Witness Name: GRO-B
Statement No:WITN1387001
Exhibits:WITN1387002-5
Dated: February 2019

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF GRO-B

I, GRO-B will say as follows:-

Section 1. Introduction

1. My name is GRO-B, DOB GRO-B 1964 and I live at GRO-B GRO-B Warwickshire, GRO-B with my partner.

2. I was infected with HIV and Hepatitis C through contaminated blood products.

3. My ex-wife, GRO-B, was infected with HIV as a result of my infection. Her witness statement can be found at **WITN1388001**

4. My current partner, GRO-B has also provided a statement to the Inquiry. GRO-C

5. This witness statement has been prepared without the benefit of access to my full medical records. If and in so far as I have been provided with limited records the relevant entries are set out in the medical chronology at the end of this statement.

Section 2. How infected

6. I was diagnosed with severe Haemophilia A when I was a baby. I had a bleed at around 8 months old and I was taken to either Warwick or Oxford hospital. My mother said I was fortunate that one doctor there had just completed a haemophilia course, as otherwise she may have faced accusations of abuse for coming to the hospital with a baby covered in bruises (as happened to so many other parents of haemophiliacs).

7. I was told at the Birmingham Children's Hospital (BCH) that I wouldn't live past 35 as a result of my haemophilia. Throughout my childhood and teenage years I was made to feel like I was a burden to the NHS so, being stubborn, I adopted the mentality that I would prove them wrong and live to at least 36.

8. I went to a private junior school but I often missed school to receive treatment. At that time I was treated with Cryoprecipitate. Later, at senior school, I started the day after everyone else, to allow the school to have a big talk with the rest of the pupils about looking after me and making sure I didn't bleed.

9. At this stage I was being treated at BCH which was about 30 miles away, so my parents were asked if I wanted to be moved onto home treatment as this would be more convenient. My parents agreed and I started to be treated at home with Cryoprecipitate. This started in December 1974.

10. I was first offered Factor VIII in 1977. We think this was by Dr Gilian Man, although it could have been Dr Frank Hill who I started to see when I was an adolescent and continued to see as an adult.

11. My treatment and batch numbers sheets are exhibited at **WITN1387002.** I was treated with Armour product between 1977 and 1986; NHS product between 1978 and 1980 and Alpha product between 1986 and 1987.

12. We were told that Factor VIII was the miracle cure that would solve all of our problems. My parents were never warned about any risk of infection and were

not told to look out for any adverse reaction from the treatment. I believe we were one of the first families to be given home treatment Factor VIII; I am not sure if this was a choice we made or something that was pushed upon us.

13. I also remember being told by Dr Hill when I was started on Factor VIII that it was sourced from the US.

14. Initially home treatment went well. I finished school in about 1979/1980 and was offered a job working in menswear. I had a good social life and had no problems with my health other than my haemophilia.

15. In or about 1981 I fell ill for a short period of time after I had injected myself with Factor VIII. We later learnt that this is likely when I was infected with Hepatitis B. On 20.05.1981 I tested positive for Hepatitis B surface and core antibodies.

16. In early 1984 I became extremely ill with Glandular Fever. My GP said that this would have been triggered by something, and suggested that we go to the Haemophilia Centre as there were some things that were above his knowledge. We suspect it was at this time that I seroconverted.

17. GRO-B and I met when I was 18 years old. We got a house together in early 1984. I don't know how we managed to put a deposit down on a house at such a young age but we did. We got married on GRO-B 1984.

18. In early 1985 I was working in Warwick at a cabinet makers and I was suffering with a urinary infection. I passed out in the toilets and my father rushed me to hospital with GRO-B I vividly remember laying on a trolley in A&E and being wheeled into a room. A GRO-C doctor came over to me with my file in his hand and said 'this looks to me like the HIV is developing into full blown AIDS'. There is no reference to this in my medical records.

19. I went for a follow up appointment six months later in August 1985 where it was noted that my HTLV III status was "unknown" and blood tests were taken. According to my medical records I was advised about the risks of transmission and to use a sheath. GRO-B was pregnant at that time but we

felt we were too young to be parents and we were being bombarded with information about the risk of HIV. It was a terrible time and we were at a loss about what to do. In the end GRO-B decided to have a termination.

20. Six weeks later I was called back for a further meeting, and it was at this stage that they told me officially that I was HIV positive. I was told absolutely nothing about the prognosis of the infection or its possible routes of transmission. I was also told that I probably shouldn't tell anyone about my infection. We were given such little information and we had absolutely no idea what it all meant and the severity of my condition. There are a number of references in my records to me being given advice about the route of transmission through sexual contact and that I should use a sheath. I cannot recall being given advice along these lines but it was a very difficult time so I cannot say categorically that the advice was not given.

21. Around this time there was a noticeable shift in the atmosphere and workings of the Haemophilia Centre. Whereas previously there had been about 30 haemophiliacs in a waiting room prior to our appointments, it suddenly changed so it would just be you waiting in a private room. The appointments were arranged so that you wouldn't see any other patients. This was extremely isolating. Nurses who had been at the haemophilia centre for years started to get moved around and none of them stayed there for very long. The only thing that didn't change was the doctors. I have since been told by nurses who worked at the Centre that some of their colleagues had breakdowns after finding out they had infected children.

22. There were two main haematologists at the centre; Dr Hill and Dr Franklin. I would always pray that I was seen by the latter. Dr Hill was like an army doctor, he would just tell you to stand up and strip off. He had no empathy whatsoever and he absolutely hated being questioned. Whatever he said was final.

23. According to a letter in my medical records, in March 1995 I asked Dr Wilde to test me for Hepatitis C following a communication from the Haemophilia Society which raised it as an issue. This is not my recollection of events and I

would be surprised if it was accurate as in 1995 I was very depressed and avoided interaction with QEH as much as possible. I was also not involved with the Haemophilia Society and do not recall receiving any information from them.

24. My recollection is that I went and Dr Wilde offered me a blood test for Hepatitis because there were mumblings about it. It may be that he mentioned he had received information from the Haemophilia Society about it. He tested me and when I went back for a routine haematology appointment. He said "by the way I have your results – do you want to know?" I said "do I need to ask?" to which he replied "no, it's positive". We had a brief discussion about the connotations and we then had a conversation about prioritising my illnesses and haemophilia. Hepatitis C was effectively at the bottom of the list of things for me to worry about.

25. I became aware, following the American Pharmaceutical Litigation that there were pages in my medical records that were completely fictitious. There were records of blood transfusions that never happened, as well as a fictitious letter about GRO-B and I being called in for a meeting where we were properly told about the prognosis and transmission; this meeting never happened.

26. GRO-B found out in 1999, two years after we had separated, that she was HIV positive. She had previously been tested in August 1985 and July 1989. Both earlier tests were negative.

Section 3. Other Infections

27. I was told that I may have been exposed to vCJD. I was given the option as to whether I wanted to know if I had been exposed to the virus. I was told that the risk may be theoretical, but if I did fall ill there was a fund of £4000 for me to have a carer. A copy of the relevant correspondence is exhibited at **WITN1387003.**

28. I am very concerned about the risk of vCJD and I feel like it is a problem that is often overlooked. Recently I found out about a case in Belfast of someone suffering with vCJD, which has compounded my fear and proven that the risk is not just theoretical.

Section 4. Consent

29. I remember being a child and asking what they do with all of the blood tests. They would just say 'research'.

30. I consented to be tested for HIV when I was called in for an appointment, but by this stage I had already been told by one doctor that my HIV was developing into AIDS and I can therefore only assume that I was tested without my knowledge before this.

31. I was consented for the Hepatitis C test which was reported as positive on 10.04.95. There is now shown to me marked **WITN1387004** a copy of the test result.

Section 5. Impact of the Infection

32. Although **GRO-B** and I are still breathing my HIV destroyed our lives. We were young with our whole lives ahead of us and our future was taken away because the powers that be thought that, as a haemophiliac, my future wasn't worth anything.

33. My HIV diagnosis changed the course of my life forever. To this day it remains a sword hanging over my head. Every time I had a cold or some unusual illness I thought I was going to die and that feeling continues to this day. I can't escape my diagnosis – it is with me all the time. **GRO-B** suffered through this with me on a daily basis.

34. I had to give up my job as a result of my infection. I gave up work in 1998. Prior to that I was the Office Manager of a German company for 2 years. Before that I was the Museum Director at GRO-B Park and absolutely loved my job. I was offered a very exciting and lucrative position in America to manage the biggest car collection in America at the Imperial Palace in Las Vegas; however I was unable to go as I could not enter the country as a result of my infection. This was heart breaking for me. I have been offered another exciting job in the last few years but I was advised by my doctors not to take it as I would be too ill.

35. I have not only lost out on a career, but the feeling of being useful in life. This has all been taken away from me through no fault of my own. I don't know whether I've never been depressed or have always been depressed and just don't know it.

36. In 1989 we discovered, fairly late, that GRO-B was pregnant. She went to her GP who refused to see me, where she was told that as I was HIV positive, both she and the baby may also have HIV.

37. It says in her medical notes that she 'asked' for a termination, but this was something that was very much pressured onto a young, scared and ill-informed couple.

38. I remember being with GRO-B on the day of the termination, in a room with a biohazard warning on the door. GRO-B was so spaced out as they had given her so many drugs; she couldn't even hold down a conversation. I was then made to leave the room by the doctors.

39. GRO-B and I went home the next day and never really discussed it again. It was a horrific time for us, and it is something that has made me quite a cold and callous person. When I find myself getting upset about it I just shut myself down.

40. My marriage had been gradually deteriorating ever since my diagnosis. I became too ill to work which meant that GRO-B was doing everything for me.

Caring for me and having to work several jobs took its toll on GRO-B, who started having an affair which led to the end of our marriage. If it wasn't for my infections we would probably still be together.

41. I had previously fallen out with Dr Hill after I had refused to be given AZT, as it was just medication for a condition I never really understood. As a result, I never attended clinic and GRO-B went to the doctors to pick up my Factor VIII. My medical records are littered with references to my failure to attend regular clinic appointments.

42. When GRO-B left I had no choice but to go to the QEH myself where I was seen by Dr Wilde. He told me that I would either have to start treatment or get my house in order as I would be dead in three months time.

43. I was unsure whether I wanted to start the medication or just let nature take its course. I then had a home visit from Sam, one of the haemophilia nurses. We had a conversation about the old medications and AZT. She told me that some of the drugs were bad, but as I had never had treatment and I was drug 'naïve', I should probably give treatment a go or I would definitely die.

44. I started anti-retrovirals in 1998 after Dr Wilde only gave me 3 months to live. I believe this medication led to me having a duodenal ulcer.

45. The first set of medication failed and caused big red blotches all over my legs, but fortunately the second set of medication was more effective.

46. In a strange way, I am only alive today as my marriage broke down and I was forced to go to the hospital; otherwise I would never have been put on treatment.

47. After my divorce I threw myself into campaign work, becoming very active in helping to run the Birchgrove Group. At this time, due to the sheer volume of people who had been infected, we had to allocate someone in the office each day to go to funerals because there were just so many of them. Mentally, I have been very close to losing it and breaking down on several occasions.

48. I met my current partner, GRO-B in around 2002. She was very wary of starting a relationship with someone who was infected as she had already lost her husband as a result of the Contaminated Blood Scandal. She came with me one day to see Dr Wilde who confirmed that I would have a normal life expectancy and a normal life, which somewhat reassured her.

49. GRO-B and I bought our first house together in 2005. As GRO-B has been through this before, she is extremely understanding and if I come home angry or in a bad mood she understands and knows how to deal with me.

50. Sometime after that I went to see Professor Mutimer after a referral from Dr Wilde, who performed a Fibroscan and blood tests. After seeing my test results, he suggested that I start treatment with Pegylated Interferon and Ribavirin. I spoke to everyone I knew that had gone through the treatment, and they had all found it extremely difficult. They told me not to go through the treatment whilst living alone due to the horrific side effects.

51. When I raised these concerns to Professor Mutimer, he told me that these side effects only happened in very few cases, and it was more important for me to undergo the treatment to clear the virus.

52. I was with GRO-B at the time and I asked if she would be able to cope with my mental state whilst going through the treatment. She was honest and as she has already been widowed as a result of the Contaminated Blood scandal, she said that she wasn't in a position to be able to support me.

53. I had to weigh up and prioritise my conditions. I had to consider whether the Hepatitis C treatment would have an adverse reaction on my HIV. I also raised my concerns with Professor Mutimer that, as I had been infected with Hepatitis C through numerous batches and therefore numerous genotypes, could it be possible that if I cleared myself of one genotype it would just be replaced by a stronger, more aggressive genotype? He couldn't give me any assurances.

54. I therefore turned down the treatment as my liver results weren't that bad at that stage and I didn't think I would be able to cope with the side effects of the drugs. Dr Wilde understood my decision; Professor Mutimer not so much.

55. I am still on 3 monthly Liver Function Tests to monitor my liver. The LFTs show signs of slight damage to my liver but, to date, nothing significant and nothing that would change my mind about treatment.

56. I have recently been told by my Haemophilia Nurse that my LFTs are raised and they want to do another Fibroscan with a view to putting me on the latest treatment for Hepatitis C.

57. I do what I can to take my mind away from my infections. I go over to France target shooting to forget about everything and release some aggression. I also ride classic scooters which I have been doing all my life. A group of us meet up a few times each year and it is one of the few times that my infections are completely out of my mind. However, I had one person from my scooter group google me and find out about my infections, so even my escape routes have been infiltrated.

58. I refuse to go to dinner parties as it just results in people asking what I do for a living. When I was a Trustee of the MacFarlane Trust I told people that I was a Trustee of a charity in London. However, this inevitably led to questions about what the charity did which made life difficult. I don't want to have to hide who I am anymore.

59. I have constantly been in fear of the stigma attached to my infections particularly in relation to my HIV.

60. When haemophilia started hitting the headlines I started to downplay the fact that I was a haemophiliac due to the connotations associated with it. My friends already knew that I was a haemophiliac as I had told them when we rode scooters together in case I got injured. I remember one night a friend of mine shouted to me across a crowded bar GRO-B you're one of those paedophiliacs aren't you?'. It is testament to how scared I was of people

finding out about my infections that I was glad he had not called me a haemophiliac.

61. When I went away with scooter friends we sometimes socialised in pubs and met up people from other clubs throughout the country. In the 1980s/1990s the fear about AIDS was overwhelming and on those weekends I lived in fear that someone would find out about my condition and throw me through a window or something similar. There were often horrible jokes made about things including HIV/AIDS. This only intensified when Freddie Mercury and Rock Hudson died and HIV/AIDS was back in the press. I just shut myself away from it all or pretended to laugh along with the jokes.

62. Even today, the village that I live in now is not a place I would ever say the word HIV, let alone tell my neighbours that I have it. I therefore have to be very selective about who I talk to. Despite this, when I've been an in patient I have had ward nurses call out in front of other patients **GRO-B** your HIV meds are ready'.

63. I have a general distrust of medical professionals. On one occasion, in or about 2016, I was in the back of an ambulance when I found out they were taking me to Warwick Hospital. I told them not to bother as they wouldn't accept me. They called the hospital and I heard them say on loudspeaker that they didn't want me, which gave the ambulance the green light to take me to the Queen Elizabeth Hospital in Birmingham. They even had to exchange ambulance crews on a bypass in Coventry. I am fortunate that I was awake and able to tell them that Warwick wouldn't take me or I would have been left there for hours without treatment and I could have died.

64. On an earlier occasion (in 2000) I wrote to Dr Wilde because I had concerns about a batch of Factor VIII which was provided to me for home treatment. A copy of this letter is exhibited at **WITN1387005.**

65. This was around the time that I went on treatment strike as I wanted to be treated with recombinant Factor VIII, whilst they had continued to treat me with plasma based Factor VIII. I didn't want to stay on this treatment as I was

told it was still coming from prostitutes and drug addicts and that there was a high likelihood it was contaminated with Parvovirus. I wrote to Mark Winter who supported me in this application, and the Health Authority finally agreed to change it when I was able to prove that it was cheaper.

66. I have also suffered from the stigma of having been exposed to vCJD. I have had to undergo numerous endoscopies as I was concerned I had ulcer in my stomach. For my first endoscopy (in November 2014) I told the nurse I had been exposed to vCJD as required, to which she was perplexed. When I told her she left the room and said a consultant would come to see me.

67. When the consultant arrived, he told me that they no longer needed to give me an endoscopy because they could tell that I didn't have an ulcer, despite the fact that just a few minutes before they had no such knowledge.

68. I said I wasn't leaving the room without an endoscopy as I knew it was a cyst in my stomach. After a very brief endoscopy, they apparently couldn't find anything and sent me home. Some weeks later I had a 5cm ulcer burst and had to be rushed to hospital.

69. Every endoscopy after that I would be admitted at 10am but not be seen until the very end as the last patient. I don't have a problem with them using separate equipment on me but they just have to be honest with me – why make me arrive at the beginning of the day when they know I will be the last patient operated on?

70. Even though my Haemophilia Nurse told me that a memo had been sent round to say that anyone who had vCJD exposure no longer posed a threat to instruments some surgical units (including the one where I was treated) seemed to ignore this guidance.

71. As I was so disgusted by the treatment I received, I complained to the Ombudsmen. He didn't really understand that it wasn't about financial compensation for me, but about making the hospital reconsider their medical

practice. These things are often a point of principle for me. I feel like I have to do something, as I have a voice and am not afraid to use it whereas other people in my position may not be willing to say anything.

72. Eventually, I was told they could perform surgery to take out half of my stomach and some of my bowel because my ulcer was getting progressively worse. I had to tell them that this would affect my HIV medication as it was absorbed through my stomach. They refused to listen and said that if I was admitted they would have to perform the surgery. They were incapable of understanding the effect this would have had on my HIV medication.

73. Even recently I was passing a lot of blood and one nurse was preparing a bed for me to stay over night. One of the nurses who knew me told her not to bother as she knew that I would refuse to stay overnight.

74. My ulcers were only eventually cured when I was able to obtain medication from Portugal. I was told that this treatment was then taken off QEH's list of medications that they were able to prescribe as the drug was too expensive. Fortunately, I was able to keep getting them through my pharmacist who was absolutely brilliant.

75. I am under the care of the maxillofacial department for dental care. They have been brilliant with me and we are able to laugh about them needing to use new instruments due to my vCJD.

Section 6. Treatment/care/support

76. There have been no drop in sessions, no support and no counselling made available. The only support that was there was solely for homosexuals and drug addicts. There was no support system for heterosexual people suffering from HIV and there was nowhere for me to go to. All of the support systems were homosexual orientated and heterosexual people were either shunned indirectly or just overtly discriminated against.

77. Our care was in the hands of haematologists who suddenly had to deal with the vast majority of their haemophilia patients being HIV positive, and it was clear they didn't really know what they were doing or what they were prescribing. There was no joint up care available to us; we would just be battered from pillar to post. There was no long term thinking or planning because they all just assumed we would be dead in a few years.

78. There have been some people who have been incredibly supportive and helpful. Both the nurses at the Haemophilia Unit and Mark Simmons, the social worker attached to the unit provided a great of deal of support. Ann Hithersay has helped to put the framework in place for a support system and around 2002 she arranged meetings with the Chair of the MacFarlane Trust.

79. When I was due to start my ART treatment, Jenny, the benefits advisor from the MacFarlane Trust came to my house. She asked for my bank details and said she would see what she could do as I wasn't capable of dealing with the benefits system myself. She arranged for a DS1500 to be issued to me which gave me immediate benefits due to terminal illness, and this little bit of support encouraged me to try the medication.

Section 7. Financial Assistance

80. I have received the Stage One payment of £20,000 from Skipton.

81. I was involved in the 1991 litigation, and was made to sign a waiver or I was told that nobody would receive a penny. I spoke to a solicitor after receiving this money and I asked if I should seek financial advice. He laughed and said 'you have three years left to live'.

82. I received monthly payments from the MacFarlane Trust, which started at around £80 per month. This was later increased to £110.

83. In or around 1998 I applied to the MacFarlane Trust for a grant to have new a new kitchen and carpets installed. GRO-B had left, I had started treatment

and I was trying to make the house my home. The grant was turned down and the Trust encouraged me to apply for a loan instead of a grant, and as such they put a charge over my house. I believed I didn't have long left to live and I just wanted to feel comfortable in my own home, so I agreed.

84. However, when GRO-B and I purchased our new house, they transferred this charge onto our new property which is in both of our names; despite the fact the charge has nothing to do with GRO-B It was only when I obtained a copy of the Title Deed from the Land Registry that I saw that the charge was on there, which came as a surprise to me as I had previously spoken to a financial advisor who said she believed the charge was no longer there. The charge is now in the name of the Terrence Higgins Trust (THT) following the dissolution of the MacFarlane Trust. We were not informed that any of our data was being transferred to THT or that the charge was going to be put in their name.

85. These charges have affected so many people's lives and have put a hold over them. I am adamant that I won't pay it back because of the manner in which it was given to me.

86. Ironically, the MacFarlane Trust has now transferred all of its money to the THT, a group that has shunned us in the past. They also apparently have our details despite the fact I never gave anyone permission to pass on my personal data.

87. As a member of the Birchgrove Group I challenged EIBSS after a member was taken ill on holiday. His medical insurance didn't fully cover him when he fell ill and there was a few hundred pounds shortfall. When he applied to EIBSS he was turned down. We challenged this as they were supposed to have adopted the policies of the MacFarlane Trust, who would have paid out in such a scenario. I still haven't received a response to all of this and the man who was taken ill on holiday is still emailing them to chase this payment.

88. Another haemophiliac with severe neuropathy was denied a mobility payment as apparently this wasn't a symptom of HIV. The doctor who they consulted with was competent in malaria and other tropical diseases, but had never had hands-on experience with people who have had HIV since the 1980's.

Section 8. Other Issues

89. The Government doesn't like the fact that haemophiliacs have become organised and have stood up for themselves and campaigned for over 30 years for the truth. They thought there would be too few of us left to carry on the fight. They were wrong. Despite the secrecy around our conditions which has been used against us for years, there are still those who are prepared to speak out.

90. There are certain people who try to downplay the affect of HIV, claiming that there is no difference between having HIV and Hepatitis C. We have to constantly justify the impact that HIV has had on our lives. If these things were being said about cancer, these people would be plastered across the front pages of the newspapers, but because it is said about people with HIV, no one seems to care. I have put in an official complaint to the Inquiry about the discriminatory language used and I hope they take this complaint seriously, as it currently feels like the Inquiry is allowing people to behave like this.

91. It is true that, today, HIV is a treatable disease. This has not always been the case and being diagnosed with HIV today is not the same as being diagnosed back in the 1980s when there was either no treatment or only experimental treatment available. Some of the medications given at that time did as much harm (if not more) than the virus itself.

92. I have represented the Birchgrove Group which has been in existence for over 30 years and is the longest running organisation for haemophiliacs with HIV. We have provided support for countless people, yet we still weren't invited to Inquiry meetings. We have waited long enough for our voices to be heard so

they should not be suppressed and pushed down by the people who have been instructed to help us

93. I need the people who are responsible to be held accountable for their actions. Justice is the most important thing to me even over and above financial security. I would rather live in a caravan and see the relevant people held accountable.

94. I was a Trustee for the MacFarlane Trust and have spent many years campaigning through the Birchgrove Group. I have a lot more information that I would like to provide to the Inquiry that does not fall within the remit of the witness statement.

95. Pursuant to paragraph 2.9 of the Notice of Determination in the Award made to my Solicitors preparation of this statement does not cover investigative work. I would like to give evidence on the matters set out at Paragraph 94 above and I am unable to do so in this statement.

Conclusion/Summary

96. It's hard enough growing up with Haemophilia but you are born and you cope with what ever disability you have as you know no different. However that brief moment, laying on a hospital trolley in 1985, only a year after I had been married when a junior doctor accidentally spouted out that "what was happening was probably my HIV developing into AIDS" is not something anyone should have to go through and for this now to be expunged from my records shows to me the attitude at that time towards us.

97. From that brief time in 1985 my life both physically and mentally have never been the same, how can it be, I can only speak from my perspective as a man of twenty just married with my whole life ahead of me with my new wife who wanted to grow old, to become a parent, a grandparent and then to find out, in that way, that it wasn't to be - from that day on nobody can ever be the same. I / we carried in not telling anybody for fear of what may happen, we'd see

"AIDS scum" on the news on the TV and sprayed on walls and think "luckily nobody knows about us" but we were still afraid of coming home and finding that written on our house or car as many others did.

98. No, we were lucky we managed to keep it secret from friends and family members even though searching questions were asked we bluffed it out time and again. The term haemophiliac started becoming synonymous with AIDS as did homosexual and drug addicts -we were lumped in with the lowest of society and our dreams of a fairly normal life quickly dwindled.

99. I won't bother going into the legal actions that never came to anything because we weren't deemed a worthy enough group to be heard and maybe somebody would have had to have been implicated in wrong doing, these are documented well enough and I hope will be even more thoroughly investigated in the Inquiry .

100. When the government, medical professionals, civil servants and the Department of Health all try and down play now HIV this is nothing but insulting language to those of us lucky enough to still be drawing breath, to those of us infected by the NHS all those years ago. This isn't over - the mental and physical anguish goes on, the gallows humour of who will be the last one of us standing hides what we all fear, and have feared for many years, our lives ripped apart by this and then even further infections in the following years and yet we are "ok" according to medical sources.

101. All of us have serious ongoing medical issues either relating directly to HIV or linked to the treatment for HIV, even talking with so called HIV specialists some of which have never heard of what happened to the Haemophilia community let alone understands the tangled mess of problems that we have all been left to sort out whilst those who infected us wrote papers and discussed transmission data in back rooms across the country.

102. Those of us alive who are walking and breathing can hold conversations about normal daily things but the viruses are always lurking in

the background. Nobody who hasn't been in our position could ever understand and that isn't meant as a sympathy statement it's a fact.

103. Through the years and my illness getting worse I have had to leave jobs that I have loved and turn down others that would have been life changing if I had been allowed to enter certain countries at the time however due to my status I was an outcast and good for nothing but waiting for the final big illness to claim yet another haemophiliac. As yet I am still waiting and for those out there who believe now that what we went through (and what we continue to go through) is little more than a few more hospital appointments I think I perhaps could be that ignorant and that I could deal with what happened to all of us as if it was a bump in the road which was all done with now; but it isn't – there has never been closure. We have been denied it time after time; inquiry after inquiry.

104. I have said in my witness statement that yes we all need financial security as most of us lost our careers and futures but I refer back to those professionals meeting regularly and discussing their cohorts, analysing which patient has developed what, patting each other on the back over statistics and articles written on the ever decreasing population of haemophiliacs and their partners; these individuals are why there needs to be a successful inquiry and these are the individuals who need to explain to the general public what they did and why they did it under the guise of medical science.

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105. I would like to apply for anonymity.

106. I would like to give oral evidence provided my anonymity can be protected.

Statement of Truth

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

GRO-B

Signed...................................

Dated 26-2-19