

Witness Name: Malcolm James Slater  
Statement No.: WITN0000599  
Exhibits: Nil  
Dated: 21 February 2019

## INFECTED BLOOD INQUIRY

---

### FIRST WRITTEN STATEMENT OF MALCOLM JAMES SLATER

---

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 17 October 2018. I have adopted the paragraph numbering in the Rule 9 request for ease of reference.

I, Malcolm James Slater, will say as follows: -

#### **Section 1. Introduction**

1. My name is Malcolm James Slater. My date of birth is GRO-C 1947 and my address is known to the Inquiry. I am married with two adult children and I am a retired solicitor (England and Wales). I am a haemophiliac.
2. I intend to speak about my infection with Hepatitis non-A non-B (now known as Hepatitis C) as the result of receiving infected blood products from the National Health Service (the 'NHS') in the early 1980s. In particular, the nature of my illness, how the illness affected me and my family, the treatment received and the impact it had on me and my wife and our children's lives.
3. My wife was with me when I was interviewed for this statement. We met in 1978 and got married in 1980. I was given infected blood products by the NHS in the early 1980s. My wife has been with me throughout my illnesses and has assisted me with making this statement by reminding me of details and incidents.

#### **Section 2. How Infected**

4. I believe I became infected with Hepatitis C via NHS Factor VIII concentrate. As a mild to moderate haemophiliac, I was injected with Factor VIII on many occasions from the 1970s onwards. In the early 1980s I was injected with Factor VIII contaminated with Hepatitis C supplied by the Churchill Hospital in Oxford.

5. I have Haemophilia A and I understood from my mother that I was diagnosed when a baby. One of my maternal uncles was a mild to moderate haemophiliac, so my mother asked the doctors about haemophilia when I was born. I understand I used to bruise easily when a baby and it was not long before doctors confirmed I was a haemophiliac.
6. At school I was always excluded from PE, games, and the playground because of my haemophilia. I believe I was an out-patient at Great Ormond Street Hospital long before I started school, although I have scant recollection of it. I then became a regular patient at King's College Hospital in Denmark Hill, London, before going to my infant school. This was because of internal bleeds, extensive bruising, and some years later, dental extractions.
7. I remember that for one tooth extraction, I was in hospital for 2 or 3 weeks before I was discharged; and I was back in the same bed that evening for another 2 or 3 weeks because of renewed bleeding in my gum. In those days the usual treatment was total bed-rest, blood transfusions (if I had lost too much blood) and fresh frozen plasma. Later I was given Cryoprecipitate and then (much later) Factor VIII when it became available.
8. Factor VIII was a massive improvement – it meant I didn't have to stay in bed for weeks at a time. The norm was 1-2 weeks but sometimes it was more. Usually I'd prefer to be bed-bound at home rather than in hospital.
9. My mother had been a Voluntary Aid Detachment nurse during World War II and, given her training, she was able to look after me. In the years pre-Factor VIII, transfusions of fresh frozen plasma and bed-rest was the main treatment as an in-patient.
10. I have lost count of the amount of times I was an in-patient at King's College Hospital. I think the last time was in 1974 for a tooth extraction, but I don't think it was a long stay, perhaps just a few days.
11. I missed a lot of primary school (infants and junior) and secondary school due to my haemophilia. Nevertheless I managed to get my A levels and went on to read Law at London University. Halfway through my LLB Finals in 1969 I had a 'bleed' in my right hand, my dominant hand. It got extremely painful and swollen; my hand started to resemble a boxing glove as the gaps between my fingers were reducing. I was unable to take any effective pain relief until I had completed all my Final examinations.
12. Back then, the university didn't allow extra time or scribes, so I had to sit my last two papers or wait to try again in a year's time. I decided to complete the last degree exams. I passed, with no allowance for my physical incapacity and the severe pain.

13. Having graduated I entered 'Articles' in a private practice in order to become a solicitor. I attended the College of Law at London's Lancaster Gate and later took my Law Society Final examinations, having to re-sit only one of the exams. However, during this period I suffered a facial injury when I was accidentally bitten by the family dog whilst playing. Inevitably there were bleeding problems and I was an in-patient for a while at the Queen Victoria Hospital at East Grinstead. However, the injury was 'spectacular' and I lost months preparing for the Law Society Finals which I eventually sat long after the planned date. I qualified and was 'admitted' as a solicitor.
14. I used to resist going to the doctors about my haemophilia as they would 'tell me off' if they thought I had done something wrong. For example, after university I rebelled and took up horse-riding as a complete novice, including jumping (my only ever sport other than swimming), which the doctors were not very happy about – so I did not go to GPs or hospitals when I had internal 'bleeds' in ankles, knees, thighs and/or hips if caused by horse-riding. However I did take pain relief. I last rode in approximately 1983, one ride after a gap of years.
15. I did not want haemophilia to affect my work – I didn't want it on my medical records. I told my employers, but I judged when I disclosed it. This meant that I would stay at home during a 'bleed', taking a few days holiday rather than sick leave. Factor VIII meant having to go to a hospital with its own haematology department and a supply of Factor VIII, and that involved time off work and resting in bed for an unknown length of time.
16. Now I use a home supply of Factor VIII and self-medicate, catching a 'bleed' (nearly always internal) at an early stage. However, I have only had this opportunity in recent years, and these days I do not have so many 'bleeds', although I have pretty constant pain – particularly in my hands, shoulders, spine, legs and feet, largely due to arthritis. I am prescribed various pain relief medications e.g. DHCs, Tramadol and the like, but I decided some years ago to resist pain relief medication so far as possible and my use of such drugs has reduced considerably.
17. I met my wife in 1978 and we married in 1980. At that time I was an in-house solicitor for a large life assurance and pensions company, working in its head office in Swindon. I lived not far away in Cirencester, Gloucestershire. My health was pretty good at that time, and my wife and I would often go for long walks with our dog in the Cotswolds.

18. In November 1981 had to have an operation for varicose vein removal in both legs. I was covered by BUPA through my job and I was operated on at the Ackland Hospital, a Nuffield Trust hospital in Oxford. At that time my Haemophilia Centre was at the Churchill Hospital in Oxford, which was headed by Dr C Rizza and Dr Matthews. Immediately before and after my surgery, one of the doctors at the Haemophilia Centre, Dr Au I think, came to treat me with Factor VIII brought from the Churchill. I spent about 7 days in hospital and remained an out-patient at the Churchill once I was discharged from the Ackland.
19. Sometime in early 1982 I became aware of unspecified concerns about my health because lab staff from the Churchill Hospital's Haemophilia Centre began visiting me at my home. At the time I was on sick leave from work. They travelled from Oxford to Cirencester (it could take up to an hour by car) to see me and they would take samples of my blood and my wife's blood, and ask questions about our health. My wife and I were surprised they used to take samples of her blood as it was I who had had the Factor VIII, not my wife.
20. It was somewhat disconcerting because the lab staff wore protective clothing and protective glasses. They looked like investigators at a crime scene. We asked why they wanted our blood and they would only tell us that it was for important research and they really would appreciate it if we would participate. They didn't give us any further information. It was very concerning. My wife had no idea why they were testing her blood as she wasn't a haemophiliac
21. In the beginning they visited every week or two, but eventually the gap between visits got longer; perhaps monthly.
22. After I returned to work they visited me at my office in Swindon during working hours. We would use the Medical Room. I don't remember them wearing protective clothing at the office; questions would have been asked if they had! Eventually the visits and monitoring petered out.
23. For a while I felt fine, and I questioned the purpose of the on-going visits and monitoring. The explanation we were given simply did not justify the cost in time and money. We had been told that it was for research, but it didn't add up. It did not explain the use of such protective clothing. We began to suspect something was possibly amiss.
24. Sometime after I returned to work, I became quite unwell. I couldn't face food, I was physically sick, I had frequent diarrhoea and was getting a bit confused. I was not in a good way.

25. I was signed off work by my GP Dr Winter. Dr Trowell saw me in the Oxford Haemophilia Centre, Churchill Hospital and wrote to my GP, Dr Winter on 27 January 1982. In this letter he said "it is possible that he has developed a non-A non-B hepatitis as a result of the factor V111 cover he received at that time. His liver function tests became abnormal during December and are now very strikingly so with an AST on his last visit of greater than 630. He had bilirubin which had risen from levels below 9 to 20. He himself has developed symptoms with anorexia and nausea, vomiting after fatty food and also had noticed that his eyes were yellow last week."
26. One Sunday morning my wife went to Waitrose in Cirencester to get sausages for breakfast. She vividly remembers that day. When she got back, she had bought a copy of the Sunday Times and showed it to me. The front page was taken up with a story about UK haemophiliacs being diagnosed with a deadly virus acquired through blood treatment. My wife said that when she saw it, her legs 'went', she felt physically sick, and she immediately thought that was why the Churchill Hospital's Haemophilia Centre had been testing us. She worried that I could have given her the virus, our baby might have it, and that we could all die.
27. This was the first time we had heard anything about the problem. Because it was a Sunday there was nobody we could speak with about the article. I don't remember calling the Churchill's Haemophilia Centre about the headline, but we probably did. Up to this point I had had a number of health problems since the operation, e.g. frequent nausea, vomiting, unexplained muscular pain, diarrhoea and total fatigue, but this was the first time that I associated my illnesses with Factor VIII. I had been assured by Dr Rizza, my consultant at the Churchill Hospital, that Factor VIII was safe, at one of our meetings prior to the surgery.
28. Then, probably in the first half of 1982 (I do not keep a personal diary), we were called to a meeting at the Haemophilia Centre. Dr Rizza and Dr Matthews were present with a third person, possibly Dr Trowell. I remember that this meeting was scheduled at short notice by the hospital. At this meeting we were told for the first time that there was concern about a batch of Factor VIII imported from the USA for use in the NHS. We were told that some recipients had become very ill and that was why my wife and I were being monitored. We were also told that I had received some of that contaminated US Factor VIII, the subject of the (by then) widespread news coverage.

29. Dr Rizza explained that the NHS had had to import Factor VIII because the UK supplies were insufficient. I asked questions based on what I had read and seen. Dr Rizza confirmed the imported Factor VIII had been derived from blood that had been sold by people in need of money. It had come to light that 'donors' were often suffering from serious medical conditions which may have been passed to recipients of blood or blood products. I believe it was at that meeting that reference was made to the US 'donors' really being 'vendors' who were paid for their donations and that many may have been drug addicts needing money to feed their habits. The US system for obtaining blood was compared unfavourably with the genuine donor system in the UK, where donors are given only a cup of tea, a biscuit and sometimes their travel expense for getting to a blood donor centre.
30. Dr Rizza said the situation was potentially extremely serious. He agreed with me that for some patients, the contaminated blood products could turn out to be life-limiting, e.g. in terms of life expectancy, ability to work etc. My wife and I were deeply shocked. Apart from anything else, I could have infected my wife with a terminal illness. Fortunately subsequent tests proved she was clear. Our son was never tested. Our daughter was born several years later.
31. We were left in no doubt that the Churchill Hospital's Dr Rizza and Dr Matthews regarded my illness as having come from the Factor VIII used pre- and post- the operation on my legs.
32. I was never told of any risk of infection when I was given Factor VIII. If I had known the potential consequences, I definitely would not have had that operation. I would have survived without it. It was not essential.
33. I am not sure that at that point the doctors were talking about Hepatitis C by that name. My wife thinks they were talking about HIV, but I remember them talking about my illness as being Hepatitis non-A non-B and my asking why it was not being called Hepatitis C given that Hepatitis A and B were recognised. I believe it was Dr Rizza who said that was likely to happen.
34. My wife has told me she believes that the doctors were talking about HIV more than Hepatitis as she was much more focused on HIV at the time. It too had received a lot of adverse publicity. She was less worried about Hepatitis.
35. Although we tested negative for HIV, we were told that we had to keep getting tested because there were various strains and there was no guarantee that the early stage tests could pick up all strains.

36. Although I did not contract HIV I believe there is no doubt that I was exposed to HIV-positive blood or blood products. This is because Dr Rizza told me that my body had resisted the HIV and this had been of particular interest to him. He said there was a very small percentage of people who had been exposed to blood infected with HIV who had not picked up the virus. I had been very lucky.
37. We discovered later that I had contracted Hepatitis C not long after we moved to a village north of York, called Brafferton Helperby. It is unclear as to when that had happened. However, as I do not have Factor VIII regularly it is probable that it came from Factor VIII supplied by the Churchill Hospital, e.g. at the time of my operation at the Ackland Hospital or later.
38. I had changed jobs in January 1985 and my position was initially that of Company Solicitor for another assurance company, General Accident Life and Pensions, based in York.
39. Within a few months Ian Menzies, a main board director of the parent company, the General Accident Fire and Life Assurance Corporation plc ('GAFLAC') based in Perth, Scotland (and which operated worldwide) asked me to transfer to the parent company, which later became a component of what is now (2019) known as 'Aviva'.
40. I was responsible for many company takeovers and I now had to operate out of the Directors' London Suite, at Beckett House, near the Bank of England. (I was by then a statutory director of a considerable number of companies within the General Accident group.) This entailed my having to commute, usually three to five days a week, from approximately 18 miles north of York to and from London's King's Cross station using an annual First Class season ticket for my daily travel.
41. The company paid for all my business travel (by train and air), food, hotels, taxis etc but the pressures were enormous. I have very little recollection of it, but one day I became quite ill. My wife tells me that I came home from work in London late at night (as usual) and said "I don't feel well at all" and my skin had become pale grey. She told me I needed a doctor as an emergency and I agreed.
42. My wife called the GP but by then there were several feet of snow in the area and it was already three feet deep where he lived. However he would send an ambulance. The GP turned up anyway, and my wife says by that point I was lying on the sitting room floor totally collapsed and barely conscious. Apparently the doctor injected me with adrenaline, amongst doing other things, and an ambulance took me to the then York District hospital. I understand it has since been replaced by a newly built 'York Hospital'. My wife has told me she remembers thinking I would die in the ambulance.

43. I do remember some bits after that. I remember being examined by a doctor in the hospital on arrival, then being transferred to the Coronary Care Unit.
44. My wife has filled me in on the details of what happened next. She visited me every afternoon and she always saw the consultant haematologist, Dr Cedric Wyllie. After several days he told her that 'something weird' was going on; they had run tests and got really high readings which meant that I should have had a massive coronary by then. As I hadn't had a heart attack they were thinking of transferring me to a hospital in Leeds for further investigation and possible surgery.
45. I think it was possibly the next day that my wife came to the hospital to visit me but Dr Wyllie saw her first. He had asked the nurses to let him know when my wife arrived. I understand that he told her I had turned yellow, and this meant they had a change of diagnosis, that it might not be my heart after all and it might be a form of Hepatitis. My wife was delighted; she thought this was fantastic, as she knew I had had Hepatitis non-A non-B (now known as Hepatitis C) before (from the Churchill Hospital's Haemophilia Centre) and I had largely recovered, eventually. Back then, we thought hepatitis was something one fixed and that was that. Dr Wyllie told her not to get excited as my condition was still very serious.
46. After that, they both came into the side room to which I had been moved from the CCU and Dr Wyllie told me he thought I had a form of Hepatitis. Even after he left, we were still happy to know it was (just!) Hepatitis.
47. I do not think I was ever treated for Hepatitis C as my readings decreased naturally with time. Hopefully I am clear of Hepatitis C.

### **Section 3. Other Infections**

48. As far as I am aware I have not contracted any other infections from blood or blood products.

### **Section 4. Consent**

49. As far as I know, I have not been treated or tested without my prior knowledge. However, I cannot be certain testing or treatment was what I thought it was for.
50. However, at no time did I consent to the use of potentially contaminated blood products, regardless of their country of origin and the health of the 'donors'. I was only told by Dr Rizza and Dr Matthews about the origins of the infected Factor VIII that had been injected into me after I became ill with potentially fatal Hepatitis.



51. This definitely reduced my trust, and that of my wife, in the Churchill Hospital's Haemophilia Centre, and in the NHS.
52. I do not know whether we were given adequate information after I was injected with infected blood products. I am certain I received no warnings in advance of my being injected with infected Factor VIII. And I certainly did not consent in advance to being injected with blood products derived from blood sold by people in the USA, in circumstances not found in the UK.

### **Section 5. Impact**

53. One of the biggest impacts upon me was the worry that I might have HIV or some other serious infection. And I was fearful I may have transmitted a serious, possibly life-limiting, illness to my wife and children. It was a tremendous worry and felt like a death threat hanging over me, and possibly my wife. I didn't tell many people. Other than doctors, nurses and other medical staff, very few people were told. At that time HIV etc. was regarded as a death sentence.
54. We read stories in the newspapers about things being written on HIV-infected people's walls, people not wanting to share cups etc. We didn't tell anyone in Cirencester (where we were living when I received infected blood products) about what had happened. I covered it up as far as I could. I told a few very senior people at work (two or three), who were very supportive; and I told my dentist as I knew some dentists were having to take great care and I did not want to affect other patients and dental staff.
55. It had a very big impact on our family. My wife was already pregnant with our son by the time that Dr Rizza and Dr Matthews called us to the Churchill Hospital to explain the situation with infected blood and blood products – after my operation. We had actually been to see Dr Rizza about six months earlier to discuss having a family, as we were worried about passing haemophilia on to any children, and he had said it would be fine and that haemophilia would probably be cured in 20 years' time. (It hasn't been... yet.) At that time we didn't know much about people being infected with HIV or Hepatitis C from blood or blood products.
56. Once we knew that haemophiliacs were being diagnosed with HIV and Hepatitis C, I worried that I might have contracted HIV, that I could have passed it to my wife, and that our baby could have it. Although we had tested negative for HIV, we knew the early tests couldn't detect every strain, and we worried about whether any future doses of Factor VIII might be infected. The doctors always made the point that there were different strains of HIV.

57. We had originally wanted to have more children, but my wife suffered two miscarriages after our son was born. By that point, the penny had dropped about the risks of HIV and Hepatitis C. There was then so much adverse publicity, and we decided we would not have any more children. It was especially difficult for my wife, whose body was reacting to having been carrying a baby. She worried that it was irresponsible to have another child with all of the horror stories in the newspapers. Deciding not to have another child was a great trauma to her. I was very concerned about having another child and one or both of us dying as a result of receiving infected blood products. The future looked bleak.
58. That decision lasted for the next three years. In 1988 we had our daughter. We thought that the testing for HIV was better by then, as that was what my wife was really worried about.
59. When my wife was pregnant with our daughter, our GP was very keen on her having a lot of testing. She didn't want to as she had had two miscarriages and was concerned about the tests being risky. The GP even phoned her on the last possible day to have testing and asked if she was absolutely certain. She has told me she wished he hadn't phoned her as it made her waver. In the end, she had the tests and everything was fine. But we don't know if they would have checked for infections.
60. Once we knew that haemophiliacs had contracted HIV and/or Hepatitis from blood products supplied by the NHS to improve clotting, this also impacted decisions I made about my own health. From that point I refused to take clotting factor unless it was absolutely essential. I was worried about what else I might get. When I had a bleed we would take it day by day. We would say, "Let's wait until tomorrow, it's not that much worse, let's wait another day." And I would say that if it got really bad, then I would pick up the phone and call the doctor. But it was rare that I would pick up the phone. Swollen joints could only get swollen to a certain extent. However, I knew delay in treatment could result in permanent damage.
61. If the complications were not there, I would have taken Factor VIII readily. The knowledge that infections could be transmitted by Factor VIII raised the bar significantly as to when I would resort to using Factor VIII. On one occasion, I fell down some stairs at home and put my head through a plasterboard wall. There was no external bleeding but my wife was worried about internal bleeding. I refused to go to hospital because I knew the staff would want to administer Factor VIII as soon as possible. The local doctor told my wife I needed to go and be seen, even if I didn't accept clotting factor, and I eventually went to be checked out a few days later. Fortunately I suffered no serious injury – unlike the wall.

62. To this day I am still reluctant to take Factor VIII. I have had to accept it sometimes; I had colon cancer, so I was sliced down the front of my torso, I have had my left ankle joint replaced and my right ankle joint had been fused, and I have had skin cancer which was operated on. This has all been in the last few years. So I have had to have Factor VIII for those occasions. Two days before I was interviewed for this statement, my doctor thought I had a bleed in an arm and I ignored it. My reluctance to take Factor VIII may have had consequences for my health but I am unaware of any. I do take anti-arthritic medication but rarely pain-relieving medication. However I avoid taking Factor VIII when the risk of taking it seems unnecessary. But I always take Factor VIII with me when I go abroad – just in case.
63. The physical effects of Hepatitis C had a big impact on me. I suffered with tiredness, nausea, confusion, being physically unable to exercise like I used to, weight loss, and being unable to eat a lot of things as they would upset my stomach. Also since being diagnosed with Hepatitis I no longer drink alcohol due to a possibly erroneous idea in my mind of there being a greater risk of liver cancer. (This is despite a GP having written in my records that I do drink alcohol.)
64. I became vegetarian over thirty years ago as I thought eating less fatty foods may help. For years after my operation at the Ackland Hospital I suffered with vomiting and would have periods of feeling OK and periods of being ill. I have rarely experienced that since giving up meat (but not fish).
65. I have been unable to go for long walks and do the things I used to do because of sheer fatigue and pain since being an in-patient in the Ackland Hospital.
66. Before I became ill with depression when I was approximately 48 years of age, I used to work full-time and still have the time and energy to do other things; I once wrote a book on capital taxation law for landowners in my spare time. A publisher accepted the book and printed a significant number. Then the Chancellor changed the law shortly after publication! Since I became ill, such time-consuming research and writing have no longer been realistically possible.
67. After my diagnosis in York District Hospital (see earlier) I had to stop commuting to London from North Yorkshire. However I still had to do my job and so we bought a house in Rutland. It was far more central to my work and day-to-day living became much easier.
68. In 1990 I moved to Scotland to work, as I became one of two Company Solicitors at the world headquarters of General Accident, located in Perth. My health wasn't great, but I was used to that following my contracting Hepatitis from the contaminated Factor VIII in Oxford.

69. I felt a lot of pressure with work. I felt that I wasn't giving what the company was paying for, so I would spend my weekends working to try and keep up. I was responsible for UK matters; the other Company Solicitor mainly handled international matters, usually using lawyers in private practice who were qualified in the relevant jurisdiction. We each headed our own teams of lawyers: barristers and solicitors. But there were immense pressures and staff were 'burning out'.
70. As a solicitor, although I had finished my formal education, I had to keep up to date with the areas of law that related to my work. This was mostly company law, commercial law and employment law. Illness affected my ability to do this. I needed to go to professional development lectures arranged by the Law Society (England and Wales) to stay up to date, and I had to absorb all relevant new case reports. When I became ill I found difficulty keeping up the pace. I had difficulty concentrating and would get confused, so I gave up reading the Times Law Reports etc. Sometimes I would buy a book twice because I would forget I already owned it. I was exhausted physically and mentally.
71. In approximately 1995, possibly earlier, I began to suffer from clinical depression and had a breakdown. My GP has told me that people with multiple illnesses tend to develop depression. The onset of arthritis was a big factor in this. I didn't want anything about depression on my medical records, so I didn't go to the doctor until I became really ill and had to seek help. He 'signed me off work'. This lasted for two years until I took voluntary early retirement in 1997 at the age of 50. My wife had to sort out my retirement with the company's Human Resources department as I wasn't fit to do it.
72. At one point I used furniture to barricade myself in the bedroom; my medication had changed and I didn't realise the effect it was having on me. At that time I didn't feel safe around my family and was hallucinating.
73. For about four or five months I didn't leave the house or see people. Then we bought a dog for our daughter, which was a tremendous help because I had to walk her. Unfortunately I cannot manage walking my present dog on my own because of my arthritis.
74. Day-to-day memory issues can still affect me. For example, the night before the investigators interviewed me for this statement, I couldn't sleep because I couldn't remember if we had current house insurance. We had! I pay the premiums.

75. Being infected with Hepatitis C has had significant financial effects on our lives. I had to stop working and take early retirement in 1997 at 50. At that time I was employed in a very senior position; I was on the boards of a lot of my employer's subsidiary companies and I had a significant remuneration package with benefits, including high-value life insurance.
76. When I retired I was given a straight choice of either taking voluntary early retirement or retiring on grounds of sickness. Retiring on grounds of sickness would entitle me to 2/3 of my (high) salary for life, but I would have to have 6 monthly check ups, and if I were ever considered capable of holding down a job – even something like a lollipop man – then the payments would have stopped totally.
77. The other option was 'fractional voluntary early retirement' where I would take my pension as it stood then, based on years contributed. I had only been with my then employer for a few years, so I had not built up many contributions; and by changing job I had lost my entitlement to a pension from my previous employer. I am not sure what my pension would have been worth if I had worked to ordinary retirement, 62 years old in my case; but it would have been much higher than most people can expect. However the pension I received for early retirement was (I think) 1/5 of my annual salary at the time, but with annual increases, which have always been very good.
78. My wife and I own a home in Cyprus and my travel insurance premium is higher because of the history of Hepatitis and haemophilia. My wife's annual premium was £110 last year whilst mine was £380. This was the best price we could find for the amount of cover; many other insurance companies were more expensive.
79. When I was unwell but trying to keep working, my wife had to raise the children every day, as I would use the weekends to try and keep up with work. Before I had my breakdown, my wife worked part-time. When I had to retire, she had to work full-time and she carried on working beyond retirement age. My breakdown had a tremendous knock on effect for her; she had to take life one day at a time.
80. There was no point looking forward and speculating as to whether I would ever get better. It also caused us a lot of worry about the impact upon our children. At the time of my breakdown, our son was in a private school as he had been bullied in his previous school, and we worried as to whether we could keep him at the new school. But we succeeded in doing so and he obtained two degrees. Our daughter graduated and works in a major hospital near London.

81. My wife protected the children hugely from my illness. They knew that I was ill, but they did not know the extent. We had let the children think I chose to stay home reading a book; we didn't let them know that I was limited by illness. I didn't complain much; I would go upstairs and the children would think I was in my study. We wouldn't tell them I had gone to bed. When I was ill, my wife kept them away; she would make sure they played with friends after school.
82. We only recently told the children about our experience with being monitored and tested by the people from the Haemophilia Centre at the Churchill Hospital in Oxford who would come to our house in protective clothing. They were horrified.

### **Section 6. Treatment/Care/Support**

83. I have never had any form of treatment for Hepatitis C. When I moved to Perth from Rutland in January 1990 I saw doctors at the Edinburgh Royal Infirmary, possibly at the instigation of the hospital's Haemophilia Department. They planned to treat me with Interferon but then they found my readings had gone down a little, so they decided not to treat me with Interferon. There is a suggestion that my readings indicate that I cleared Hepatitis C naturally, without any medical intervention.
84. I do not think that I faced any difficulties or obstacles in obtaining treatment, care or support for my Hepatitis C when living in England. I trusted the doctors when they said there was no treatment for Hepatitis C at that time. Then when they were considering Interferon, after our move to Scotland, it was the doctors' decision to not use it. On the then facts, the decision seemed to me to be sensible.
85. Personally, I feel that the doctors all did their best whilst being under-resourced.
86. My dentist is aware that I was infected with Hepatitis C and uses one set of instruments for me alone. That has been the case with all my dentists since I contracted Hepatitis C.
87. I do not remember being offered counselling in relation to my Hepatitis C and nor does my wife.

### **Section 7. Financial Assistance**

88. I have received assistance from the Skipton fund. I believe I get approximately £3600 per year. I think I may have been given a lump sum payment from the Skipton fund.

89. I learned about the Skipton fund from my GP. He called me to the surgery about a year ago (I think) and mentioned it to me. I think I am now under EIBSS. I think we get payments periodically.
90. There were no issues in getting financial assistance from the Skipton fund. The GP sent the application off for me.

**Section 8. Other Issues**

91. We have tried to request my medical records. GPs and hospitals have been helpful. The Haemophilia Centre at the Churchill Hospital in Oxford who injected me with infected Factor VIII when I was an inpatient at the Ackland Hospital in Oxford have sent me only limited information.
92. We asked Ninewells Hospital, Dundee (my present health centre), what records they had from previous hospitals, but they had very little; we were only given the dates of when I was last involved with each hospital. This is not a criticism of the Haematology team at Ninewells. The team is headed by Dr Ron Kerr who used to see me when he was on the staff of the Haemophilia Department at Edinburgh Royal Infirmary. He has always been very supportive and helpful.

**Statement of Truth**

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

Signed \_\_\_\_\_

Dated

89. I learned about the Skipton fund from my GP. He called me to the surgery about a year ago (I think) and mentioned it to me. I think I am now under EIBSS. I think we get payments periodically.
90. There were no issues in getting financial assistance from the Skipton fund. The GP sent the application off for me.

**Section 8. Other Issues**

91. We have tried to request my medical records. GPs and hospitals have been helpful. The Haemophilia Centre at the Churchill Hospital in Oxford who injected me with infected Factor VIII when I was an inpatient at the Ackland Hospital in Oxford have sent me only limited information.
92. We asked Ninewells Hospital, Dundee (my present health centre), what records they had from previous hospitals, but they had very little; we were only given the dates of when I was last involved with each hospital. This is not a criticism of the Haematology team at Ninewells. The team is headed by Dr Ron Kerr who used to see me when he was on the staff of the Haemophilia Department at Edinburgh Royal Infirmary. He has always been very supportive and helpful.

**Statement of Truth**

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

Signed

GRO-C

Dated

28 February 2019

GRO-C