

ANONYMOUS

Witness Name **GRO-B**

Statement No.: WITN2117009

Exhibits: WITN2117010-011

Dated: 3 April 2023

INFECTED BLOOD INQUIRY

SECOND WRITTEN STATEMENT OF **GRO-B**

I provide this supplementary statement following my first written statement which was provided in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5th November 2018 to provide further information which may be relevant to the Inquiry.

GRO-B will say as follows: -

1. On 25 January 2023, my solicitors were provided with a copy of the statement of Chris Deighan of Greater Glasgow Health Board dated 18 August 2022 (WITN7116009). Exhibited to the statement was a statement from Professor Lowe dated 25 March 2022 (WITN7116010). I have now had an opportunity to review these statements and wish to provide some further information to the Inquiry by way of response.
2. The bulk of Dr Deighan's statement relies on the statement provided by Professor Lowe, which contains statements that are either irrelevant or which cannot be verified. I wish to highlight that a number of the statements made by Professor Lowe cannot be verified or are irrelevant because they are not made in response to any criticism levied in my first written statement dated 13 January 2020 (WITN2117001). In a significant regard, it is not a response to criticism, but the introduction of new information which has no relevance to the original statement made.

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3. In relation to the criticisms which the Board has been asked to address at 1.1, My statement of 13th January 2020 at paragraph 12 does not say that I was tested for HCV in 1991 and 1993 without my knowledge or consent. Please refer to the original statement for the actual wording. As per paragraph 14 of my statement, I say that the testing for HIV conducted at Manchester Royal Infirmary was without consent. This question has been directed to the wrong party by the Inquiry team.
4. On HCV testing, I have no clear recollection when and if I gave consent to be tested for HCV. The records I have access to do not help substantially in this regard. I do not believe it was as early as 1991. As I say at paragraph 10 of my statement, I do recall having a conversation about testing and to the results being available in early 1994. To clarify matters I requested Dr Campbell Tait (who succeeded Professor Lowe) to confirm for me when I had been tested. His response is provided at exhibit WITN2117005 to my original statement. This does not clarify whether there was any conversation between me and Professor Lowe over testing. I started being seen at Glasgow Royal Infirmary in April 1990 and I feel that I would have remembered such conversation had it occurred in early 1991 as suggested by Professor Lowe. This implies that the first round of testing may well have been without consent. From the clinical records produced by Professor Lowe there is no reference to any discussion with me or of my giving consent for testing on 12/03/1991 as suggested by Professor Lowe. His evidence does not correspond with the written documentation.
5. Equally, I have been unable to identify from the copy health records provided to me under a data subject request under the General Dental Protection Regulations any reference to testing for HCV or test results that correspond with the information provided by Professor Lowe in his statement in relation to 1991. As I have commented at paragraph 42 of my first statement, I have identified gaps in the documentation provided.

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6. In his statement Professor Lowe says that the clinical records show that I was tested for HCV in 1991, with the negative results being available on 21st March 1991. He says these test results were notified to me on 27th June 1991, but I have been unable to locate any clinical notes to this effect. The letter from Professor Lowe to my GP dated 3rd July 1991 detailing a consultation with me on 27th June makes no reference to HCV test results. The first reference I can find in correspondence with my GP to my being HCV positive is a letter of 9th May 1994 (referred to in the statement of Professor Lowe as WITN7116014).
7. Within his response, Professor Lowe comments on production WITN7116013 and the reference in it to my participation in a clinical surveillance study. It is not clear why he feels a need to refer to this as in my original statement I say at paragraph 14 "I have knowingly participated in research, sometimes related to HIV and HCV, and as far as I can tell appropriate consent was sought and given. I chose not to participate in any drug trials." There is thus no dispute over my participation in such studies. The production merely goes to illustrate that he incorrectly referred to the study in my health records as a clinical trial.
8. Professor Lowe suggests in his statement that Thrombocytopenia can have many causes and occurs in about 20% of symptomatic HIV patients. He questions whether HIV was the cause in my case. In correspondence, Dr Seaton from Infectious Diseases states that it was. Other documentation including the immediate discharge note following surgery and Nursing notes from ICU indicate that it was. I exhibit these documents as **WITN2117010** and **WITN2117011**. Whether the procedure for the removal of the spleen was appropriate and successful is not the point at issue, it is the need for the intervention that is being raised. My belief is that because of HIV infection I had to have my spleen removed and this would not have been required if I had not been infected with HIV.
9. Professor Lowe's statement at the second paragraph of page 3 says that I was referred to Dr J Mackenzie's Gastroenterology Clinic in 1994. If he did refer me, I do not recall ever being seen at that clinic. My recollection is that I was not referred to a Gastroenterologist until June 2017 after I cleared the HCV

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infection following a second round of treatment at the Brownlee Centre at Gartnavel General Hospital. The referral was to Dr Priest at Gartnavel General Hospital, who I continue to see.

10. In response to Dr Deighan's invitation to advise him of any missing records, I would comment that the information provided to me via a data protection request for all records relating to me did not produce records relating to:

- Comprehensive records relating to the splenectomy in 1994 covering haematology, infectious diseases and surgery.
- Records relating to orthopaedic surgery
- Electronic clinical notes from out-patient clinics at Glasgow Royal Infirmary from when the system was implemented.
- Factor VIII, **or other blood-based products**, supplied for treatment of Haemophilia – dates, quantities, manufacturer and product type. These are now kept on Haemtrack, but were previously retained as Excel spreadsheets.
- Administration of other medication within the Haemophilia Centre at GRI
- The clinical records from the Haemophilia Centre for 12th March 1991, 21st March 1991, 27th June 1991, the unspecified dates when consent to HCV testing was granted in 1993 and the dates the results were **allegedly** reported to me on 18th March 1994.
- Gastroenterology Clinic records at GRI from March 1994 onwards.

Statement of Truth

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

Signed _____

GRO-B

Dated 03/04/2023.