

# Meeting of The Joint Oireachtas Committee on Health 29th June 2022

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Opening Statement by Terri Martin, advocate for Mesh Survivors Ireland of Mesh Injured Patients.

Firstly, I would like to thank the joint committee on inviting Amanda, Louise and myself as representatives from the Mesh Survivors Ireland group and also Mary and her representatives on behalf of the Mesh Ireland group, to collaborate on the much needed aftercare and supports that are required to assist in our daily living needs following these life limiting medical procedures.

As you are aware, our journey for the specialist aftercare of this medical injury began here at Leinster House in late 2017 and lots have been discussed and achieved since then. However, now following all the delays and restrictions of a global pandemic and the lifting of such unprecedented need, we can now have an honest and open discussion on all the suggested recommendations that came with the Chief medical officer's report of 2018 and the HSE's Implementation plan for Mesh Injury.

Covid 19 restrictions have all been lifted for the majority of people here however Mesh injured patients will never have that opportunity to resume their before quality of life again.

We are extremely grateful for the support from across the board of Government that has been shown to us to date, and for our issues being heard and of all the background work which has been done in review of this horrific infliction. However, we are saddened to report as recipients of this failed procedure that although there has been learning reports, CMO reports, Implementation plans and advisory committees etc. Nothing has changed and we still live with the after effects of mesh injury limiting our life quality. Therefore, I feel it is easier to try navigate the necessary means which can be introduced from you, the powers that be, in easing this life limiting health scandal for all involved as an optimistic view to improve our daily living needs and in assisting us in breaking free from the detrimental consequences and effects which were inflicted upon us with no informed consent as now it is widely known that there are minimal complete removal options of surgery for these surgical tapes here in Ireland with no success or complication credentials as requested annual.

These interventions stem across the whole thorough fair of Government departments but are necessary interventions that will make an exceptional difference to injured lives.

1. Medical cards to all recognised Mesh injured patients from pervious pathways and HPRA registration to assist with medical costs, diagnostic need, medications, primary care, GP visits, and acute services ie: Haematology, Diabetic screening, optometry, dental etc. From associated side effects.
2. Patient transfer as although so very grateful for the designated two mesh centres at Cork and Dublin; they are not realistically feasible to the majority of those in need of their services ,so patient transfer is a vital need to avail of CMOs recommendations. Those injured by mesh are subjected to very invasive, painful examinations and cannot be asked to travel such distance on public transport although rarely accessible anyway, and suffer unconditionally following the pleasure.
3. Accountability and an apology for mesh injury from our Health Service Executive and the Department of Health as there were many warning of the safety of these products from the Food and Drug Administration Authority and although they came in through Europe's

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decentralisation system, they still ended up implanted in our bodies in our national public hospitals run and funded by HSE and DOH.

4. Patient advocates need to be included with the stakeholders in decision making for the upcoming Steering Committee on Mesh injury as it is these patients who hold the most valuable insight of the side effects endured following these failed procedures and the actions needed to prevent these horrific situations happening again.
5. Honest Communication with all advocate mesh groups, from the stakeholders needs to be more forthcoming and transparent for this whole nightmare to begin to end. Trust needs to be re-established as it has completely broken down with all the gas lighting, ignorance and disrespect for to rebuild confidence in trusting those who first do no harm.
6. From the Woman's Health Action Plan...Dates are required for when the agreed Compassionate Engagement from December 2018 in lieu of an independent enquiry into mesh injury; are going to take place and the form of protocol that is to be used for this review. Dr. Gabriel Scally's review into the other woman's health scandal of Cervical Check had alot of identical issues raised and its findings resonates so closely with mesh injured ladies and this constant battle for justice.
7. When will the Translabial Scanner be available for use at the Dublin Mesh Centre and Cork centre? Previous correspondence from Government believes it to be available since 1<sup>st</sup> September 2021 which is not the case and there is an anxious waiting list of mesh injured ladies awaiting life changing answers as to what damage their mesh is causing internally so as to direct future intervention to ease their plight. These vital diagnostic machines came at great public cost and would be a shame to leave them go unused when such a wonderful non-invasive investigatory tool in mapping the mesh placement internally.
8. An update is also required from CMO report as to the treatment suggestions in aftercare and the efficiency and effectiveness of the budget allocated, as in patient review these treatments are not working and patients are still made feel as though Guinea Pigs so intervention needs to occur asap as some patients are coming out worse from participating in them. Pain management although a necessary temporary intervention to a mesh injured persons needs ; is not an ideal long term goal as it carries its own side effects which again is not being fully explained or understood and still the source which is mesh cannot be completely removed in this country. Physiotherapy is helping while ongoing however is not a final solution either once the souce(mesh) is present. Psychology is probably the more appropriate recommendation however as mesh injury holds so much diversity will there be effective qualified physiatrists for each spectrum required as sexual and PTSD counsellors are not adequate to other mental health or cognitive issues?
9. All Government Departments need to be made aware of Mesh injury...Social Community and family affairs for financial supports, Transport for patient transfer to designated mesh centres and disabled mobility primary certification for those that need adapted vehicles to support their ongoing needs and independence, Medical card section to provide aftercare for inflicted public hospital injury and to avail of necessary public hygiene care, disability boards for illness benefit and invalidity pensions as this maiming has taken livelihoods away and has left injured folk meet every barrier in maintaining a reasonable quality of life throwing up barriers and obstacles at every opportunity when so unwell and suffering requiring them to fight through their vulnerable years !

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10. Reimbursement through the cross border initiative for those ,who with medical emergency could not wait for intervention here as so many wasted years have passed with no improvements in this matter but who now are in grave financial debt following the need for interventions abroad to improve their health and life quality. Some before Brexit came in to play and some during, however emergency solace was sought from this injury mentally and physically and should be reimbursed by the state for what has happened to patients following this health scandal. In one case and i know at this forum we cannot discuss individual cases and i don't want to, but this is exceptional! The cross border application is on hold and has led to an ombudsman investigation because the applicant in question had a PRIVATE HEALTH LIFE INSURANCE which there was disagreement due to unknown intervention in medication and official assessment but was told and there's evidence, that if eventually, the private insurance company pays out for the claim then the Cross border initiative won't be! But private health insurance is just that and public injury sustained in a public hospital of this state is just that too whereas now this vulnerable mesh injured patient is in debt, limbo and this treatment is simply unacceptable as she didn't maim herself! The lack of basic common sense, morals and ethics is simply unbelievable for the year we are living in ..2022 where the new Woman's health action plan and the woman's task force are doing such great work and being positive and optimistic in caring for the mothers of the earth with the logos of LISTEN, INVEST, and DELIVER when for the past 5 years we at Mesh survivors Ireland have been chasing a patient centred approach of CHOICE, ACCESS and FUNDING. At this stage too we as a group believe it is time for a compensation address, as so much personal loss of each individual has occurred following implantation with these not fit for purpose devices and sadly no amount of time or intervention is going to rectify the irreversible damage caused or looking down the road.. How our health and lives are going to be in the future as it seems mesh implants continues to give negatively to the human body daily.

I would like to finish my statement with genuinely thanking all here and externally for assisting us at Mesh Survivors Ireland through this journey to date and know your kindness has not gone unnoticed and i sincerely hope that after today's hearings that some positives can come from this life shattering adversity . Thank you