1991 you and Steven had a counselling session at the
 20 Royal Free?
 21 **A. Correct.**
 22 Q. Was that again for similar purposes?
 23 **A. Absolutely, yes.**
 24 Q. With Dr Goldman again?
 25 **A. Yes.**

30

1 **that with me is because they would have to explain why**
 2 **they did that to me having the year previously set out**
 3 **what was the safest treatment.**
 4 Q. So this was expressed as being you had had in the past
 5 this further attack of hepatitis in 1985, described as
 6 probably non-A non-B.
 7 Did you pick up at all on the significance, if
 8 any, of the reference to non-A non-B?
 9 **A. No.**
 10 Q. Did you understand this to be communicating to you
 11 that, in fact, they thought you had chronic non-A
 12 non-B?
 13 **A. No, no. If I had, then surely they would have been**
 14 **following me up and surely they would have referred me**
 15 **to a hepatologist but that didn't happen.**
 16 Q. We've actually got a letter from your first husband
 17 for the purposes of the Inquiry. It is 1056009. It's
 18 the last three paragraphs on that page. Keith says,
 19 he confirms that:
 20 "At no time was it ever mentioned to us during
 21 our counselling sessions that Colette was infected
 22 with the hepatitis C virus."
 23 Pausing there, it was then known as non-A non-B
 24 but, again, for the avoidance of doubt, as
 25 I understand your evidence, it wasn't mentioned as

32

1 Q. Was anything said to you in the course of that
 2 counselling session attended by you, Steven and
 3 Dr Goldman about chronic non-A non-B or chronic
 4 hepatitis C?
 5 **A. Never mentioned.**
 6 Q. Non-A non-B mentioned at all?
 7 **A. Never mentioned.**
 8 Q. Hepatitis C mentioned at all?
 9 **A. Never mentioned.**
 10 Q. When did you discover that you had been diagnosed with
 11 hepatitis C?
 12 **A. Months after I got married to Steve. They called us**
 13 **into the clinic. We had had the session and they saw**
 14 **me two weeks before we got married in clinic at the**
 15 **Royal Free, and there was not one single mention of**
 16 **hepatitis C.**
 17 **They obviously -- as routine when you go to the**
 18 **centre they inevitably always take blood samples from**
 19 **you while you're in there and clearly they would have**
 20 **done that and probably -- well, doing what they**
 21 **normally do with them, you know, testing them, looking**
 22 **at your clotting levels. That's what I assumed that**
 23 **they were doing, was looking at my clotting levels,**
 24 **but it's evident that several months after that**
 25 **happened, several months after we were married, they**

33

1 **called us back into the clinic to deliver the news**
 2 **that I'd got hepatitis C.**
 3 Q. Steven has also given a statement to the Inquiry and
 4 in that he said:
 5 "At no point during this counselling session was
 6 there any reference or mention of Colette's hepatitis
 7 status. Shockingly, it was several months after our
 8 marriage but in the same year, 1991, that we were
 9 informed by the Haemophilia Centre that Colette was
 10 positive for hepatitis C."
 11 So having been told finally in late 1991 that
 12 you had hepatitis C, what information was provided to
 13 you about that condition?
 14 **A. It was tremendously played down. I was told not to**
 15 **worry about it at all. It was just like having bad**
 16 **flu really, and I remember thinking, well, this**
 17 **doesn't feel too, you know, good if it's flu because**
 18 **you know, the classic symptoms are, you know, bone**
 19 **ache, muscle ache, fatigue, all of that.**
 20 **Of course, when you put all that together it**
 21 **then starts to make sense and when you connect it back**
 22 **over the episodes and then when I think back even to**
 23 **'76, you know, when I didn't feel right even though**
 24 **I had supposedly recovered from that dreadful episode,**
 25 **it made sense, you know, that terrible fatigue.**

35

1 quite horrific because it came out in great big
 2 clumps. So, you know, if had a bath it was floating
 3 in the bath, if I was in bed I would wake up, it was
 4 on the pillow, it was lying on the carpet, it was just
 5 everywhere and most women will relate to this. You
 6 know, your hair is very much your sense of being
 7 feminine, you know, and making you feel nice about
 8 yourself. When your hair drops out like that it's
 9 horrible, really horrible.
 10 There was one occasion I know that Steve was
 11 terrified because he came home from work to find me
 12 laid sprawled on the couch completely out of it and he
 13 said he thought I'd died because my colour -- I was
 14 sort of a strange colour, wasn't I, and he was
 15 terrified. And I have to say that I could only manage
 16 to do four and a half months of that treatment because
 17 I was having to self-inject and take tablets and the
 18 side effects of that were horrendous.
 19 I couldn't taste my food, I wasn't particularly
 20 hungry. The weight dropped off me and, yeah, just --
 21 and the side effects of it, but the fatigue was
 22 probably the worst and, of course, I was a young
 23 mother. My daughter was starting school. I was
 24 struggling to cope and the year prior to that, because
 25 I had continued to try to work, but I had reached

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1 There's nothing quite like it.
 2 Yeah, it was quite devastating really, wasn't
 3 it, to find that out and also that, you know,
 4 laterally, the knowledge of what was in my records and
 5 what was known but it hadn't been imparted to me, to
 6 us, or the risks. It was just like, you know, "It's
 7 okay, it's just a bad flu. You'll be right", not the
 8 devastating consequences of what it was doing to my
 9 liver and, obviously, you know, retrospectively
 10 looking back, how long my body had been under attack
 11 from hepatitis virus literally from the age of 17.
 12 Q. Now, you underwent your first course of treatment for
 13 hepatitis C in about 1995?
 14 **A. 1999.**
 15 Q. 1999. What was that treatment and what was it like?
 16 **A. Oh, it was ribavirin and interferon. I have never**
 17 **felt so ill in all my life. It was like being here in**
 18 **this world but not being here. It was quite surreal.**
 19 **I was in curled up pain. I had pain all through my**
 20 **spine, literally all through my body. My muscles were**
 21 **aching. I would frequently pass out on the couch and**
 22 **be out for several hours. I felt sick and, as we hear**
 23 **quite regularly now, I had huge hair fall out.**
 24 I was fortunate to be blessed with a massive
 25 head of hair and thank God I had some to lose it was

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1 a point where the hepatitis was affecting me so badly
 2 and, ironically, I was nursing for the NHS in my last
 3 role and I was forced to retire. I just couldn't
 4 continue.
 5 They wanted to get rid of me and I said, "Look,
 6 if you, you know, if you are going to do then you
 7 retire me on health grounds. I'm not just walking
 8 away from my job. It's not my fault that I'm sick",
 9 but they said, "You can't continue as you are". I was
 10 working with the district nursing team at the time.
 11 It was, you know, night duty and we used to cover
 12 something like 400 square miles, so it was quite
 13 a demanding job and I just -- I had to retire that
 14 year.
 15 Q. In your written statement you talked about the
 16 treatment in 1999:
 17 "The side effects were many and too awful to
 18 bear."
 19 You have referred to the hair loss:
 20 "... but also peripheral damage to the blood
 21 vessels in my legs, numbing of the lower limbs, loss
 22 of appetite and physical pain all over my body which
 23 was indescribable."
 24 **A. Yes, and I still have to this day. It was**
 25 **interesting, both the back of my legs, it was obvious**

37

1 that the treatment had -- was damaging the blood
2 vessels, so all the peripheral blood vessels were all
3 ruptured. So I had sort of purpley red and black all
4 down the back of my calves, and I lost sensation in my
5 toes and my lower limbs, and that went on for quite
6 some time.

7 It took a long time to recover from that. That
8 rash stayed there for about two or three year.

9 Q. So that treatment you weren't able to complete.

10 A. No.

11 Q. It didn't clear the virus and you continued to
12 experience the physical and mental symptoms of
13 hepatitis C?

14 A. Yes.

15 Q. Now, you have talked in your witness statement about
16 a meeting that you had in 2002 with Dr Taylor who had
17 been the doctor in 1982 in Kent who had given you the
18 Factor VIII products.

19 A. Yes.

20 Q. One of the purposes of the meeting was you wanted to
21 get the batch numbers for the products.

22 A. Yes.

23 Q. What was, in your recollection, Dr Taylor's response?

24 A. Well, initially, I obviously had to sign a form
25 requesting my records, which I duly did, and I was

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1 cavalier attitude anyway but I thought I'm going to
2 have to confront him. So we set up a meeting and
3 I took with me a lady from the Community Health
4 Council, which was the last independent patient
5 advocate and Steve came along with me.

6 He amazingly developed quite a lot of amnesia
7 throughout that meeting. He didn't answer the
8 questions as I'd asked them and he had had plenty of
9 opportunity to, you know, think about it and give me
10 a good response, and I had to force out of him where
11 he was purchasing his products from and who was
12 purchasing them and where the purchasing records were
13 for those blood products, none of which he could
14 provide.

15 Q. The answer in terms of where he was purchasing them
16 from or where the hospital was purchasing them from
17 was a company called Immuno. Your understanding is
18 that they purchased or sourced their products from the
19 States.

20 Now, did you have any conversation with
21 Dr Taylor in the course of that meeting about what
22 information he had or hadn't given you prior to the
23 procedure?

24 A. Yes. I wanted to establish what his state of
25 knowledge was with regards to the risks of commercial

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1 sent a small sheaf of general records where it
2 referred to, you know, the fact that I'd been in
3 hospital, I had had treatment and there was -- I think
4 there was even a recorded batch of normal saline but
5 no blood batch records of Factor VIII.

6 So I contacted the hospital again and said these
7 records are incomplete. Where are the blood records
8 for my treatment in 1982, December '82? Well, there
9 aren't any, and I said, "Well, that can't be right.
10 There must be", because the thing is with the
11 condition of haemophilia it's a life-long condition
12 and, therefore, any treatment that you have had has to
13 be kept for the reasons being that people get adverse
14 clinical reaction to some treatments, they might
15 develop prohibitors, so you keep those records. They
16 have to be kept.

17 He said, "There are none. They've been
18 destroyed", and I said, "Well, you should know that
19 those particular records should never have been
20 destroyed for the reason that I'm just telling you".
21 So I insisted upon a meeting and I set out I think 12,
22 a dozen questions in advance, and I sent that in the
23 post and said, "I'm giving you an opportunity to
24 answer these questions", because I was really
25 concerned about his attitude. I didn't like his

40

1 plasma, and he confirmed to me that he was very well
2 aware of the risks involved. I thought, "Well, that's
3 very interesting, so why was I not consulted on them?"

4 So I said to him, "Well, that's, okay,
5 interesting because I don't recall at any stage you
6 meeting with me and having a discussion about this or
7 warning me before you gave me these blood products,
8 'By the way, there could be a risk here of
9 hepatitis'", and he sat there and he stared into the
10 distance, "Ah well", he said, "it was a mere
11 oversight. I forgot to tell you".

12 I said, "What, a life-threatening disease,
13 filthy commercial blood products and you thought just
14 an oversight, you forgot to tell me, you thought that
15 was okay?" His attitude was, yeah, very cavalier,
16 wasn't bothered in the slightest.

17 Q. You know, I think, that Dr Taylor's provided
18 a statement to the Inquiry and there are some
19 documents attached but you have not had very much
20 opportunity in terms of time to look at those?

21 A. No.

22 Q. You want to be able to look at those and, if
23 necessary, provide a written response?

24 A. Yes, yes, I do.

25 Q. The other thing that then came to your attention in

41

- 1 2004 was an issue about the risk of exposure to vCJD.
- 2 **A. Hm mm.**
- 3 Q. You had been treated in 1993 by, your statement says,
- 4 a blood plasma batch made by BPL and you became aware
- 5 later from news reports about BSE and CJD, you became
- 6 aware of those issues and you wanted to raise it with
- 7 the Haemophilia Centre at the Royal Free?
- 8 **A. Yes.**
- 9 Q. What happened?
- 10 **A. Well, I was very concerned when I saw -- I thought not**
- 11 **another pathogen, you know, surely to God. So I**
- 12 **phoned them up and I said, "Have I been exposed to new**
- 13 **variant CJD", and I was met with a very dismissive**
- 14 **attitude and told to stop worrying and fretting about**
- 15 **it, no. The answer was no.**
- 16 **Well, 1993, just to say, I was actually in**
- 17 **hospital for quite a protracted period of time. I was**
- 18 **actually in for three months and I had three**
- 19 **operations during that time to remove a tumour, and**
- 20 **the surgeon made a mess of it each time but anyway it**
- 21 **was, obviously, during this period of time that this**
- 22 **product would have been used and then some years**
- 23 **later, obviously, there was questions being raised in**
- 24 **media reports that, you know, there was a possibility**
- 25 **of this so that was why I was questioning and was told**

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- 1 Then there's a reference to the possibility of
- 2 arranging a date to discuss it further.
- 3 **A. Yes.**
- 4 Q. What was the impact on you of receiving that
- 5 communication?
- 6 **A. I was horrified, absolutely horrified and bloody angry**
- 7 **because I asked them, "Tell me, have I been exposed",**
- 8 **and I was told no. I actually asked Jonathan Wilde to**
- 9 **contact Christine Lee because my gut was telling me**
- 10 **differently and when that answer came back, I was**
- 11 **furious because if you look at the time gap between**
- 12 **1993 and when I was actually informed, you know, it's**
- 13 **nearly -- it's ten years' gap.**
- 14 **But worse still I actually had, to get to the**
- 15 **nitty-gritty of exactly what had happened, I had to**
- 16 **write myself and I have a set of communications**
- 17 **between me and the CJD surveillance team in Edinburgh,**
- 18 **to actually get the batch number and find out about**
- 19 **the person who donated the blood, how long they were**
- 20 **ill with the disease and, you know, from the point**
- 21 **that they donated the blood to the point they were**
- 22 **diagnosed and then subsequently died. So that**
- 23 **information wasn't freely given to me. I had to go**
- 24 **seeking that information.**
- 25 Q. Do you recall whether there were any further

42

- 1 **categorically, "No, you are fretting about nothing**
- 2 **unnecessarily, so off you go".**
- 3 **Clearly that's not been recorded because there's**
- 4 **no record in my notes but that conversation was had**
- 5 **because I remember discussing it with my sister and**
- 6 **saying, "I'm really terrified that here we go again,**
- 7 **this is something else", that, you know, and I said,**
- 8 **"Knowing my luck, I probably have been exposed to it".**
- 9 Q. In 2004, November 2004 -- if we have up on screen
- 10 please, Paul, 1056006 -- you received this letter from
- 11 the Queen Elizabeth Hospital Birmingham where you had
- 12 moved and your care had been transferred there by this
- 13 time.
- 14 **A. Yes.**
- 15 Q. It says this:
- 16 "Dear Colette, following your recent out-patient
- 17 clinic appointment I wrote to Christine Lee with
- 18 regard to the variant CJD exposure situation and have
- 19 had a reply today from her. As per the instruction of
- 20 the patient reply sheet that you returned to them,
- 21 I am writing to let you know that you did receive UK
- 22 sourced Factor VIII concentrate between 1980-2001 and
- 23 that in 1993 you received a quantity of Factor 8Y from
- 24 a batch that had been contributed to by a donor who
- 25 subsequently went on to develop variant CJD."

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- 1 discussions between you and whether it's Dr Wilde or
- 2 anybody else about those issues?
- 3 **A. No, and in fact further to that I was still suffering**
- 4 **from quite severe nose bleeds and had to be treated.**
- 5 **I had to have my nose cauterised for the umpteenth**
- 6 **time and, of course, it occurred to me, well, what**
- 7 **guidelines are being given to different departments in**
- 8 **the hospital if they are faced with a patient like me**
- 9 **who's discovered that they've been exposed to new**
- 10 **variant CJD? What happens to the equipment? How is**
- 11 **it autoclaved? Is it thrown away? If I need an**
- 12 **endoscopy, will that equipment be reused or, you know,**
- 13 **for the purposes of trying to avoid infecting others**
- 14 **will it be thrown away?**
- 15 **I was talking to the doctor as he was, you know,**
- 16 **trying to stop my nose from bleeding and he said, "We**
- 17 **haven't got any such guidelines", and I said, "Well,**
- 18 **why not, because by then you should have had them".**
- 19 **He said, "They haven't been handed out to us". He**
- 20 **said, "I've got no idea what the protocol is here".**
- 21 **So, again, I'm having to push for answers and**
- 22 **ask the questions.**
- 23 Q. You set out very clearly in your written statement and
- 24 you have set it out again in your oral evidence, your
- 25 understanding and belief that neither your parents

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1 originally nor you were put in a position to give
2 informed consent to the use of blood products because
3 you weren't given the requisite information.
4 **A. Mmm.**
5 Q. You also say in your statement that you have found in
6 your medical records evidence that at the Royal Free
7 you were tested without your knowledge or consent for
8 hepatitis G, and if we just have on screen 1056008,
9 that's a test result there recorded that -- you found
10 this in your records subsequently?
11 **A. I found it in my records, no date attached -- well,**
12 **yes, 1995, but no reference to who ordered the test,**
13 **why they ordered it and certainly no discussion with**
14 **me as to why they were testing for hepatitis G. There**
15 **is nothing in my records to identify who was behind**
16 **that and why.**
17 Q. As far as you are concerned you were not asked to give
18 that consent and did not give it?
19 **A. No.**
20 Q. Was the result, negative, one that was ever
21 communicated to you as far as you know?
22 **A. No.**
23 Q. In terms of issues about obtaining medical records you
24 have described the position in relation to the Royal
25 Free, you've described the position in relation to the

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1 **Low and behold they miraculously turned up.**
2 **Found on a microfiche somewhere outside of the**
3 **hospital and had been moved, but they existed where**
4 **I had been told, "Oh, they are 26 years old. You'll**
5 **never -- they don't exist". Well, they did, yes.**
6 Q. Now, I would like to ask you some questions, Colette,
7 about the impact upon you and your family of your
8 infection with hepatitis C and consequent treatment
9 for that. In terms of your family circumstances, you
10 said you have got your husband, Steve, and you have
11 a daughter now in her 20s, and in your witness
12 statement you said:
13 "The impact of my chronic ill health has had
14 a very negative and damaging effect on our family
15 life."
16 Could you elaborate upon that.
17 **A. Yes, for the majority of my daughter's younger years**
18 **I couldn't be the Mum that I needed to be for her.**
19 **I couldn't join in on family events because I was too**
20 **ill, invariably struggling to get out of bed every day**
21 **with fatigue and trying to cover it up from my**
22 **daughter as well because I didn't think it was fair**
23 **for a little person to have the worry of mummy not**
24 **being well and potentially mummy getting sick and**
25 **maybe mummy dying. Trying to be a wife to my husband**

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1 hospital in Kent and Dr Taylor?
2 **A. Mm-hm.**
3 Q. You also set out in your witness statement that you
4 had some difficulties obtaining your Scottish health
5 records from the Glasgow Royal Infirmary; is that
6 right?
7 **A. Yes, huge problems. Again, I had to write to the head**
8 **of the trusts and complain that the records were**
9 **incomplete. Where were the blood batch records?**
10 **I explained exact dates of when I was admitted, how**
11 **long I was in hospital for, all the address details**
12 **and my maiden name, hospital number, the exact dates**
13 **during which I believed I was treated and where were**
14 **those records?**
15 They couldn't -- no, they don't exist. I said
16 that's -- "No, they will exist, I want them".
17 Effectively, what I had to do in the end and, again,
18 it was force, through my campaigning, I've done a lot
19 of stuff with the media and at that time I was working
20 with Sarah Smith who was working for, I think,
21 Channel 4 then and I had to threaten them with turning
22 up at the hospital gates with the cameras rolling and
23 I said, "Make no mistake, I will not miss and hit the
24 wall". I said, "You produce those records or I'm
25 going to embarrass this hospital so find them".

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1 who had, you know, a blossoming career and he's trying
2 to keep hearth and home together.
3 He's terrified, you know, to leave me, can't
4 support me in the way he'd like to, but it stole time
5 from him too and he felt like a lone parent for a long
6 time. I'm sure that Steve will maybe make a comment
7 about that but it must have been horrible for him
8 living with that fear, me living with the fear and, of
9 course, you know, the other thing that I didn't
10 mention was that, you know, I was suffering from
11 depression as well.
12 Q. I wanted to ask you about the effect on your mental
13 well-being.
14 **A. Yes.**
15 Q. You have talked about in your statement, about
16 everything having had a huge effect on your mental
17 well-being. It's caused you anger, it's caused you in
18 the past to contemplate suicide.
19 **A. Yes.**
20 Q. And you say in your statement that you almost carried
21 out that desperate act a few years ago but you
22 realised you would leave behind unresolved grief and
23 anger which would have been hellish for your family.
24 **A. Yes, that's true. I had reached probably the lowest**
25 **I think I've ever been in my life. It's common when**

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1 you've got a chronic condition like this, they want to
2 put you on a variety of different tablets and I do
3 believe that the antidepressants that they put me on
4 at the time probably actually made my mental state
5 worse and on this particular evening I just --
6 I couldn't hack it anymore.

7 I was in my night clothes and I ran from the
8 house barefoot down a dark lane, because we live in
9 rural countryside. I ran down that lane, tears
10 streaming down my face -- I still think about it now.
11 I ran down there thinking how I need the courage to
12 just put myself in there. There was a series of quite
13 deep ponds that people go and fish and I ran through
14 that gate and headed for that pond and I was covered
15 in mud, it was wet, slippy, scratched by the bushes as
16 I was running past and getting nearer and nearer and
17 I got to the edge of the pond and I put my foot in the
18 water and thought, "Just get on with it, Colette.
19 Just do it now and then the pain will be over".

20 Whether it was a guardian angel or something
21 there's another little voice sitting here saying,
22 "Excuse me, what are you going to leave behind?
23 A little girl who doesn't fully understand, you know,
24 what's happened to Mum and a husband who has been
25 fantastic, supportive", he's been with me on this

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1 wiping me out, and this time my hair started to fall
2 out but uniformly rather than in clumps and actually
3 it's only just stopped falling out.

4 I have a big head of hair to lose thankfully,
5 and it looks like a normal head of hair to most people
6 but to me that's quarter of what I had but it's only
7 just stopped coming out four and a half years later.
8 I was only on it for.

9 **STEVE:** It was going to be four months, wasn't it?

10 **A. Yes --**

11 **STEVE:** They said it needed to be six months.

12 **A. Yes, they needed six months instead of four months to
13 try and clear the virus.**

14 **MS RICHARDS:** And the virus did clear in relation to that
15 second course of treatment.

16 **A. They say it's cleared. I'm not totally convinced that
17 you really do get rid of hepatitis C. It's a very
18 clever virus and it can hide and the fact that they
19 haven't got a test that can show it's well below zero,
20 even subzero, I think my level came down to something
21 like 12, but I'm still feeling the effects and
22 I thought, maybe naively, I thought that, well, if
23 I do this, because Dr Mutama, who's my hepatologist,
24 was concerned that because of the length of time that
25 I have been diagnosed with cirrhosis (which was 2004,**

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1 journey and, believe me, from when I started
2 campaigning in '94 this man has walked across
3 Westminster bridge with banners, he's had T-shirts on
4 him, "hep c bloody murder", you name it. He's been to
5 debates with me, he's been to Westminster, the
6 Department of Health. There isn't a place that Steve
7 hasn't -- Downing Street, he's been with me all the
8 way, and I couldn't do it.

9 So I pulled back. They realised that I'd
10 disappeared and they were out looking for me and
11 eventually I went back and I sat on the bench outside
12 of the house and I just wept and ... yeah, they
13 scooped me up, took me in, washed me off and said,
14 "Come on, pull yourself together", which was hard,
15 very hard.

16 **Q.** In terms of the physical impact of your infection, you
17 have described powerfully in general terms the
18 symptoms that you experience over the years. You told
19 us about your 1999 treatment. You, underwent a second
20 course of treatment in 2015?

21 **A. Yes.**

22 **Q.** How was that?

23 **A. Dreadful. Terrible pain, terrible -- I was very
24 jaundiced for the first two months of the treatment.
25 Skin was rashy and tingling. Again, the fatigue just**

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1 by the way), that it was highly likely that I would be
2 at high risk of going into liver failure and I'm still
3 very high risk of getting cancer.

4 Actually, I haven't told you this but in 2004,
5 to ascertain the level of damage, I was asked if
6 I would undergo a test which they do where they keep
7 you awake, slightly sedated, and they cut your
8 jugular, and insert a wire all the way down through
9 the major vessels until they get to the liver. They
10 scan you beforehand so they know where they want to go
11 to look for cirrhotic material and that was quite an
12 experience.

13 Being ex-medical, perhaps I got through it
14 because I am fascinated by the workings of the human
15 body, and so I decided that I would chat to the doctor
16 who was doing it, a very lovely man Dr Olaf, who was
17 exceptionally nice at keeping me calm because it is
18 quite something to be awake and have somebody cut into
19 your neck next to a major artery. He was horrified
20 that I wasn't anywhere near sleepy and kept saying,
21 "Can you stop asking me questions". But, yes, I had
22 to go through that for them to actually decide this
23 damage has gone to quite a level.

24 It was something, actually, that annoyed me
25 about two years before I left Kent, I was not seen by

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1 **anyone at the Royal Free. It's almost like they**
 2 **didn't want to see me. Yeah, perhaps because by then**
 3 **I was a seasoned campaigner and had plenty to say and**
 4 **I suspect it would be uncomfortable for them for me to**
 5 **ask why they infected me in their department in '85**
 6 **maybe, you know, CJD, lying about it, you know -- and**
 7 **they did lie.**

8 Q. Despite the treatment in 2005 having the effect that
 9 you've described, whether or not it's accurately
 10 described, as clearing the virus --

11 **A. That was 2014.**

12 Q. 2014, sorry -- you have continued to experience
 13 a range of physical symptoms?

14 **A. Yes.**

15 Q. You have described in your statement constant muscle
 16 and bone ache, chronic insomnia?

17 **A. Yes.**

18 Q. Pain?

19 **A. Yes.**

20 Q. You have a condition called costochondritis, which is
 21 inflammation of the cartilage connecting the ribs to
 22 the breast bone?

23 **A. Yes.**

24 Q. You have fibromyalgia?

25 **A. Yes.**

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1 these infections have come about. But you also said
 2 this. You're asked or you have been asked on several
 3 occasions by NHS staff if your infections were due to
 4 lifestyle choices, such as drug abuse or alcoholism;
 5 is that right?
 6 **A. Correct, yes. That was said to me. I actually had to**
 7 **transfer my haematological care from Birmingham. I'm**
 8 **quite angry about this. But I presented on two**
 9 **occasions with an active bleed and was refused**
 10 **treatment and I was deeply, deeply unhappy about that**
 11 **but I think, possibly because I'd had an exchange with**
 12 **Dr Wilde and he knew that I was an active campaigner**
 13 **and quite vocal on my criticisms of Government, the**
 14 **NHS, the doctors that treated their haemophiliac**
 15 **patients in such a way of putting them at high risk,**
 16 **and I felt compromised.**

17 **So I was forced to go to St Thomas', which is**
 18 **quite a distance to travel. But on this particular**
 19 **occasion, I had to go and have a pre-operative**
 20 **check-up before having a procedure done. This lady**
 21 **was a trained sister and I recall sitting down and the**
 22 **first thing out of her mouth was, "So your chronic**
 23 **hepatitis C: is this down to your lifestyle choice of**
 24 **alcohol or drugs?" I was horrified.**

25 **It's been said to me when I am -- I mean, I have**

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1 Q. Arthritis in your joints and very marked deterioration
 2 in the discs of your spine?

3 **A. Yes.**

4 Q. In terms of dental care, you have been able to access
 5 that -- is that right -- but through a specialist
 6 clinic at the Queen Elizabeth Hospital in Birmingham?

7 **A. Yes, it's done in the hospital. They have a clinic**
 8 **for haemophiliacs and they invite you in either**
 9 **six-monthly, if you need it, or annually for general**
 10 **care, dental care. So that luckily hasn't been an**
 11 **issue.**

12 **But when I was living in Kent, I had -- yes,**
 13 **I had to actively seek a dentist who was willing to**
 14 **treat someone with chronic hepatitis and, obviously,**
 15 **I didn't know about the CJD exposure until I moved to**
 16 **the Midlands. But I'm sure that a lot of**
 17 **haemophiliacs have experience, and I've heard them say**
 18 **they have experienced this problem, yes, getting**
 19 **dental care.**

20 Q. You have talked about in your statement how the
 21 conditions, the infections that you've had or have,
 22 have led in terms of treatment to you having to be
 23 operated on last to being regarded as a dirty case to
 24 there being a lack of knowledge on the part of the NHS
 25 staff who treat you often about the history of how

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1 **regular six-monthly scans. Now, most of the staff**
 2 **have obviously got to know me thankfully now but in**
 3 **the early days, you know, you could see straight away**
 4 **what was going through their mind "why's she got**
 5 **cirrhosis of the liver?" You're constantly having to**
 6 **explain, you know, and you're almost on the defence**
 7 **all the time and anticipating every time you go into**
 8 **hospital and you're faced with medical staff what**
 9 **they're going to surmise of how you came to be in this**
 10 **predicament.**

11 **But I'm a great believer in education and I've**
 12 **spent my entire life since my knowledge of hepatitis**
 13 **came about trying to make sure that the stigma that**
 14 **people have suffered (and actually it still does**
 15 **exist) that they wouldn't have an excuse if I told**
 16 **them and explained to them how it came about.**
 17 **Education's a great thing because it empowers people**
 18 **and you're far more likely to not just educate them**
 19 **but create in them an understanding and an empathy**
 20 **that maybe wouldn't be there because they wouldn't**
 21 **know about what's happened to people like me with**
 22 **a bleeding disorder who don't expect throughout their**
 23 **lifetime to be infected with multiple viruses over**
 24 **decades. It's just something people don't expect to**
 25 **hear. I mean, it's like a horror story really when**

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1 you unfold it as to how things evolved over the last
2 three decades and how I came to be in this
3 predicament.

4 Q. One of the other things you've said in your statement
5 is having had to, as you've explained, take early
6 retirement in 1998 and been unable to return to the
7 workplace, you often find yourself having to explain
8 and justify the fact that you're unable to work and
9 have to reveal very private information to friends or
10 people you might meet in social circumstances and
11 elsewhere?

12 A. Yes, that's right, and there have been many occasions
13 where my husband's job involves quite a lot of
14 corporate, sort of, entertainment and as his wife, you
15 know, I go along to support him and, you know, help
16 him with customers and so on, and invariably the
17 conversation will naturally come round to, "So what do
18 you do?" I have to say, "Well, I don't work" and they
19 say, "Oh, very nice". And I'll say, "No, you don't
20 understand. It's not out of choice. I don't work
21 because I can't work" and they look in amazement.

22 Well, I suppose part of the problem is this
23 facade because you learn over time if you paint your
24 face and put a smile on your face, then to all intents
25 and purposes I look normal and I guess we all want to

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1 paper. Eventually, it started to unfold but, yes,
2 it's been pretty tough having to reveal those private
3 aspects of my life and tell the story of, you know,
4 what has happened to me physically and what the
5 ultimate prognosis is going to be. And believe me,
6 I mean, having nursed people who have died from liver
7 cancer, it is quite a horrible way to die.

8 I have regular nightmares. I don't sleep.
9 Maybe if I get an hour or two's decent sleep a night
10 that might be it. The rest of it's just surface
11 sleeping. My body's in constant flight and fright.
12 I suffer night sweats all the time. I'm sure a lot of
13 the haemophiliacs will tap into that one. So yes,
14 it's pretty horrible to have that.

15 There's no getting away from this. You wake up
16 with it in the morning, you go to bed with it at
17 night, and it's sitting there with you all the time,
18 yeah.

19 Q. In 2010 as part of your campaigning, you met with the
20 then Health Minister about the availability or lack of
21 availability of counselling and psychological support.
22 Have counselling or psychological support ever been
23 made available to you or to your family?

24 A. We had a short spell of counselling at the Royal Free
25 but it was more related to the early years when I was

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1 look normal, don't we? We all want to be accepted by
2 others and don't want to feel we're different. It's
3 embarrassing at times to say, "No, I don't. I had to
4 retire when I was, you know, 38 years of age and
5 I wouldn't work again" and then have to go into the
6 detail. Then I feel guilty because on occasion Steve
7 would say, "Could you just not talk about it" and then
8 you -- What am I going to say then? Why don't I work?
9 Because I'm a lazy so and so? No, I'm not going to
10 say that. Yes, you do have to justify it.

11 I told a funny story earlier. My daughter --
12 you know, kids at school, you know how they talk,
13 "What does your mummy do? What does your daddy do?"
14 and so on and Rebecca didn't find out really what the
15 issues were with me until her early teens. But
16 invariably, you know, kids come and have a sleepover
17 and whatever and would say, "What does your Mummy do
18 for a living? What does she work at?" and she would
19 say, "Mum just does dishes at home". Just does dishes
20 at home.

21 But Mummy meantime is out there campaigning,
22 trying to raise the profile of this damnable disaster,
23 and she's coming home and saying, "Well, what's that
24 camera doing in the garden, Mum?" or "Why are you
25 going to the local radio station? Is that you in the

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1 finding it very difficult with Rebecca. Some people
2 have expressed this already that it affects your
3 brain, you're foggy-brained, you get angry, you get
4 fidgety and very, very difficult and if you've got
5 a young child, you know, who's having a difficult day
6 and you're physically and mentally not up to it, you
7 know, it's very, very hard to deal with.

8 Q. In 2010, when you met the Health Minister, you were
9 told that the Government would be willing to offer
10 counselling or psychological support to be made
11 available to victims but you've said that the funding
12 was such a small amount of money, it wouldn't have
13 been adequate to meet the needs of the community --

14 A. Yes.

15 Q. -- and it was going to have to be through the trusts
16 and funds?

17 A. Yes. I raised it with Ann Milton and actually more
18 directly with Rowena Jeacock, who was the head of the
19 Blood Policy Team, and asked her -- this is quite late
20 in the day 2010 but, you know, knowing that so many
21 haemophiliacs, you know, would be suffering with
22 depression and PTSD -- and I asked how much money, you
23 know, had been set aside at all because they had
24 announced that they would provide money for
25 counselling. The sum that was told to me was 300,000

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1 had been set aside for an entire community of
2 patients.

3 I said, "Well, that's not going to stretch
4 anywhere near enough". I said, "If someone was to
5 apply for it", I said "how do they get it?" "Well,
6 they have to go through the Hep C Trust". So I said,
7 "Okay".

8 And I said, "How many sessions would that
9 actually allow them to have if they were able to
10 secure that?" A maximum of six, I was told.

11 Well, I'm sorry but, you know, my experience in
12 what's happened to me I know six sessions wouldn't
13 help me one jot; so I don't know what they were
14 thinking about. 300,000 is a drop in the ocean of
15 what really is actually needed.

16 Q. In terms of the funds themselves, what's your
17 experience, your direct experience, been of the
18 application process and the information which the
19 Skipton has required applicants such as yourself to
20 provide?

21 A. An appalling process as people have described it and
22 I've described it this way myself. You're made to
23 feel like a beggar with a bowl. The method and way in
24 which they ask people to apply, the level of intrusive
25 information that they ask of people is a disgrace.

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1 and they are not enough even now for people to get by
2 on. They're the most basic levels.

3 I actually said something in the Department of
4 Health and it raised a few smirks round the room but
5 I asked directly in a meeting with Ann Milton and the
6 Head of Blood Policy, "Who came up with the sum of
7 money that we're talking about?" That was back in,
8 I think 2011, I asked that question. "Who come up
9 with these sums of money?" And they couldn't answer
10 me.

11 I said, "Well, would you be satisfied in
12 receiving that if you'd had done to you what I've had
13 done to me? Would you be accepting that" I said,
14 "because whoever thought these up should be shot".
15 There was a smirk and a giggle around the room but
16 I actually meant it because it is deeply insulting,
17 really insulting, and cruel that people have been in
18 some cases pushed into financial penury. Some have
19 not been able to afford to buy their own homes.

20 My worry -- I mean, my husband here, you know,
21 he won't get a penny from the current trust fund or
22 the previous ones if I die because he would be means
23 tested; so he wouldn't get anything. I think that's
24 wrong and the only way you're going to properly help
25 people is to give them proper compensation. We don't

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1 They've also set out about a divisive process which
2 has set many, you know, people against each other
3 because one's getting a certain amount of money, the
4 other one's getting another lot and it's clearly
5 grossly unfair, demeaning and derisory the sums of
6 money we're talking about here and the means testing
7 issue is utterly appalling.

8 I said at the outset that if -- and I know a lot
9 of these trusts just weren't meeting the needs of
10 victims, just aren't, and even when they decided --
11 and I wasn't consulted and, you know, I still remain
12 angry about this, some of the longest-standing
13 campaigners were left out of a lot of meetings that
14 took place when, you know, we were looking at a change
15 in the financial reviews on these trust funds, and
16 I said at the beginning, you know, and I've said it
17 for several years that it's absolutely shocking that
18 the state is responsible for the multiple infections
19 of a very vulnerable patient group -- and, I'm sorry,
20 I'm just speaking as someone with haemophilia.

21 It seems to me an absolute disgrace that the
22 state can infect people in this way, spend three
23 decades covering it up, and insult us with these
24 pathetic sums of money which in no way could possibly
25 meet or represent the losses that people have suffered

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1 want begging bowl funds.

2 Q. Colette, you've said in your statement, in summary in
3 your statement, this:

4 "My life has not been what it is or what it
5 could or should have been because of what has been
6 done to me by the people who were supposed to be
7 caring for me."

8 That's the end of the questions I wanted to ask
9 you and you know, I think, that a number of the themes
10 you raise in your statement issues about the trust and
11 schemes and so on are matters that the Inquiry will
12 indeed be investigating in due course. But is there
13 anything else before I ask Mr Stein if there are any
14 further questions that you would like to say at this
15 stage?

16 A. Yes, I just set some thoughts out. If you'll bear
17 with me, I'll read them.

18 I'd just like to say that I do welcome this
19 Inquiry as a final opportunity to seek the real truth
20 behind the contaminated blood disaster and I hope the
21 final outcome will really deliver truth and justice
22 where there has been none; that there will be
23 recognition of the extreme pain, suffering and an
24 acknowledgement of people's financial losses, which
25 have hugely impacted on my life and that of my family

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1 and many others; the damage that's been done to my
2 family life and the relationship with my child, which
3 has taken many years to repair and we're still trying
4 to get there; and it's my hope, Sir Brian, that you'll
5 re-look at Lord Peter Archer's recommendations that he
6 made in his independent report, which I was a witness
7 to, because I think they remain arguably a most
8 comprehensive set of recommendations and it would be
9 nice to see them implemented, as they should have been
10 at that time in 2009 when the report went out.

11 I think most of us feel -- you know, we want --
12 every infection that we've been exposed to should be
13 taken into consideration in those recommendations if
14 we're talking about compensation proper. You know
15 hepatitis B hasn't been considered here and certainly
16 there's no word of compensation for being exposed to
17 CJD. We're just talking at the moment about hep c and
18 HIV.

19 I want to see accountability for lies that have
20 been told by Government officials and that even when
21 those lies have been exposed, nothing's been done
22 about them. Those decisions have blocked justice for
23 haemophiliacs for quite some time and for people who
24 have been infected in other ways. I hope it does
25 become clear in summarising of this Inquiry that, you

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1 75 per cent of that pay-out if I lost my life. That's
2 not the case here.

3 Finally, I'd say that as a victim of the worst
4 treatment disaster in the history of the NHS I want to
5 say to every successive Government, past and present,
6 and to the current Parliamentarians that you had, and
7 still have the responsibility to ensure justice for
8 every person who has been afflicted and bereaved by
9 a life-threatening treatment supplied by the state.
10 I think we're talking about, as far as I'm aware, over
11 2,500 haemophiliacs have lost their lives and those of
12 us who are left still battling every day with the
13 physical and mental damage of being infected with
14 multiple viruses and having to fight for scraps of
15 *ex gratia* payments.

16 You know, I want my pain and suffering
17 recognised and it's so stressful because that delay in
18 getting justice is compounded by the anger and the
19 disgust that I feel for those who have been complicit
20 in covering up this blood scandal.

21 I would say too finally that it's deeply, deeply
22 upsetting to me that I have [redacted] in Dublin both
23 of whom were paid out over 20 years ago by
24 a government who, without any admission of liability,
25 did accept that they had to recognise the pain and the

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1 know, as more people give evidence that this was not
2 a medical accident, it was largely avoidable.

3 And I want assurances too that, you know,
4 certainly from Government that long-standing
5 campaigners won't be blocked and left out of meetings,
6 as we have been, because that's had a very serious
7 impact. It's certainly not a democratic process if
8 you exclude people, you know, that should be there and
9 part of discussions because, obviously, it's affected
10 the way that the new payment schemes and financial
11 trusts were folded. I'm referring particularly to the
12 Macfarlane Trust was set up under a legal framework
13 and people signed to that and it was meant to be for
14 life and widows were not meant to be means tested but
15 that is happening and it's happening in the new
16 scheme.

17 I want financial security for my husband if
18 I die because, you know, this new announcement with
19 EIBSS and victims are furious about means testing but,
20 you know, as I said, under the current rules that
21 Steve won't get a penny for the loss of my life and
22 there's too many anomalies across the devolved
23 governments which are shocking because if I'd remained
24 living in Scotland for example, I would have been
25 entitled to that scheme plus my husband would have got

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1 hardship that were inflicted upon victims. So I would
2 say one thing: why is my life worth so much less here
3 in the United Kingdom than [redacted] in Eire? That's
4 not right.

5 Q. Thank you, Colette. I am just going to turn my back
6 and ask Mr Stein if there are further questions.
7 Nothing.

8 **SIR BRIAN LANGSTAFF:** I have nothing of my own to ask.
9 Just let me thank you for what you have said to us
10 this afternoon and for being here to give your
11 evidence and to tell us what you have.

12 **A. Thank you.**

13 **SIR BRIAN LANGSTAFF:** Thank you very much.

14 I omitted to but I should have thanked Steven as
15 well.

16 We now take a break for the next week until the
17 Tuesday after next when we reassemble in Belfast.

18 **MS RICHARDS:** Sir, that's right. We resume our hearings
19 in Belfast on 21 May.

20 **SIR BRIAN LANGSTAFF:** We will not be back here in
21 Fleetbank House until 4 June. If anyone wishes to
22 follow the Belfast hearings, it will be for the four
23 days beginning the 21st, after which there's another
24 short break. Then they can do so following the live
25 streaming if they are not there in person. They are,

1 of course, very welcome to be there in person but
2 I suspect that most of you will be following online
3 and by getting the transcripts in due course. Thank
4 you very much.

5 **MS RICHARDS:** Thank you, sir.

6 **(4.07 pm)**

7 **(The hearings adjourned until 21 May 2019)**

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