Witness Name:

GRO-B

Statement No:WITN2607001

		Exhibits	WITN2607002-004
		Dated:20 <sup>th</sup> F	ebruary 2019
IN	FECTED BLOOD INQU	JIRY	
FIRST WRITTE	N STATEMENT OF	GRO-B	
Rules 2006 dated 12 <sup>th</sup> Dene Rule 9 Request for easons will say  Introduction  1. My name is GF	se of reference. as follows:-	and date of bi	
to the Inquiry.	iny address	and date of bi	THE ATE KNOWN
2. I am GRO-B from the GRO-B	I live in the north of	GRO-B	not very far
3. I am a carer for GR GRO-B	O-C who has severe ha	emophilia. I ar	m the sister of GRO-B
GRU-B	<b>:</b>		
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4.	I come from a large family. My eldest sibling is GRO-B who was
	born in GRO-B Next came A in GRO- Then my sister GRO-В in
	GRO-B, then GRO-B in GRO-B then GRO-B: D in GRO-B, GRO-B
	GRO-B , GRO-B and then GRO-B
5.	My brother D also tragically died as a result of infection from
	infected blood in GRO-B
6.	This Statement is my brother, A story and also how his tragic
	death impacted on myself.
	Have befored
2.	How Infected
	1. A suffered from severe haemophilia. As a young child he
	missed a lot of school because of this. He would suffer with bleeds
	in his joints and what might, for others, be minor cuts and bruises,
	had to be treated seriously. He had problems with a swollen knee
	and could not bend his right knee as he became older.
	2. He would sometimes go to the local hospital in GRO-B which is called
	2. He would sometimes go to the local hospital in GRO-B which is called Altnagelvin. If it was more serious, and also for regular check-ups,
	he would attend the Royal Victoria Hospital in Belfast. Over the
	years he was dealt with at the Royal Victoria by a number of doctors
	but the principal one in respect of his care was Dr Elizabeth Mayne.
	3. Sometimes he would be in hospital for a number of days or even
	weeks. He would have some lessons in education in the hospital in
	those instances.
	<del></del>
	4. In the 1970s the blood products being used on A were Factor 8.
	Initially my parents were both trying to administer the Factor 8 to
	him. It would be sent down to Altnagelvin Hospital where they
	would pick it up. My parents had to go to the Royal Victoria to get

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		training for this. From about the age of 14 or 15 A was able to administer it to himself.
-	5.	There was never any suggestion that there were any risks or problems associated with the Factor 8. Everyone assumed that it was safe and the best treatment available as it had been recommended by our doctors.
	6.	When he left school, A went to GRO-B which is a sort of Youth Training Scheme (YTS) Scheme for youngsters. Because of his illness, employment was somewhat disrupted. For a short time he tried working in the GRO-B and in GRO-B but for most of his adult life he lived either in or close to the family home and he drove a local taxi
	7.	A had issues with pancreatitis in the late 1970s and early 1980s.
	8.	I now know from his medical records that he appears to have been diagnosed as HIV positive in November 1983.
	9.	I am not aware of any counselling or support being given to A  He had to deal with it all by himself. He did not tell us at that time.
	10	It was not until many years later, in May 1999, that he was diagnosed as being Hepatitis C Positive. He found out his diagnosis during a spell at the Royal Victoria Hospital.
3.	<u>Ot</u>	her Infections
	1.	I am not aware of any other infections A may have had other than HIV, AIDS and Hepatitis C as a result of being given infected blood products.
4.	<u>Cc</u>	<u>onsent</u>
	Not	Relevant Page 3 Not Relevant

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: :	A is no longer alive to speak for himself but he must habsolutely devastated to have been diagnosed with HIV in 1980s. At that time HIV was considered to be an inevital sentence. Terrifying adverts were being run on television the radio warning about the dangers. Sufferers from HIV is stigmatised and regarded as authors of their own tragic in the was associated with gay sex, promiscuity, drug abus like.	n the midable death on and on were often hisfortune.	
5. Impact			
	This is because, in that year, <b>GRO-B</b> Dr Mayne was everybody associated with infected blood, in Northern II		
( (	We understood that they were testing us to see if we well of haemophilia. There was no suggestion that it was for reason. At that stage we had no idea that A diagnosed with HIV a couple of years earlier. I only four recently when I saw A medical records.	any other	
t	can remember, although I was still a young girl at that tin o go GRO-B to Belfast with my mother, father and brosisters.		
ŧ	On the 12 <sup>th</sup> February <b>GRO-B</b> Dr Mayne wrote to managed for suggesting the family were all tested. It was arranged for ravel GRO-B to Belfast, as a whole family group, a few ween tested.	or us to all	
ł	believe A was treated and given contaminated bloch his consent or knowledge. That is how he got these dead as he was used as a "human guinea pig".		

2.	Living in a rural GRO-B community in Northern Ireland, it must have been terrible for A and he must have greatly feared his diagnosis leaking out and people coming to the wrong conclusion.
3.	Indeed, there is reference in his records to speculation that he may have been bisexual, reference can be found in Laboratory Investigations exhibited at WITN2607002, but that could not be further from the truth.  A was straight.
4.	I now know from his records that he started treatment with AZT, 3TC and Saquinavir. He developed pancreatitis and stopped the Saquinavir.
5.	In the early 1990s A started to live with his girlfriend/partner.  Although their relationship was off and on at times, she was his long-term partner for most of the rest of his life.
6.	My other brother, D also a suffered from Haemophilia, had also been diagnosed with HIV.
7.	D fell ill and tragically died in GRO-B
8.	A went into self destruct mode after D s death. Before that he was a social drinker. It took to heavier drinking. He knew he had his own death sentence.
9.	In around 1997 I had a handwritten letter, hand posted through my letterbox saying that, in respect of HIV, I should get checked.
10	I had no idea what this related to. At that time I was unaware that my one brother had died from HIV or that my other brother, A had previously been diagnosed with it. I took it to show my mother and she burnt it.
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11.1 do not know for sure who wrote or posted that letter.
12. In early 1997 A commenced treatment again on AZT, 3TC and Saquinavir. Later that year he was told that "HIV viral load not detected". He must have thought that he was clear.
13.In June 1998 Ribavirin was added to the treatment.
14. In 1999 he was told that his girlfriend was HIV positive. He must have assumed that he had infected her. They had possibly begun having unprotected sex after he might have thought he was clear of HIV. That is my speculation though as I do not know for sure. That must have been a terrible thing for A He must have been riddled and burdened with guilt. His medical records note that it appears he passed on the infection to her.
15. It was also around that time, in 1999, that he was given a positive diagnosis for Hepatitis C.
16.It is not surprising that A was now in a very dark place. His drinking deteriorated.
17 He was drinking heavily. He was only taking his anti-viral medication erratically.
18. He was admitted to hospital because of this. Around the same time his girlfriend had to go to hospital in GRO-B because of her HIV treatment (she was originally from the GRO-B).
19.I was told that A had HIV by D s wife. I remember that she called me in work so I knew something serious was up. She told me that A had HIV and that is what had also happened to D I found out A was HIV positive on the GRO-B
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GRO-B I was traumatised and in complete shock. I felt physically sick and started to shake. It is a day that I will never forget. I found it difficult to grasp at exactly what I was being told. I thought he was going to die, as he was in hospital. It was a horrendous time.		
20. Despite everything A got on with life. He was upset and troubled but did his best to put a brave face on things. Unfortunately he remained prone to binge drinking, it was a way for him to try to forget everything.		
21. He continued with the taxi driving on and off. He continued to live with his partner. They had a GRO-B house very close to the rest of us. As a family we did our best to support and help		
22. In the early 2000s his health was not very good. I can recall him having terrible night sweats. He had to change the bed every day or sometimes two times a night. I understood that it was a reaction to the drugs he was having to take for the HIV and Hepatitis C.		
A tragically died on GRO-B Although he had been poorly both mentally and physically, it still came as a great shock with no real pre-warning. In a strange way I am glad about this. He did not suffer the long, terrible decline of his brother.		
24 A was found dead about 5.00 pm on GRO-B by his partner in his house.		
25.I now know from looking at the Medical Records that his HIV and Hepatitis C must have played a part in his death. However, the Death Certificate only referred to pneumonia being the cause of death.		

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26.As is customary, a two day wake was organised. Normally one would have an open coffin but A coffin was closed. A photograph of him was put on the top of the coffin.		
27. People did not think anything of this because, in the years before his death, A had made a big thing out of saying that he specifically wanted the coffin closed, he did not "want anybody looking" at him.		
28. In hindsight I now know that he was fully aware that because of his HIV infection, the undertaker would ensure the coffin was closed.		
29.1 found the idea of the closed coffin very distressing. It meant that you of course could not actually see him. It could have been anyone in there. It takes away the person from you.		
30.I hugely miss my brother. I miss him every day. He would have been great with my young son, who also suffers from haemophilia.  A would have given him the benefit of his advice and experience of dealing with the condition.		
31.I cannot help but worry about what my son has in store for him. Everyone reassures us that something like the infected blood scandal will never happen again but I find it difficult to trust anybody, particularly those in the medical profession, anymore.		
32.I attended the GRO-B		
GRO-B I found it a very emotional and trying experience. It also		
caused me to worry about infections within my family. Myself and		
my remaining brothers and sisters arranged for us to have tests for		
Hepatitis when we came back home from the Enquiry, we were so worried.		
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	33. It was terrible watching A suffer and destroying himself at times with the drink. I felt useless as I couldn't help him.		
	34.I feel anger and rage that my brothers were killed by contaminated blood. The anger has got deeper as it is clear that the Doctors knew what they were doing and there was a terrible cover up by the medical profession and the government.		
	35. It has caused me mental anguish and depression. I am now awaiting now Cognetive Behavioural Therapy treatment.		
5.	<u>Financial Assistance</u>		
	1. My brother D received a payout of, I think, £20,000.00 resulting out of litigation in the late 1980s or early 1990s. I am not aware of him or A obtaining any further payouts during his lifetime.		
	<ol> <li>I am of course aware of the payment his partner obtained via his mother but I consider it would be awkward to raise that issue in the Statement.</li> </ol>		
3.	3. Other Issues		
	1. I am concerned that A Medical Records are not complete. I have seen some records. The records I have seen start at a file marked "File 6". What has happened to the first five files? Why have they gone missing? Why have they been destroyed? I feel it really is strange that File 6 is available and the rest has obviously been taken out of reach for a reason, and for that reason to me, is a cover-up.		

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2 Letill ariove fo	or my brothers. A did not have a li	ife. At times he
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Statement of Truth

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

. Signed

Dated 20/2/19