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Witness Name: GRO-B

Statement No.: WITN0695/01

Exhibits: WITN0695/02

Dated: 23 November 2018

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 26 October 2018.

I, GRO-B will say as follows: -

1. Introduction

1. My name is GRO-B. My date of birth and address are known to the Inquiry. I am the daughter and only child of GRO-B: F whom I intend to speak about. In particular, I will speak about the nature of his illness, how the illness affected him, the treatment received and the impact it had on him and our lives together.

2. How Affected

2. My father, F was infected with hepatitis. I suspect he was infected on 17 June 1972 when he received a blood transfusion at the newly built Heath Hospital near Cardiff. He had been diagnosed with leukaemia in January or February 1972 and had been receiving treatment at the Cardiff Infirmary since then until his transfer to Heath Hospital in

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March or April 1972. My father's condition markedly deteriorated from early July 1972 onwards, and he sadly died on GRO-B 1972.

3. Prior to his admission to hospital, my father had been an extremely fit, strong and healthy man. He weighed no more than ten stone and was not at all overweight. He had been a dockworker, first working in London and then moving to the Cardiff Docks. Even though he was 65 by the time he was diagnosed with leukaemia, he was still working albeit no longer at the docks. He had just been offered a part-time working arrangement in a business set up by some of his ex-fellow-dockworkers, and so would have continued to work for three days per week.
4. My father was first admitted to hospital due to a complaint with a cold sore. From this, he was diagnosed with leukaemia and started treatments for leukaemia in the Cardiff Infirmary. As a family, my mother and I were told very little about my father's treatment and condition by the doctors who were treating him. We trusted the doctors and medical staff completely. We knew that they could not cure him of his illness, but we trusted that their treatments would prolong his life rather than hasten his death, so we did not query their treatments for him at the time.
5. However, my father developed blood blisters whilst at the Cardiff Infirmary. I remember that my mother and I were horrified when we went to visit my father in the Infirmary, and found that he had blood blisters on his stomach. The hospital did not tell us much about the blood blisters, I had to go to our local GP to learn that the blood blisters meant that my father probably also had septicaemia.
6. Soon after this, my father was transferred to the new Heath Hospital. Again, my mother and I weren't told much by the doctors about his treatment, but I am aware that he was given platelets. I know that my father definitely received a blood transfusion on 17 June 1972 as my mother later received a letter from the National Blood Transfusion Service (NBTS), dated 03 January 1973 and addressed to my father, informing

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him of the transfusion on 17 June 1972. The letter also asked whether my father had "suffered any ill effects after the transfusion". My father had indeed suffered ill effects – his condition had suddenly deteriorated and he died as a result of being infected with hepatitis during the transfusion. I exhibit this letter (WITN0695/02), which was received almost four months after my father's death.

7. Then at one point after his blood transfusion, my mother and I were suddenly no longer allowed to see my father without putting on hospital gowns beforehand. We did not think anything of it then, but on reflection I believe that it was to prevent him from transmitting any diseases to us.
8. My mother and I were not even made aware of my father's infection with hepatitis until after his very painful and distressing death. We were only informed of it when a really lovely Northern Nursing sister asked my mother and I if we would agree to a post-mortem for my father. At first, this was not what my mother wanted. However, she eventually and reluctantly agreed as the nurse explained that my father had asbestosis and a post-mortem could help my mother with a compensation claim from the Cardiff Docks. She also explained that my father had hepatitis at the time of his death. We were shocked, as we were completely unaware that my father had been suffering from either of these conditions.
9. None of the medical staff had ever informed us before that time that my father had hepatitis. At no point did anyone ever explain to my mother and I what the disease was. Although the relationship between doctors and patients was very different in the 70s, I definitely feel that my mother and I should have been given more information. We would have liked to ask questions such as how and when my father contracted hepatitis; we had absolutely no idea how he could have contracted hepatitis. It was not until we received the letter from the National Blood Transfusion Service dated 03 January 1973 that we began to suspect that the blood transfusion was to blame.

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10. We did not know the real cause of my father's death sooner, because my father was refused a post-mortem by the hospital. The lovely Northern Nursing sister who had persuaded my mother to ask for a post-mortem came back to us the same day. She reluctantly and apologetically informed us that the doctors had said a post-mortem could not be carried out because of my father's infection with hepatitis. They said that the post-mortem room would have to be "out of action" for at least three days afterwards to be fumigated, and that they could not afford for this to happen.
11. My mother and I did feel that this turn of events was rather strange; we felt that a newly built hospital would surely have more than one post-mortem room. However, we were far too upset by my father's passing to pursue the issue with the hospital any further.
12. The Northern Nursing sister then asked us whether we would accept leukaemia as the cause of death on my father's death certificate. We agreed even though it was not strictly true because we felt that we had no choice. We were too upset to insist on a post-mortem, and we did not suspect the blood transfusion until after my mother received the letter from the NBTS four months later.
13. It was most upsetting for us to receive the letter from the NBTS some four months after my father's death. It was particularly distressing to read the query regarding whether my father had suffered any ill effects after the transfusion. He had died. We wrote back to the NBTS to ask for more details about the blood transfusion he received, but we never received any response.
14. One thing that has stuck in my mind is that the nurses in the Heath Hospital were fantastic. I only found out later that one of the nurses who had looked after my father left the hospital after my father died. She said that she couldn't stay there, and she in fact left the profession altogether after my dad's death. After my mother received the letter from NBTS, we began to suspect that there had been a cover-up. Upon reflection, my

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mother and I realised that the nurses had been trying to help us by telling us to request a post-mortem. It was also clear that she had been told by someone higher up to then refuse us a post-mortem for my father. It was not possible that there was only one post-mortem room for the entire newly built hospital.

15. My mother and I were not informed at all of any risks of infection prior to my father being given the blood transfusion. To the best of my knowledge, my father was not informed about any risks of infection either.
16. I cannot be sure whether my father was ever told by the doctors that he had hepatitis, but I do not believe that he was made aware of that. My mother and I were definitely never told about my father's infected status until after his death. Even then, we were not given much information at all; we were merely informed that he had hepatitis when he died. I don't remember whether we were told what kind of hepatitis he had, so I don't know whether it was hepatitis A, B or C.

3. Other Infections

17. My father was not infected with any other diseases as a result of being given infected blood to the best of my knowledge.

4. Consent

18. I do not know if my father was ever asked to consent to anything. If he was asked to consent to treatment, he did not tell us as he would not want my mother and I to worry. However, the relationship between doctors and patients was very different in the early 70s; the patient did not have any control. Rather, you went into the hospital, the doctors did their best for you and that was that. The doctor-patient relationship was a lot more paternalistic than it is today.

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19. I do not know whether my father was treated or tested purely for the purposes of research. However, I do remember that there were a lot of students around his hospital bed a lot of the time. This was probably because my father was in a teaching hospital. The students took numerous photographs of the blood blisters on my father's stomach in particular. I was a bit concerned, but my father merely said that they had to learn on somebody.

5. Impact

20. I don't think the hepatitis had any impact on my father mentally, although I do not know if my father was aware of any of his infections.
21. Nevertheless, my father's physical condition did noticeably deteriorate a couple of weeks after his blood transfusion. I recall that the turning point was around GRO-B 1972, because it was my son's first birthday. He was my father's only grandchild, and I was informed that that day, my father had to crawl on his hands and knees to get to the phone in order to call me and wish my son a happy birthday. Up until that point, my father had been able to walk. He was putting little pencil marks on the wall to make sure that he could walk a little further each day. But then after the blood transfusion on 17 June 1972 he was able to walk less and less, and the pencil marks started going the wrong way.
22. It was devastating for my mother and I to see my father be reduced to such a weak state. Prior to his diagnosis with leukaemia, he had been an extremely healthy, strong and fit man. Yet he died within six months of contracting leukaemia, and his condition noticeably deteriorated after he received the blood transfusion.
23. Even though my father's death certificate states that it was 'acute leukaemia' that killed him, I suspect it was in fact the hepatitis that caused his death to occur when it did. I believe that the advice from the nurse that my father had hepatitis when he died, the subsequent refusal of a post-mortem, another nurse's resignation and the letter from the

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National Blood Transfusion Service enquiring as to ill effects of the transfusion support my conclusion that hepatitis killed my father.

24. I understand that my father would have eventually died due to the leukaemia, but my mother, my son and myself would have had more time to enjoy with my father. We could have had extra weeks, months or even years. Had my father not been infected with hepatitis, he would not have suffered such an untimely and traumatic, harrowing death.
25. My father's illness and death was very difficult for my mother and I to deal with. He was so weak in the end that the sight of him lying in the hospital bed is still imprinted in my mind. I recall the exact ward – ward A7 in the haematology department. I can remember walking into the room, going up the stairs, walking up to the ward, looking in and wondering whether my mother and I could see my father. We would put our makeup on outside so that we could pretend to be OK and hide our distress from my father.
26. My mother and I would not cry in front of my father; that would not help him. We only cried when we came out. We cried all the way home on the bus.
27. My father's death haunted my mother for the rest of her life. She spent nearly 30 years on her own, but his death never left her. We agonised over his death for years over how he could have contracted hepatitis. No one had ever confirmed for us that a blood transfusion could transmit the virus, though I suppose my mother suspected it as she retained the letter from the NBTS the whole time.
28. My son was only one year old at the time and visiting hours to the hospital were restricted to just one hour in the evenings. Neither I nor my mother could drive, so we had to take two buses every day to go back and forth to the hospital. The round trip would take almost four hours. Initially I could take my son with me for the afternoon weekend visiting hours, but eventually this became too much for my father after

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he was transferred to the Heath Hospital. He became so unwell that he was unable to cope with a young child, so I stopped bringing my son with me to visit my father. Instead, I had to make alternative childcare arrangements every night for six months.

29. I felt like I was neglecting my son for six months of his life, when the only time I would see him was when I came home in the evenings and put him to bed, as I had to work during the day as well. It was not easy and I felt so tired and drained all the time.
30. My marriage to my husband at the time also suffered very badly. We split in January 1973 following seven years of marriage. My father's illness was not the reason for the divorce, but it certainly did not help. My ex-husband constantly accused me of seeing more of my father than I did of him. Even when he accompanied me to the hospital to visit my father, he did not let me spend too much time there. He would tell me that it was time for me to go home and cook his tea for him, because my dad was going to die anyway but he (my ex-husband) would still be here.
31. On one occasion after my father's death, I remember that I went to my local GP and just broke down. I needed to know more about the diseases that killed my father, including whether they were genetic and inherited. I remember the GP's exact words to this day in response to my questions: he labelled me a "neurotic illogical female".
32. My mother struggled financially after my father's death. She was left with no income other than a widow's pension. This was not enough for her to live on, so she had to work for a while in a local shop. It was a very difficult period for her, to have to go back to work when she was in her early 60s just after the death of my father.

6. Treatment/Care/Support

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33. With regards to counselling or psychological support, I do not think it was widely available at the time. Certainly, no support was ever offered by the hospital to my mother and I, although the nurses were fantastic. I cannot remember whether we even saw any doctors after my father's diagnosis with leukaemia; all of our dealings were with the nurses. They did their best, but still no one informed us of my dad's status with asbestosis and hepatitis until after he died. Nobody ever explained to us what the diseases were.

7. Financial Assistance

34. I confirm my mother did not receive any financial assistance whatsoever in respect of asbestosis or hepatitis as the result of infected blood. We were completely unaware that financial assistance was available at any time.

8. Other Issues

35. I believe there was a cover-up as my father was denied a post-mortem on the basis that there was only one post-mortem room and it would have had to be fumigated and therefore unusable for three days after his post-mortem. However, it is not possible that there was just one post-mortem room in a large, newly built hospital. Myself and my family have been denied answers for so long about my father's death.

Statement of Truth

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

Signed

GRO-B

Dated 28th November 2018.