

ANONYMOUS

Witness Name: **GRO-B**

Statement No.: WITN7593001

Exhibits: **WITN7593002 -3**

Dated: **07-03-2023**

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF **GRO-B**

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 20 January 2023.

I, **GRO-B**, will say as follows: -

Section 1. Introduction

1. My name is **GRO-B**. My date of birth is **GRO-B** 1967 and my address is known to the Inquiry.
2. I am 55 years old and married to my wife, **GRO-B**. Together we have one son, **GRO-B**. I intend to speak about my late mother, **GRO-B: M**, and her infection with Hepatitis ("HCV"). In particular, the nature of her illness, how the illness affected her, the treatment received and the impact it had on me, her and our lives together.
3. I have a younger sister named **GRO-B** who will also be providing a statement to the Inquiry.

ANONYMOUS

4. I am currently semi-retired after being made redundant over 12 months ago, which alone was a big shock for me. I have since had health problems for which I spoke with a counsellor about and was getting better however my mum's death has knocked me back.
5. Since retirement, I grow vegetation in my garden, I have been growing vegetation, foliage and live or preserved plants for over 20 years and now use my skills at home. My sisters, father and I, all live close to each other.
6. I can confirm that I have chosen not to have legal representation and that the Inquiry Investigator has explained the anonymity process to me. I wish to be anonymous.
7. The Inquiry Investigator has explained to me the 'Right to Reply' procedure, and I understand that if I am critical of a medical professional or organisation, they will have the right to reply to that criticism.

Section 2. How Affected

8. My mother received infected blood through a blood transfusion after losing a lot of blood whilst giving birth to my younger sister [GRO-B] on [GRO-B] 1978 at Hope Hospital in Salford, Manchester.
9. These circumstances have been clarified through my mum's medical records. Although initially hard to recover, my mum's GP was able to retrieve 15 files of manually scanned medical records dating from 1970 to the 1990s, and from 2021, I received electronic medical notes.
10. In March 2020, my mother found out she was infected with Hepatitis C, whilst having an annual blood test. Mum's platelets were historically low so they were keeping an eye on it. The reason for the yearly testing was because in 2019, the numbers had changed and were more worrying so they had referred her to a haematologist for blood testing.

ANONYMOUS

11. Upon diagnosis, she was asked whether she wanted to receive HCV treatment, but as mum was already 80 years old and had not experienced any major illnesses apart from tiredness, she thought she could handle it herself and subsequently declined treatment. HCV treatment was not adequately explained to mum. At the appointment, she had no family around to help absorb the news and information.
12. Mum was born on the **GRO-B** 1939 **GRO-B**. She had a 'get on with it' mentality, however if she had received adequate medical advice, she may have changed her mind in regards to treatment, as mum would change her mind due to life priorities such as more time with her children and grandchildren.
13. In **GRO-B** 2022, Mum attended Shrewsbury hospital for routine polyp removal surgery and rapidly declined in health. This is discussed in detail at **Section 5**.
14. Mum passed away early on Saturday morning **GRO-B** 2022 with her family around her. I have exhibited to the Inquiry mum's death certificate (**Exhibit WITN7593002**), which details her death as "Decompensated Liver Disease and Hepatitis C Infection post Contaminated Blood Products".
15. Mum's HCV diagnosis could have been found much earlier than 2020.
16. Previous to mum's diagnosis, since 2012, she had been receiving routine health checks every year and this was due to low energy counts. Since reviewing mum's medical records, I can see that a doctor wrote an exclamation mark besides her liver reports. Further to this, some of her blood results were detailed as abnormal and she was presenting with HCV symptoms, such as skin rashes.
17. If addressed in 2012, she was in her seventies then and would have been even more inclined to take on HCV treatment.
18. Further to this, following her diagnosis in 2020, I can see from mum's medical records, a letter (**Exhibit WITN7593003**) from her Consultant Hepatologist, Dr Ulrich Thalheimer, to her GP surgery, and specifically, Dr R Clayton of Dodington Surgery and dated 03 April 2020, stating "it would be sensible to see her in

ANONYMOUS

secondary care to offer her screening for possible cirrhosis and treatment for her Hepatitis C. Please let me know if you would like us to go ahead with this.” However, no action was taken by mum’s GP and therefore, cirrhosis was not diagnosed, we were not told about potential cirrhosis and screening was never spoken about. HCV was also never discussed again.

19. Medical follow up should have been given following the HCV diagnosis, and as seen in mum’s medical records, suspected cirrhosis. Even in **GRO-B** 2022, during the first hospital admission, mum’s GP should have referred her for scans after the polyp surgery when she was presenting with tummy issues. They would have identified liver issues sooner, acted on this diagnosis, and she would have possibly not gone through the second journey to hospital and a round of medication that would have never worked.

Section 3. Other Infections

20. As far as I am aware, I do not believe that mum contracted any other infections.

Section 4. Consent

21. I do not believe my mother received adequate or full information regarding the blood transfusion, otherwise she may have refused it. I do not know whether she gave consent to the transfusion.

Section 5. Impact

22. Mum was very fit and healthy and did not present with signs of Hepatitis C for many years, until 2012 and as mentioned in **Section 2**, she had been receiving routine health checks every two years due to low energy counts. Mum was also suffering from skin rashes and her medical records detail blood abnormalities from

ANONYMOUS

2012.

23. As detailed in **Section 2**, in March 2020, mum was diagnosed with Hepatitis C.
24. In 2022, mum was suffering with pain and had blood appearing in her stools and urine. Following investigations, polyps were found. She was told there was a the very straight forward procedure she could have for the polyp removal and she therefore agreed to this.
25. On GRO-B 2022, I took mum in to Shrewsbury Hospital for the procedure and it seemed to have gone fine. However, after returning home and four-days later, she was unable to get off the toilet and was bleeding from inside. My father called an ambulance and it took between four to six hours for them to arrive. The West Midlands are one of the worst in the country for their ambulance response time. Once my mum arrived at hospital, she had to wait on the ambulance trolley in a corridor of the A&E Department, where there was no privacy. It was not until the next day that she received a room and an adequate bed, by which point she was exhausted.
26. We were then advised they would carry out scans to find the cause of her bleeding, but a scan did not happen. Mum was instead given a TXA (Tranexamic acid) a clotting drug by the ward doctor. We later learnt that due to the Hepatitis C, she should never have been given this medication, as it increases blood clotting, causes issues to organs and accelerates liver problems and scarring. However, mum was released from hospital.
27. Once home, mum was stable for around a week but she was not recovering. Her GP, Dr GRO-B of Churchmere Medical Group, Bridgewater surgery, Drumcarrig, Bridgewater Street, Whitchurch, Shropshire, SY13 1QH, came out every other day as we were not happy with her tummy being swollen, sore and hard. The GP kept repeating that this was retention of water from the surgery. Mum's GP was aware of her Hepatitis C status but still no scans or other investigations were carried out. The GP gave mum medication for water retention, but it only made mum sicker; she lost her appetite and was unable to get out of

ANONYMOUS

bed. This meant that my family and I had to physically assist mum out of bed for her needs. It was clear she was deteriorating dramatically, and we explained to her GP our concerns about the HCV and questioned if that could be causing the water retention, pain, swelling, and sickness.

28. At this point, we were not aware of the cirrhosis, but the GP would have known about this (**Exhibit WITN7593003**), yet no action was taken.
29. On **GRO-B** 2022, mum continued to deteriorate, and dad called the GP for an update on mum's blood tests. He was kept waiting and had to hang up as mum needed him. On **GRO-B**, Mum's health was getting worse; generally unwell, not eating, being sick, stomach pains and back pains. We called the GP again to get the doctor to come out. The paramedic who previously came out arrived and he was not happy with mum's blood results. He arranged for an ambulance to come out to her and this took eight hours. Mum was taken back to Shrewsbury Hospital where she waited one hour in an ambulance before being wheeled to a back corridor area due to no rooms or beds being available. It was really hard to see mum so unwell and so I had to kick off at the head nurse and paramedics about this. As a result, mum was wheeled into a temporary booth where she had scans carried out which returned showing liver issues as the cause of the pain.
30. They found that mum's liver was infected from inside, she was given antibiotics and different sugar fluids along with electrolytes. At this point, the hospital staff were simply trying to stabilise her and this carried on for over 24 hours. However, we were told that things were fine and to come back later during visiting hours.
31. The following morning, we received a phone call from the hospital asking us to return immediately.
32. Dr Ali of Shrewsbury hospital informed us that the CT scan results showed liver and kidney failure. I asked him what was causing this and if it could be because of the Hepatitis C. He replied "she has Hep C?" and he was shocked. Dr Ali did not know about her status. "This changes everything" he said and immediately got another professional involved and he came to speak to us, Dr Butterworth, from

ANONYMOUS

the Gastro team, who mum had seen previously in regards to her polyps procedure.

33. Dr Butterworth firstly stated that the team carrying out the polyps procedure should have looked further into mum's Hepatitis C status before the surgery and he also said "in hindsight I had not realised the extent of the liver cirrhosis". This was the first time we ever heard cirrhosis being mentioned and we were not aware that mum had cirrhosis.
34. He also said he could not say whether waiting on the trolley for so many hours in A&E on arrival could have been a contributing factor.
35. The doctor wanted mum to be moved to a liver ward. We asked them what was the purpose of an 83-year-old woman passing away now being referred to a specialist team but no one had any answers for us. I think this was for the purposes of research and to make up for lost time of not doing anything sooner. They seemed to be grasping at straws. If something was done earlier, my mum may have deteriorated on a slower projection or more comfortably.
36. After they discovered mum's liver and kidney failure, their medical team wanted to treat mum, but mum did not want the treatment. We fought for mum's wishes and for palliative care.
37. Before mum passed, she kept saying "let me go" and "can't you just give me something", and this was really traumatic for us.
38. The last 12 hours of her life were very visually traumatic, and I stayed through it all. The nurses were excellent support at the end-of-life stage.
39. Within three weeks of her routine operation for polyps, mum was coming to the end of her life, she was slipping away and there was no going back.
40. Mum's death was very fast, traumatic and a huge shock for the family.

ANONYMOUS

41. After mum's polyps diagnosis, there was no mention that the polyps were related to her Hepatitis C. My mum only wanted rid of the polyps as they can become cancerous and her family had a history of bowel cancer so she was concerned about maintaining her health. If she had been told earlier about the liver problems or if mum was told about the issues the polyps surgery may cause, she would not have had the surgery. Mum said herself that she wished she had never had the polyps surgery and that she was ill advised.
42. The entire surgery and the pre-op procedure in having her bowels cleaned out was painful and traumatic for her.
43. The week before mum went in for the polyps procedure, she was very active; shopping, cooking, cleaning and baking with my sister, GRO-B. Yet, within three weeks she could not eat or get out of bed. Then within 48 hours of being told by medical staff that mum was okay during her second hospital visit following the surgery, to discussing an end-of-life path before her passing.
44. The impact on the whole family has been massive, including my wife and son.
45. My sister GRO-B is extremely upset and my other sister has closed the door on the family and has not dealt with it well.
46. Arranging my mum's funeral was very difficult as it all happened so fast and due to GRO-B, we were forced to arrange and hold her funeral within a couple of weeks of her passing.
47. I have sought the help of my local MP and the coroner's office to initiate an investigation with the ICB. The ICB have now agreed to investigate WMAS, Shrewsbury and Telford Hospital NHS Trust and Church Medical Group.
48. There is currently also an internal mortality review taking place at Shrewsbury hospital in regards to mum's death.

Section 6. Treatment/Care/Support

49. My mum was never informed of support organisations, such as the Hepatitis C Trust. I have only since become aware of them through the Inquiry Investigator.
50. At no point has counselling support ever been offered to my mum or the family.
51. We have shielded dad from a lot. He is 83 years old and he has had a real shock following mum's passing.
52. During mum's final two hospital stays, the doctors would say mum was not well enough to answer their questions and would direct them to us. It was very strange, mum was coherent and able to answer and so we would tell them to ask her directly. They did this and they were happy that she was coherent, and that she wanted and needed to go onto palliative care. They then tried to find a suitable bed for her and when this happened, she was moved to a side room in AMU ward 22. Previous to this, mum was still in the A&E booth with only a curtain for privacy.

Section 7. Financial Assistance

53. The EIBSS were never mentioned to us by medical professionals. However, my sister [GRO-B] found out about them through her own research and decided to help mum in putting together an application.
54. Mum paid £48 for her GP surgery, Church Medical Group in Whitchurch, to complete their part in her EIBSS application and were then going to post it straight to EIBSS.
55. When mum passed away, we rang the EIBSS to see what happened with her application, and they stated they had no record of receiving it. My sister [GRO-B] then contacted mum's GP and they admitted they had not completed their part nor had they sent off the application. [GRO-B] has since written a formal complaint to the practice.

ANONYMOUS

56. Now mum has passed, the EIBSS application is totally different. We have had to complete a new set of forms with evidence of mum's death certificate and proof that [GRO-B] and I are the executives of mum's Will. This took us four hours of traumatising work to put together.
57. Mum completed her application in [GRO-B] 2022 and if the GP had completed their part, my mum could have received compensation before her passing. They negated her opportunity to receive what she was entitled to and the sums are now different for those who are affected.

Section 8. Other Issues

58. I have never been offered a HCV test, nor have my family including my dad. Only [GRO-B] my younger sister has had a test and is negative of HCV. I have recently asked for a test from my GP and I am waiting on this.
59. I am providing this statement to the Inquiry as I want people to be held responsible and to ensure that this never happens again.
60. I believe those that have been affected should be compensated.
61. The negligent practice my mum received by the blood services, GPs and health service was very recent, in 2020 - not in the 1970s. You would have thought practice had improved since then.
62. I have had to go through hundreds of non-chronological medical records from ambulance services, GP notes and hospital records to find out what happened.

ANONYMOUS

Statement of Truth

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

Signed

GRO-B

Dated

07-03-2023