HWM10 08-Jan-2021 Interview transcription

White British male born 1959. Tradesman and business owner. Secondary education. Pseudonym Peter.

RB: Ok. So the questionnaire that I usually start with is the one that says "University of Toronto Atrial Fibrillation Severity Scale" at the top.

HWM10: Yep

RB: Um so the first question is your gender

HWM10: Ok. Male.

RB: And then we don't need your whole date of birth but if you wouldn't mind putting the year

HWM10: Er.. 1959

RB: Lovely. You had to think about that then, didn't you?

HWM10: [laughing] Yeeeah… at my age you have to think about everything!

RB: And are you in AF currently?

HWM10: No.

RB: That's great. Do you know when you're in AF?

HWM10: No.

RB: You don't, you can't feel it?

HWM10: No, um, basically the last episode I had which was the September last year, September-time last year, um basically it was my watch that told me I was in AF

RB: Oh ok, without that you wouldn't have known?

HWM10: No, 'cause I do, as I say I check my pulse fairly regularly, um, but other than like checking my pulse or as in like last time it was my watch that told me I don't notice… [pause] like, I don't really notice the problem

RB: Sure

HWM10: But once, like, once I'm aware of it, then I start thinking well I'm like.. I'm out of breath, you know? But I'm the sort of person where I like just.. I just crack on with anything. And if, if like when I very first come down with it when I was getting really out of breath um many years ago before I collapsed, um I was like I'm *so* unfit, I just need to like get fit, you know? So I was trying to push myself, so I was trying to push myself more to get fit and obviously wasn't doing me much good [laughing], was making things worse.

RB: So how, tell me what happened , um how did you come to be diagnosed with AF? What happened?

HWM10: Um well basically I'm… I own my own business as a fireplace installation company, um do it was quite heavy manual work, you know we're lifting heavy stones day-in-day-out um and.. um, we was really really busy, and I'd been getting like pains in my, in my chest. Um, but I just put it down to the fact that I'd pulled something, um, you know 'cause as I say we do a lot of heavy lifting. Um, and I thought either it'll settle down in a week or two and it didn't, um. And then we was going away to on holiday to Ireland with some friends, so I said to myself, right, I'll go away on holiday and relax, um and if I'm still getting the pains after the holiday when I get back I'll go and see the doctor. Um, we came back off holiday, I was still getting the pains all the while we was on holiday, we came back off holiday and we was in the middle of installing a kitchen for somebody and it was quite important that this kitchen got finished so the week, the first week after I came back off holiday it was like all hands on deck let's get this kitchen finished. And then at the end of that week I had my daughter's wedding. So I was like right let's get this kitchen finished, get the wedding out the way, then I'll go to the doctors. And then unfortunately on the day of the wedding I stood up to do my speech and collapsed.

RB: Oh no!

HWM10: So um, I was like leaving the reception as the night guests were just coming

RB: Oh that'll be one to remember for them!

HWM10: Yeah! So, yeah, other than that I don't know, I mean they've always said that the pains in my chest were nothing to do with my condition, um, but I do get pains back in my chest when I am in AF but they've always said that it's not related so I don't know. I don't if it's something that.. I don't know it could be my mind

RB: But you've noticed a correlation between pains in your chest and being in AF

HWM10: Yeah

RB: Yeah, ok. So when you collapsed and you obviously went to hospital, did they think it was a heart attack or did they say straight away it's AF?

HWM10: Um they didn't know what it was. I went through [City name] General Hospital through loads of different tests. They then exhausted all the tests that they were able to do, and then they said to me that it could be what they termed as an electrical problem more than like a heart problem, a muscle problem. Um, so I then got transferred to [City] and that's where after they done the tests there they said that it was basically AF and it was like a short circuit. But I mean there was I had a Reveal device fitted which I had for two well probably about three years before they took it out – I think it only works for around two years, um, but I used to go to [City] for like routine check-ups and things and they would download all the data from the Reveal device and they would go "Oh on, er, January the 17th at 8 o'clock at night your heart was doing 300-and-some beats per minute, do you remember that?", and I was like, Nope [laughs]. Um so you know, again, they was quite shocked that I didn't know that it was happening if you know what I mean.

RB: Yeah I can imagine. And sorry, how long ago was it that this started?

HWM10: Er… it will be 12 years this July. Or June? July 11th this year I think will be 12 years.

RB: Right. Ok. And have you ever had a cardioversion?

HWM10: Yeah

RB: Yeah

HWM10: Yeah, that's um I had one of those last October

RB: Right

HWM10: Um when I went back into AF last, last.. 'cause I 've been free of being in AF for about five years, and then last year I went back into AF, um.. and obviously rang [City] because I'm what they class as an SOS patient. Um, so I rang Dr [name] at [City], he rang me back and said, right, he said I think we just we'll need to get you back in for another cardioversion, he said, and then we'll hopefully he said if we can get you back into sinus rhythm we can then keep our fingers crossed it may last for another 5 years, it may last for 10 years, you know, but keep our fingers crossed he said. If it did come back again then they may look at doing another ablation.

RB: So had you had an ablation before?

HWM10: Yeah.

RB: Ok. So you had.. You started with your AF, and you were seen at [City] and then you were seen at [City].

HWM10: Yep

RB: And did they put you on any drug treatment or did they just do the ablation straight away?

HWM10: Um, no, I was on um.. I was on medication. Um, they, er, I can't remember the medication I was on but they called it a.. it wasn't going to be long term apparently because they said it's a dirty drug

RB: Sure - was it amiodarone?

HWM10: That's it. So they put me on that, that didn't really work. Um so that was when they said well we think the best thing we can do is give you an ablation. Um, but they said like there was a possibility that it can.. or they reckoned that it takes three times, to have the ablation three times before it's I think it's something like 80% successful.

RB: Yeah

HWM10: Um, but they was doing a study at the time which my wife was really annoyed with me about. They asked me if I wanted to be part of the study and they was looking at doing a longer ablation operation, um, to see it.. if that would stop people having to have it more than once

RB: Right

HWM10: So I said yeah let's go for it and I opted for that and I think it was something like eight-and-a-half or nine hour operation I had. Um, and as I say Dr [name] has sort of said, when I've gone back in to AF Dr [name] has sort of said we think you need to have another ablation but the problem I've

got was I ended up being stuck on what I call like a roundabout 'cause um, Dr [name] would say Right you need an ablation, there's a six month waiting list in the equation, um, because of my condition he said We can't leave you in AF because apparently when I'm in AF my heart enlarges. So he said what we'll do is give you a cardioversion, cause we can get that done quickly, whilst you're waiting for the ablation. So I would go and have the cardioversion, then the appointment would come up for my ablation, I'd go for the pre-op and they'd say Right you're in AF, and I'm like No I'm in sinus rhythm, and they're like No no no you're in AF, and I'm like No I'm in sinus rhythm..

RB: You hadn't noticed…

HWM10: … 'cause I've had a cardioversion. So then they'd go well we can't give the ablation 'cause you're in sinus rhythm

RB: Right

HWM10: So I would then get sent home. Then several months later I'd go back into AF. So I'd go back to [City], Dr [name] would say Right you need the ablation but there's a six month wait, I can't leave you in AF so we'll give you a cardioversion, so I'd have the cardioversion, then when the ablation come up I'd be in the same scenario, they'd send me home. So you know, I ended up being stuck on this roundabout and I was like, I can't get off of this. So in the end Dr [name] said, Right, what I'll do then is if you go into AF again I'll fast track you for the ablation. Um, but obviously it was five years later, which was when I went back into AF last September, it had been five years. So um of course rather than them rush me in for an ablation Dr [name] said well look let's get you in, give you a cardioversion and it may be that that's all you need. But apparently they're now saying that they can do the ablation even if you're in sinus rhythm. So obviously, things have progressed and..

RB: Things have changed, yeah…

HWM10: ..you know so, so yeah that's how it's pretty much been for the last sort of 12 years

RB: Just going round in circles then

HWM10: Yes, but I mean obviously five years is quite a long time, you know

RB: Yeah absolutely

HWM10: I was quite shocked when I did go back into AF, um. But I had had a, we'd had a lot of stress in the family for the last sort of 12 months or so anyhow, sort of 18 months, 12, 18 months, a lot had gone on, and it could have been that that sent me back into AF, I don't know

RB: Yeah, it probably didn't help, did it?

HWM10: So, um, but as I say at the moment touch wood, I'm ok at the minute

RB: Ok! So we've strayed a little bit from the questionnaire here, but looking at question 4 "How do you feel about your life at the present time?" if one is the worst possible life and ten is the best possible where would you put yourself on that scale?

HWM10: Er, probably sort of 7 to 8

RB Ok, pretty good. Is there anything that would make that push that up towards a 9, or push it down towards a five? What would change?

HWM10 Er… I don't know… maybe if I felt a bit fitter, if you get what I mean…

RB: I do

HWM10: Um, I've always been, I've always been a very, like, handy person, always hands-on, you know. If I don't know how to do something I'll watch somebody do it and then I'll go "I can do that", and I'll do it. But I feel now.. it's probably to do with my age, but I'm getting to the point where I can't do what I used to do.

RB: Ok. And you think that's because of your age?

HWM10: It, it could be, or fitness, or.. I don't know but, yeah, y'know as I say, it's hard when, when you've been so hands-on all your life, erm, it is hard when you try to do something and you struggle.

RB: Yeah, yeah, I can understand that. So going back to question 5, "How often on average does your irregular heart rhythm occur" – sounds like not very often, at the moment.

HWM10: Er, no, 'cause as I say it's ben five years since the last, since my last time if you get what I mean so I'm five years without being in AF, um..

RB: That's really good – so less than once a year?

HWM10: Yep.

RB: And you were cardioverted, you said, October?

HWM10: Yeah.

RB: Then 6, on average do the episodes of the irregular heart rhythm last.. how long do they last for? [Pause] Can you remember? Five years ago!

HWM10: Um, it's basically, once I'm in AF it's permanent, it doesn't sort of jump in and out. It seems like once I do go in to AF, I stay in AF until either cardioversion or the ablation or whatever the, you know, whatever the hospital have done.

RB: Yeah. Ok. And then Question 7 is "How severe was your most recent episode of irregular heart rhythm, so that would be October that that happened.

HWM10: Um, I would probably say… 6 to 7

RB: And why would you put it there – what was it about that episode that made it feel a 6 or a 7 for you?

HWM10: Um, again it's just like when I'm in AF I get out of breath a lot eas.. a lot quickly. Or you know just going down the stairs, or just going up the stairs, or you know, you can get out of breath just even walking, parking the car, walking to the shop, or the walk to the shop in the village, you do get out of breath, so..

RB: So did you feel it was limiting what you could do physically?

HWM10: Yeah

RB: And then the very first episode of irregular heart rhythm, I mean I'm guessing that would be around the time of your daughter's wedding and prior to that, how severe was that?

HWM10: Um extremely severe

RB: Sure, you ended up in an ambulance, so..

HWM10: Yeah, yeah

RB: Ok, then part B is "Have you ever been cardioverted?". Do you know how many cardioversions you've had?

HWM10: Erm… I would say, 4?

RB: I'm impressed you can remember, it sounds like you've had plenty! And in the last year you haven't had to go in to the Emergency Department because of your heart rhythm?

HWM10: No

RB: No. And apart from when you had the cardioversion when you obviously came into hospital, you haven't been hospitalised because of AF in the past year?

HWM10: No

RB: And are you followed up by the arrhythmia nurses?

HWM10: Um, I, I think I've got an appointment.. yeah, I don't think, I know I've got an appointment I think for April of this year, to go back to see – I don't know whether it's the nurses or whether it's actually um Dr [name]'s clinic, erm. So yeah, that's the only, the only appointment I've had since my last cardioversion.

RB: Yep. Ok. And um, have you seen.. yeah, you saw the doctors obviously for your cardioversion – apart from that you haven't seen them at all?

HWM10: No.

RB: Fine. Ok. Then part C looks a bit at your symptoms and how much they bother you. So do you get palpitations?

HWM10: Um not that I.. Obviously I do, because when I had the Reveal device fitted, um, they would, they would check that and they could see on there all the times that my heart, like, rate had shot right up. I don't..

RB: But you weren't actually feeling that?

HWM10: .. I don't actually feel them.

RB: No. Ok. And in the past 4 weeks you haven't had that sort of feeling of fluttering in your chest at all?

HWM10: No.

RB: No. Ok. And have you had shortness of breath at rest in the past four weeks?

HWM10: No

RB: And what about during physical activity?

HWM10: Um… maybe slightly?

RB: Uh-huh. Do you think that's your level of fitness or do you think that's your heart?

HWM10: Um, I don't know it could be fitness because I don't know I have, um, since, since the middle of last year I have stepped back from the business a bit as well. Um, so I've handed sort of the running of the business over to my wife and my son. Um, albeit that we have a small coffee shop as well and I bake all the cakes and everything for the coffee shop

RB: Blimey you do everything don't you?

HWM10: [laughs] So I still do all the baking but I do that from home. So I've got like a kitchen in the, in an outbuilding in my garden, erm and I do all the baking out there so.. That's pretty much a full time job but it's a job where you know, if I wanted to go and sit down for half and hour, I can go and sit down for half and hour if you get what I mean , because I'm totally on my own. So if I want to have a rest for half an hour I can have a rest, if I want to keep going I'll keep going, but I'll work at my own pace.

RB: Yeah, I get you. I'm just wondering – for everybody in the study I'm sort of making a note of what their profession is just so you get an idea of what sort of people are in the study, you know, if they're a teacher or a fire-fighter or whatever. I'm thinking what do I put for this guy? Do I put tradesman, businessman, baker, what do I put? [both laugh] Then when you're resting do you get tired, just sitting around?

HWM10: No, I wouldn't say I do, no

RB: Ok, and when you're doing exercise do you get tired?

HWM10: Um, a little

RB: A little, yeah. Do you ever feel light-headed or dizzy?

HWM10: No

RB: And that chest pain that you were getting right back at the beginning, have you had that at all in the past four weeks?

HWM10: No

RB: No, ok, great. So that's the end of the first questionnaire, and the next one is the one that's called the.. it says EQ-5D-5L at the top, health questionnaire, English version for UK

HWM10: Right let me just go into the other one then… why isn't that opening on my…? Uh, right here we go, yeah ok

RB: Ok, so these are multiple choice questions and they relate to things that you might do in your everyday life. So the first question is mobility and the options are "I have no problems walking about, I have slight problems walking about, moderate, severe problems or I am unable to walk about". Where would you put yourself in that, out of those five choices?

HWM10: Um, I would probably say slight.

RB: Mmhm. And is that because of breathlessness?

HWM10: Yeah.

RB: And then, self-care, do you have any problems with washing and dressing?

HWM10: No

RB: And then usual activities such as work, work around the house, family activities, leisure activities, um do you have any problems doing your usual activities?

HWM10: Um… Again I would probably say slight. Um, you know just on the basis like working from home.. I have to go, like, from the house to the building where the kitchen is, back to the house several times during the day 'cause unfortunately I can't get like washing, washing up facilities in the building so I have to come in the house to do that. So I'm backwards and forwards doing that and I do.. like, that's probably the part where I need to sometimes go I just need to take like ten minutes before I go and do that, because um.. so yeah, slight I would probably say

RB: Sure. And you've obviously slightly reduced your daily activities from fitting kitchens and fireplaces to baking at home, you've kind of.. it sounded from what you said before like you've sort of altered your lifestyle to accommodate you health slowing you down – is that fair to say?

HWM10: Yeah, yeah.

RB: And would you, would you attribute that health, health slowing you down to AF or do you think it's related to other things?

HWM10: Um, I would… I would probably say fifty/fifty if you get what I mean 'cause yes, I'm obviously getting older and can't do as much as I … I don't expect to do as much as I used to do, albeit that I would love to be able to do that. But also it's hard because I don't know had I have not had the problems like eleven years ago, would now be as bad as I am now. So like as I say that question I'd probably say 50/50.

RB: Yeah, fair enough. And on a day-to-day basis do you have any pain or discomfort?

HWM10: No.

RB: And then do you have any anxiety or depression, or feelings of anxiety?

HWM10: Um… Not really, I don't think. It is, it's a hard one 'cause it is annoying that I can't do things if you get what I mean

RB: Yeah

HWM10: So, you know, yes, I'm.. that gets to me in that respect if you get what I mean because as I say I've always been very hands-on. Um, you know, now, I'll go to do something – like for instance I always used to do all the work on my car um if ever anything needed doing to it, I would do it. And now I'll maybe go up to the garden at the top of my garden and my son lives literally in the house at the back of mine. So if he comes out his front door, he's looking directly at my garage. And I can be up there and go right I'm going to go up there 'cause I need to er, take my wheel off my car and do something, and I'll start it and then like, I'm struggling. So my son, my son'll come out and go, "Come out, I'll do it" [laughs] you know, and that, you know, and that does affect me 'cause I'm like.. I've never been one to ask anybody to do anything for me if I know I can do it myself, if you get what I mean, I would I would always do it myself rather than ask somebody else to do it. Erm.. and it is hard when you can't do what you used to do

RB: Sure, sure. You sound.. is it a sort of feeling of frustration?

HWM10: [pause] Yeah.. but it also makes me, like, if nobody's.. if like my son's gone to work and my wife's gone to work and then there's something that needs, that I need to do and I can't do it, that really gets to me if you get what I mean.

RB: Yeah. Do you worry about the future?

HWM10: Um.. Not.. well not too much, uhm, I mean, me and my wife have both spoke, you know, like we're thinking about changing our downstairs bathroom, and it's just silly things like well, ok, if we're going to do the bathroom well let's put a higher toilet in now, because we're both not getting any younger you know. And although my wife's only 4'11 or whatever she is, 5'2, she's like if you put a taller toilet in I'm going to need a step just to get on it you know. Um but you know it's just things like that, you know, I do try to think about if we're going to do anything in the house or I'm just trying to think what will happen in years to come if you get what I mean, so yeah I do…

RB: You're planning for it, you're not worrying about it but you're planning for it

HWM10: Yeah

RB: Yeah, ok. Do you feel like your role's changed in your family because of your health?

HWM10: Erm…

RB: You mentioned about your son helping you with the car and stuff like that

HWM10: Yeah, I mean, I would.. 'cause like in the past it would have been like my son going, oh this needs doing, so I'm like oh I'll come up a give you a hand, um you know. And I would go up and if he got stuck I would tell him what needs doing. I mean you know we joke about it all the time, like with the, with the er fireplaces, you know, we get customers come in and they say oh, you know, your

son come out and he done a fantastic job, um, you know, his work is incredible, and I'm like yeah, that's 'cause I taught him everything he knows! [both laugh]

RB: Ah, it must be great to hear that though, that's really nice isn't it?

HWM10: Um, yeah… but if he hears the customer say that and then he hears me say oh I taught him everything he knows, he'll like look at me and laugh 'cause yeah at the end of the day I've not sort of done it now for, I've not fitted fireplaces since I had the ablation

RB: Right

HWM10: So I gave up the fitting side and I just went to do surveys and things. Um, so I was still, like, running the business, but yeah that affected me in the way that , um, like I felt that I was still earning a wage from the business but I wasn't doing the work. Which, again made me feel quite bad because I'm thinking well, y'know.. and I maybe overthink everything 'cause like if my son, um y'know if I go out and buy a new car, um I feel like my son is, is going "Uh, well that's good innit? He's gone out and bought a new car and yet I'm the one that's going out and slogging me guts out five days a week fitting the fireplaces", y'know. So it, y'know, it kind of makes me feel bad that way, um, but the only way I can sort of get round that is I have to think well yeah but when I set the business up twenty-odd years ago I used to work, I used to do everything – I used to do the surveys, go and fit, answer the phones, everything I done everything myself y'know so I was working stupid hours. So, y'know I look at it like that and then go y'know, maybe I do deserve to have a new car, but then I do feel guilty when I buy a new car.

RB: I hear you. Um, all I can think is that of all the things I've ordered from Amazon, Jeff Bezos has never brought one of them to my door – do you know what I mean? The boss doesn't necessarily have to do the hard work.

HWM10: Yeah, yeah, it's um yeah, it is, y'know I mean yeah y'know my wife again me and my wife have both spoke about this about the fact that well yeah we're, we get paid but I don't drink, I don't smoke, y'know for the last year we haven't really gone out anywhere. Um, y'know so our money gets paid in the bank and we make sure the bills are paid and whatever's left's left. And it stays there because we, we're at the time of life where we maybe don't need a lot. Where my son, like, we pay him on the first of the month and on the second, the third of the month he'll be skint. Um, y'know which I understand – they're younger and they got young children and so I understand that, um, but then y'know you think well yeah him maybe doesn't understand that we don't spend our money, so when we do buy a car we've saved up and brought that car, y'know. Um, but yeah as I say I do feel sometimes that he thinks that he's doing all the work and we're reaping the benefits but .. um, y'know hopefully I could be, as I say again I could be overthinking it, but..

RB: Yeah, ok. Just going on to the last page of that questionnaire now then, there's a kind of thermometer which goes from zero which is the worst health you can imagine to a hundred which is the best health you can imagine. Where would you put your health today on that thermometer?

HWM10: Um… I would probably say 60 to 65

RB: Ok. And what, what would you need to change about your health to push it up to a 75?

HWM10: Um, get rid of some of the aches and pains, and be.. probably fitter. And yeah, that's probably about it really

RB: Ok, ok. So I'm going to move on now to talk a little bit about weight management because as you now this study is about the connection between weight and AF.

HWM10: Yep

RB: And I know from.. we spoke on the phone several months ago now before your ablation actually, you mentioned that you had tried different diets and things to manage your weight over the years and I think with some success as well if I remember rightly. Can you tell me a little bit about that?

HWM10: Yeah, um , I mean I've always been.. I've always been a big lad. I mean I'm 6'4, right from being sort of at school um I was never thin, um.. I would, I would say to the point that yes I was probably overweight um, but obviously when you're young you don't really take that much notice if you get what I mean? You're young, you're fit, you're running about, um.. you are what you are. Um but then.. I was up at 20.. about 23-and-a half stone, um, again which sounds colossal but being 6'4 carried it quite well. But yeah, y'know the older I was getting the sort of more unhealthy I was feeling. Um, my wife started the Aloe Ver diet and I mean she's looked at it and looked at it and looked at it for months and months and months, she'd rang up and spoke to somebody about it, um, but she said all she kept saying was well I'd love to try it but it's very expensive. So one Christmas, just before the Christmas she's been looking at it again and I said to her look if you wanna do it, then do it. And she said yeah but it's a lot of money, I said doesn't matter. I said if it works, then doesn't matter what it costs I said, you know, but if you want to do then do it. So she was like right well ok but if I do it, what are you gonna eat? So I said look, I'll, I'll just eat sensibly I said, y'know, I said you go on the diet, I said you do the diet I said and then I said I love salad I said so tea-time I said I don't mind sitting down to a salad so I said we'll do that. So she was like, ok. So, she went just before the Christmas, she started it in the January, 'cause obviously they said there's no point starting it before Christmas…

RB: No! [laughs]

HWM10: So she started it in the January um, and for I would say couple of months the weight was falling off of her. I was just eating salads um, and my weight was going up and up and up and I thought I can't get my head round this! I'm only eating salads, what, you know, what's going wrong? Um, so my wife kept saying well why don't you do it? I said look we can't afford for both of us to be on it. We could, but I just, I just kept saying we couldn't afford for both of us to be on it because it was quite expensive. But then when it got to the Easter I said to the wife ok I said I'll do it. Well what happened was we had a small win on the lottery, um, so when we had this small win on the lottery I was like "Oh I can afford to go on the diet now!"

RB: [laughs]

HWM10: So I started it in the April, um and my wife when she started it she was near enough the same weight as me, you know, um, so she was nearly, think she was about 22 stone, 22-and-a-half stone, something like that. And obviously she'd started this diet, she was doing quite well, she was losing quite a lot of weight. Um, so I started it in the April and lost in 16 weeks I lost 8-and-a-half stone.

RB: Blimey!

HWM10: Um and I felt really good. Really really good. My wife took, er, she started in as I say she started in the January and she lost um she got down to her target weight in the July I think it was but then she wanted.. she got down to her target what she'd set but then she wanted, once she got there she wanted to carry on and go a little bit less. So she continued. But we both done really really well on it, yeah. It really did, y'know, it worked, y'know and everybody said oh You've done the hard work now and I was like, no, we've done the easy part. The hard part is keeping it off.

RB: Oh that's interesting that you say that because that's very true and not a lot of people realise that.

HWM10: Yeah and it is so hard. You know, we've both, we've both put on a bit of weight and we're y'know we're both I mean I'm, I'm at the minute doing the other study with um.. with [City]. Um and I'm on the Cambridge 1:1 diet with that study. Um, but I will I will admit I am struggling. The lockdowns don't help. Um, y'know I'm an active person, I try to be active. If I'm doing summat, I can go weeks without eating! [laughs]. I know that's not good but if I'm doing summat everyday and I'm busy all day, food doesn't bother me. When I'm doing nothing I'm like, I'm bored. I then you find that you're going home, you're opening the fridge. Um, you look in the cupboard y'know. And I'm like, why? It's just that I'm bored. Um so yeah, as I say with the diet both, both of us have done well, but we've both put a little bit on and y'know, um, I'm the sort of person that when I got down to.. when I lost all the weight with Aloe Ver um I went from like a 44-waist trouser down to a 34.

RB: Wow, that's a huge difference!

HWM10: And, um, you know, I was I was buying clothes from shops that I would never even dream of going in, y'know. And I brought, like obviously needed new clothes so I brought new clothes. I've now got a wardrobe full of clothes that, I love the clothes, but I've put a few pounds on and I can't get in them.

RB: Ah, shame

HWM10: And my wife'll go, why don't you go and buy yourself a new pair of trousers? And I'll go because I've got 14 pairs of jeans upstairs and that I can't get in. Some of them are brand new 'cause I've brought them and then obviously not worn them – I'm not buying new clothes, I want to get back in those clothes but as I say with all the lockdowns that keep happening I'm struggling.

RB: Yeah. Can you just tell me, the Aloe Ver Diet – diet – what does that actually involve?

HWM10: It's very similar to the Cambridge Diet, so if you know what the Cambridge Diet is?

RB: It's the sachets, isn't it? The meal replacement sachets.

HWM10: Yep. So the Aloe Ver is very much the same. You have sachets, all different meals, erm, that come in a sachet and as you lose your weight you go from having all sachets to then like having Stage 2 where you have, you get rid of your morning sachet and you have a breakfast. Then you go in to stage 3 which is where you lose your evening sachet and have an evening meal. Um, but again with the sachets when you very first start you get a list of um, list of all the things you can have, like all the foods you can have, um, and you can have as much as you want of them. So like um mainly

green stuff and green salad, vegetables are unlimited. Mushrooms are unlimited. So one of the, for instance, one of the sachets was an omelette. But it's a powder, so you mix it with water and you can then like dry fry it in a frying pan and it ends up being like an omelette. But you could have, I could have like half-a-pound of mushrooms with that. As long as I don't fry them. I could like boil them or y'know, put them in the frying pan and put a little bit of garlic and um, like light soya sauce in the and just fry them in the frying pan and fry them with the soya sauce and the garlic and have them with the omelette. So you can sit down in the morning and have an omelette, and you can have as I say you can have as many mushrooms as you want. And so you never felt hungry but the weight just fell of you. Literally like, y'know. And it was learning about foods, um, y'know what foods you can eat as much as you want. And this is what I said to them when I started it was I said, I was eating just salads. But I said that I was finding that I was putting weight on. So he said right, what was you having in you salad? I'm like well lettuce, tomatoes, cucumber, um, beetroot, y'know, then I said I'd perhaps have like a chicken breast or some cheese, um on the salad, um, and then some salad dressing. And he's like, well there you go – your salad dressing is a no-no, tomatoes you're only very limited, beetroot is a no-no, um y'know. And then literally when I started the diet I was still having salads but following what we was allowed to have and as I say the weight just fell off.

RB: Right, ok. So that, the guidance really helped you, the guidance that came with the diet?

HWM10: Yeah, yeah, definitely. Y'know as I say, it's like the salad dressings, it, the guy who used to run the Aloe Ver, he said to us if you want a dressing on your salad, he said, get a tablespoon of olive oil and a teaspoon of Dijon mustard, he said and just mix the two together, he said and stir it and stir it and stir it, and he said it'll go together and create a dressing he said, and then put that on you salad. Um, so that's what we used to do, y'know. My wife, she didn't really like salads but she always, she would eat salad if it had got a dressing on it. So um, she used to make we used to make this dressing up, put it on and as I say the weight's falling off of us. But it is so.. the hard thing is with diet is when you're out of the house and you're.. 'Cause I used to do all the surveys, so I could leave the house at 6 in the morning, um, and I could be going to probably 5 or 6 different addresses to do surveys for a stove. Um, and I might not get back til 5 o'clock at night. Now, when you're out driving about the hard thing is get, if you've not prepared something to take with you the hard part is getting something that's good when you're out. Y'know, 'cause you call in a garage and you go I'll have a salad sandwich. But that's not good for you because the bread and the butter that's in there and then the salad's probably not all the right things, y'know, so it's as I say when you're out and about it is very difficult. Um, y'know to find things that you can have freely, if you get what I mean, without too much thought on it.

RB: Yeah. And now you're on the Cambridge sachets, are you finding the same sort of success with those?

HWM10: Um, yes and, yes and no. I mean, I'm.. yes if, if we wasn't in the damn lockdowns all the while, I think I would be on the same par as I was when I was on Aloe Ver. Um, because I can literally, it's like over Christmas with the best will in the world um, I was like right, I'm really really gonna like try over Christmas and but then stupid things like our Christmas breakfast in Northamptonshire is pork pie. Believe it or no, that is fam.. well that is a Northamptonshire tradition.

RB: I never knew that!

HWM10: Yeah. Um, that you have pork pie for Christmas breakfast. Now, I love pork pie. And because we've got a coffee shop in our showroom we get all.. like my wife does afternoon teas, so in the afternoon teas they have pork pies on the afternoon teas. But we buy them from Melton Mowbray, from like the traditional pork pie…

RB: Yeah, the proper ones…

HWM10: Yeah. Um, so I said to my wife, oh um, ask them if they do – 'cause you can't buy them now, you used to be able to buy them freely in Northampton years ago, you don't seem to be able to get 'em now – but I said ask them if they do a 3lb pork pie. Because that's what we always used to have at Christmas. It's a much bigger pork pie. So she rang 'em up and they said yeah yeah yeah we do those, so [wife] said oh yeah they do 'em. So I said, I said order ten, I said because like we can give 'em to the kids, so they've all got one 'cause as I say we all have pork pie for breakfast on Christmas morning. So I said we can give 'em to all the kids, I said I'll give it to my brother, my sister, um my wife's sister, y'know I said we'll buy 'em all one. So anyhow we ordered ten. Well when they came, they sent 14.

RB: Oh! 40% extra free!

HWM10: [laughs] and you know, I brought them home and I thought what am I gonna do with 14 pork pies? We gave to the neighbours either side of us, but again with the best will in the world, like, we ended up I think we ended up with two or three of these pork pies in our house. And I'm.. I've been brought up like to, if you buy something, you eat it. You don't waste it. And that is my biggest problem – if there's something that we've brought, that's in the fridge and it's going out of date, I'm like, well I need to eat that, because I brought it. And I shouldn't, I know I shouldn't eat it, but I'm like, but I brought it, I feel guilty if I throw it away. Um, so it does make it y'know as I say it makes it very difficult for me over Christmas 'cause we ended up with all these pork pies and I was like I've ate too much pork pie now! So I put, I did put some weight on over Christmas and then as I say started with a vengeance again after Christmas on the Cambridge diet, um, but then of course we've now gone back into this damn lockdown and y'know, I'm back to being like, I'm just bored. So then I end up looking for, looking, as I say, you sit there for half an hour watching the telly and then you go oh well I'll go and look in the fridge, or I'll go and look in the cupboard. Um, and then when I've ate, y'know, if I've eaten summink, if I get something out the fridge or the cupboard and eat it, then I feel guilty, 'cause I think well I'm trying to lose weight and this ain't helping. As I say, if I was working again, like back in the cooking and stuff, I'd be fine. But, um until we can open again.. But yeah other than, other than that, yes, if the lockdown and the temptation of Christmas weren't there, I think I'd have been doing ok.

RB: Sure. Sure. So you don't find it difficult to stick to the sachet diets, you sound like you find it reasonably easy.

HWM10: Yeah, yeah. As I say, not a problem. Y'know, when I was.. the thing is when I was 20, 23-and-a-half stone, people said to me, oh, y'know um.. 'cause I live in a small village and a lady in the village stopped me who I've known since we since I was a toddler. And she said oh she said and she knew, 'cause she saw me when I was in hospital when I collapsed. Um and she saw me again in the village, I was out walking and she saw me and she went, she stopped and she went "Oh!" she said "you've put some weight on!" she said "since, since you retired". Um and I went well I've always

been a big chap anyhow ain't I? So she went yeah but I suppose now you're retired you sit and eat all day. And I'm like, well firstly I'm not retired, and secondly I don't eat at all! I was eating, I was eating like one meal a day. Um but again until I started the Aloe Ver you don't realise that doesn't do you any good. I was just having one meal, in the evening, a day. I was having no breakfast, no lunch, when I got home from work I would just have the meal that we had, um, that we'd y'know either me and the wife had prepared, or the wife had prepared. Um I would sit down and have that and that was it, y'know. And you think how can I.. It's quite easy for people to look at a big person and go well they just eat and eat and eat, and it's not always the case, y'know, you maybe you don't eat and that's why you body then starts and goes well hang on I'm not gonna get fed for another 24 hours, I better hang on to this um, y'know, so.. Yeah, with the Aloe Ver and the 1:1 diet, 'cause you're eating every two-to-three.. well 'bout three hours, um, it helps you not to feel hungry. Which, as I say, it works, but it's the boredom side of it that I struggle with.

RB: Yeah, yeah. So once.. I mean eventually you'll obviously come off this study and off the 1:1 diet, and it's.. previously when you were talking about your bathroom and so on it does sound like you're someone who does plan ahead – have you thought about how you're going to try and maintain your weight? Or do you think that's going to be a struggle for you?

HWM10: It.. It's.. I'm in, y'know, I'm under no illusions, same as my wife y'know, there's no illusion that it is a struggle, a constant struggle, um, to maintain, y'know to maintain the weight that you want to be at if you get what I mean. And, it's weird because when you're big, um… I don't know.. I don't know what it is, you like as I say I was only eating one meal a day, um, but you didn't rea.. your weight never really fluctuated if you get what I mean. Um, but then when you lose a lot of weight it seems easy for your weight.. it seems far easier to put it back on than it does to get it back off.

RB: Sure. What was it that initially motivated you to go on to the Aloe Ver diet? Was it.. you say you've been a big bloke all your life and you'd obviously gone up a little bit, but was there any particular thing that made you think, no, now I need to lose weight?

HWM10: Um, [pause] not really other than, other than just feeling like, unfit. Um, y'know and I mean my wife, my wife had said to me that once she started the Aloe Ver she then said the reason she'd wanted to start it and she knew she needed to lose the weight was be.. she was beginning to feel really unwell. And she'd got to the point where she felt that if she didn't lose some weight then she wouldn't be here much longer, y'know, and y'know, she said "I never told you that" she said "because I didn't want to worry you" and but it was she said "it was worrying me that I was gonna end up that either that ill or.. y'know and yes y'know people have often said well didn't they say anything when you collapsed with your heart problem that the reason was that you was overweight and I said never once did any of nurses or Dr [name] or anybody say to me "You need to lose weight". Um, you know, whether they thought it or not I don't know, but y'know it's easy as I say it's easy for people to say.. I mean over the years y'know I've had a leg ulcer since I was 20, 21, and I nearly lost my leg at one stage, and it keeps.. again that's something that can be fine for years then suddenly it can break down and I can get a year of really bad trouble with it then it'll heal up and um, be ok again for a number of years. And I can remember seeing a doctor in the hospital um when I had that one once playing up and he sat there at his desk and he was a big chap, in respect.. I mean he probably didn't weigh more that me but he certainly looked bigger than me. Um and he sat there,

didn't even look at me, and he was writing on his desk and he said "While your weight's this .. while your weight's that much" he said "your leg'll never be any good, um, you need to lose weight"

RB: And how did that make you feel?

HWM10: Um and I sat that and I's like, well, he's fine one to talk, 'cause look at him! Y'know. And I, I think I did sort of say, it's not easy to lose weight. Um, and if remember right, he said to me right I'm gonna see you in 6 weeks' time, um, he said, and I think the conversation went along the lines that well, I could do with losing some weight, you could do with losing some weight, we'll y'know we'll both aim to lose some weight and when you come back in six weeks we'll see how you've done. Um and er, I was like right ok, I'll do that. So I come away and I like really stuck at it, tried to lose weight. And I we.. I'd lost weight definitely, and when I went back in the six weeks, same guy sat there, um, and obviously before I went to see him I'd been to see the nurse and they'd weighed me and what have you and they'd took all the information in to him, and I walked in and he just said "I've told you before, while your weight's that much your leg'll never be any good". And I just walked out and I just, d'you know what, I said, that's it. That's it 'cause he certainly hadn't lost an ounce! I, I'd lost weight, and he was still adamant that it was my weight that was causing the problem.

RB: Sure. And he didn't acknowledge the weight that you'd lost.

HWM10: No. So, I walked out and I said to the wife, he can forget it, y'know, that's it now. What's the point? 'Cause he didn't even say oh well you done really well, y'know. I don't think it was like.. I think I'd lost probably summink like a stone, um, so in weren't a nominal amount, y'know, it was a reasonable weight loss but as I say he just turned round and went "I've told you before, um, while your weight's that high your leg'll never be any good". And I was like ok well that's it then. I mean..

RB: And when you lost…

HWM10: …[City] never ever said anything about my weight. When I did lose a lot of weight, I can remember me and my wife sitting in the waiting room for Dr [name]'s clinic, and Dr [name] came out, called my name, um, but was walking through everybody as he called my name, um, and he walked straight past me and then got to the end of like where everybody was sitting and then, like, turned around because obvious.. he was looking for me, and by that time I'd stood up and he went "Oh my god!" he said "didn't even recognise you!" [both laugh]. Um, so, as I say… But again, he didn't say, well, that's great because you're now not going to have a problem or anything, you know, he didn't say well you needed to lose that weight, he was just like oh you look so different, you know?

RB: Yeah

HWM10: So, yeah, he congratulated me on .. me and the wife on the weight that we'd lost, but as I say he didn't use it as an excuse

RB: Sure, he didn't, he didn't have a conversation with you about the connection between AF and overweight, for example?

HWM10: No. No. I mean whether there was that connection eleven, twelve years ago I don't know

RB: No, probably much less so actually, but obviously we've known for a long time that other heart diseases are linked to.. to overweight. Did your leg ulcer improve when you lost the weight?

HWM10: Um, it'd been fine.. it'd been fine anyhow. I did have, for the last um.. well this time last year I was having a lot of problems with it again, um, but that was because we'd recently come back from a cruise in.. er.. we went from Hong Kong to, from Shanghai to Sydney, and while we was on the ship I burnt.. I got sunburnt on my leg

RB: Oh nasty

HWM10: Um and it flared it up again and this time last year I.. it was quite bad again.

RB: Yeah. Did you notice any change - when you lost the weight obviously your AF's been ongoing through all of that – have you noticed any correlation between your weight and your AF?

HWM10: Um.. Not.. well, not really, it's hard to say because obviously five years, it'd been five years, so it was 2015 when I had my last cardioversion. Um, now 2015 to 2018 um.. I probably would have been fairly big. Well I would have been because in the April of 2018 that was when I started the Aloe Ver diet. So between 2015 and 2018 my weight had gone up to 23-and-a-half stone, I can't remember exactly how heavy I would have been in 2015, probably not an awful lot lighter than 23-and-a-half stone. But then I lost the 8 and a half stone, um, and so that would have been through to sort of September 2018, um.. and then I put er between 2018, September 2018 and let's say September 20, I probably put about two and a half stone on. So it's difficult to know, and I did say this to the wife when I went back in to AF, is it because I've put weight back on? Because I'd put two and a half stone on. Even though I wasn't um.. I wasn't as heavy as I was five years ago, but obviously I had lost a lot and then put 2 and a half stone back on. So I, y'know, again it's one of those things. I don't know, I don't know if that's part of the reason why I went back into AF, or whether it was the stress, um, of what had gone on in the family for the past two years. Because again that's part of the reason why I put weight back on was because like, I lost my mum, we was away on a cruise and I couldn't get back – she was taken into hospital and I couldn't get back in time to see her. And then, so that was really difficult. And then my youngest daughter gave birth to our eleventh grandchild and he passed away 24 hours later..

RB: Oh I'm so sorry

HWM10: .. um so we struggled with, with that as well. Y'know, those two things alone as I say made me put weight back.. I know people say well it shouldn't but it does, you sort of.. you look at things differently and go, y'know, you go into a shop and you see a bit of cake and you go do you know what, I'm gonna have that cake. But um, y'know as I say, whether the, as I say whether the weight gain did cause me to go back into AF or was it stress I don't know, could have been a combination of the two. So, so, yeah it's, er, it's difficult to know.

RB: Yeah you'll probably never know, there might not be a hundred percent answer either

HWM10: No, no, I mean yes if I got back down to like the 16 stone that I got down to with Aloe Ver, and then I had no stress at all, but I put weight on and I went back into AF then I don't know. I guess you could say it it could be the weight that's doing it, but y'know that's not what I would like to.. I

wouldn't want to try and create that scenario if you get what I mean, because it's easy to put weight on – very hard to get it back off again.

RB: [laughs] Yeah. If a card… I wanted to ask you actually – when you were approached for the other study, the one that you're on the diet for now, did they talk to you about your weight and AF and how the two things interplay at all then?

HWM10: Not really because I think they sent me a letter, um, and obviously there was a lot of things that they was gonna do, but with COVID they weren't able to do it

RB: Yeah, yeah, it's been a problem

HWM10: So pretty much, I got chosen for – 'cause there was two options – one was the Cambridge diet, and the other option was just speaking to somebody and like for them to tell you the best way to lose weight and to help you to lose weight if you get what I mean. Um, and basically they took all your details, they put it into a computer and it was up to the computer what option the computer chose. It wasn't somebody that somebody said oh well he sounds like he'd be good for the Cambridge diet – the computer itself generated who went to which study, um, and I got picked for the 1:1. So basically they just messaged me back and said yes, you've been chosen for the 1:1, um, somebody will be in touch with you shortly, um, and then obviously the lady from 1:1 contacted me and said Right, um I need to come out and see you and get you started on the diet, and that's been pretty much it, y'know. She comes one a fortnight but obviously with the lockdown she just tends to come, put the food outside..

RB: And run off again

HWM10: … and go. Y'know, as I say I'm not saying.. I've got nothing bad to say about her, y'know, but obviously everybody in the country at the moment is working and in difficult times.

RB: Yeah, it's changed everything, hasn't it? We've all had to adapt.

HWM10: Yeah. Yeah. So um, that's pretty much.. as I say, nobody has ever really um, I mean I think with this study [other study name] I was supposed to go in for MRI scans, CAT scans, um y'know that were going to take a long time – I think it was 90 minutes in the MRI scan. Um, and they said, look, please allow.. I think it was 6 hours in total, the visit because you had to go and have the MRI scan. And I don't know if you had another scan on the same day, but then they also like talk to you about different things as well. But obviously with COVID none of that's been able to take place, at the minute, so… Whether that'll change I don't know,, whether fut.. y'know 4 months, 5 months time they might, I don't know, they might say we need you to come in, I don't know.

RB: Sure, sure. I think they'll just have to take it on a .. take it as it comes really, see what happens in the future.

HWM10: Yep.

RB: Just going back to the medical consultations you've had over the years as well, you obviously had a pretty bad experience with the leg ulcer guy, um, and you also mentioned that Dr [name], he saw you'd lost weight but he didn't really have a conversation about the health implications of that with

you. Would you like doctors in general to speak to you about your weight, or would you rather be left to your own devices?

HWM10: Um… [pause] I think I think doctors, I think doctors should speak to people about their weight, but it's easy for people to, um, speak to you about your weight if they understand that what reasons cause people to put weight on, if you get what I mean. Y'know, it's um… and I'm not saying that doctors don't understand the reasons. But it's easy.. I.. and I think a lot of big people, um, if a if a doctor just said to them you need to lose weight, they would leave saying well he thinks I just eat and eat and eat. Um y'know. I've had conversation with doctors in the past, um, and I've said I'm really struggling to lost weight, and they're like, No, it's quite simple – if you don't put it in at the top, you won't put the weight on, y'know. And that's not always the case, y'know. It's.. there's a lot of reasons why people.. as I say it can be stress, it can be boredom, y'know, there's a lot of factors that um… even go back to your childhood – I mean we was, as kids, y'know, we was.. we would sit down to dinner and basically you didn't leave the table til your plate was cleared. Because y'know your parents, back when I was a kid your parents had worked damn hard to provide that meal that was on the table, and if you didn't eat it, y'know, but you went out and then an hour later came back in and said well um, y'know can I have a biscuit or can I have an apple, they'd be like, no! you didn't eat your dinner, you can't be hungry, y'know. So, you was always as a kid we was always made to.. or not made, but told to eat what was in front of us. But then, me being, right from a little kid I was always tall, I was always quite big um, so if we went to me aunty's for tea or something, or dinner, we would all sit down and have tea, or the dinner, and then me aunty would probably go out to the kitchen and come back in and go oh there's a little bit of trifle here left, and everybody'd go "Oh give it to [name], he's a growing lad". You know, so they'd give it to me and I'd eat it! And that's how I am now, y'know, if somebody puts food in front of me, I'll eat it..

RB: Yeah, if it's going begging, you'll have it

HWM10: ..because it's for me it's how I was brought up, y'know, somebody's took the time and trouble to give you that meal, you eat it, y'know. So again I've always said to people if you pile it on my plate – 'cause people say well you don't have to eat it all – and I'm like but that's how I was brought up.

RB: Yeah. Do you think that's another reason the sachets help? This has just come into my mind now, do you think it's because there's no.. nobody else has worked putting that meal in front of you, it kind of pre-prepared and it's like right you're gonna eat this now and so you do?

HWM10: Yeah, yeah

RB: There's no guilt or worry that you're wasting it, it's just that's what you've got, that's what you eat

HWM10: Yeah

RB: It kind of fits doesn't it with the way you were brought up

HWM10: Yeah and as I say when I was on the Aloe Ver I would literally get up, have me breakfast, y'know, do the sachet whether it be a strawberry shake or whether it be like the omelette, I would do that. Then I would look at my watch, I'd go right it's 8 o'clock, at 11 o'clock I need my next.. I

need to have my next sachet. Literally if I was out all day I would just take the shaker with the water already in it, um, take the sachet with me, pull over at the side of the road or come out the customer's house, soon as I come out the customer's house I would just sit in the car, put the powder in the shaker, shake it and then drink it, and away I go y'know. And then..

RB: Yeah, dead easy

HWM10: .. I would look at my watch again, oh 2 o'clock I need my next one and that was it. And you never.. because you was eating every 4 hours, every 3 hours, um you never felt hungry, um, because in my respect I probably wasn't eating more, I was eating.. it felt like I was eating more because I was spreading it out over the whole day rather than just having one meal

RB: Yeah, and so you feel maybe like your body wasn't hanging on to it either because it knew more was coming

HWM10: Yeah. I mean I could literally, on the Aloe Ver - and I could do it now, I've still.. we've still got some of the products 'cause obviously we finished it and we'd still got products left over – and I know that if I literally said right for a week I'm going to have four sachets of that a day every three hours, I could lose a stone in a week easily. Easily.

RB: Yeah, yeah. Just briefly going back to those doctors as well and the way doctors and nurses speak to you about your weight but this is quite.. something I'm very interested in, some other people in the study have said they felt - much like you've said y'know it was kind of almost a throw-down oh yeah you need to lose some weight but there was nothing behind that to back it up..

HWM10: Yeah

RB: Do you feel like we should have services where doctors say "You do need to lose some weight, can I refer you to this?". Is that.. if that were offered to you would you take those services up?

HWM10: Yeah, I think I would, yeah. As I say in the past it's always been go away, lose weight, come back and see me. Um.. y'know and as I say to me that's not.. yeah everybody who's big, in their mind, I'm a hundred percent certain at some at some point during the day or the week they will think to themselves I really need to lose weight. Um. But they can't. They, they need.. I said to the guy at Aloe Ver, I can't understand how.. because for 25 years my wife has been a type 2 diabetic. Now, that comes with all sorts of complications, um, and costs, y'know. She's had to have continuous medication from the GP, she has to have.. she gets free prescriptions, she has to have like regular checks with her like feet and everything. So as I say there's.. it's not.. Type 2 diabetes is not.. or it doesn't have to be a life-threatening condition. Um, but she went on the Aloe Ver diet and within, I think it was within 8 weeks, she was no longer a diabetic.

RB: Gosh that's incredible

HWM10: And.. I said to the guy at Aloe Ver surely it would make sense – I know it's expensive, but it's expensive because there's too many people making money, if you get what I mean. Like, it's not the products that's expensive, it's the clinics and the person who owns the clinic and the doctor that has to be there because you have to have blood tests and everything done, you know and the treatments you have done. So there's a lot of contributing factors that make it as expensive as it is.

Now, if that was all stripped back – and that's pretty much what the Cambridge diet is in a way because the Cambridge diet is just one person, um, who obviously she's running it as a business so she's got to make money, and I appreciate that, but it's just one person bringing the products out, giving you some moral support and encouragement and giving the products and if you stick to it religiously you would lose the weight. Now to me that would make sense, and I know the NHS is struggling, but I mean even if they.. even if for like diabetics in particular but we all know that the other health risks you have, um, with people that are severely overweight – surely it would be more cost effective to put people onto a plan like the Cambridge diet and give them the encouragement without the private clinics that are then increasing the costs, to me that would make sense if you see what I mean. Because if you can get somebody that's as I say has been a diabetic for 25 years to suddenly in 8 weeks not be a diabetic anymore..

RB: It's got to be worth it hasn't it?

HWM10: .. it's you know, that again saves the NHS a lot of money

RB: They have started doing that in some places, I don't know if you've seen, um Scotland started rolling out a plan and there are some places in the UK now that a diet very similar to the Cambridge diet is available for some diabetics. And they're having a lot of success with it.

HWM10: As I say, y'know, the only thing that my wife found a little bit disappointing with hers, and again this is not really like a medical issue, but I think she lost 8-and-a-half stone, um when she'd lost the weight, the only part of her body that she was unhappy with was her arms

RB: Ok

HWM10: Obviously she'd been used to having really big arms, upper arms and obviously losing the weight that's where she found.. that as she called them 'bingo wings'. And we went to, she went to her GP, and said like that's the only thing that's really like getting her down was like she'd always worn clothes that covered her arms because she'd got really big arms anyhow. Now she hadn't got big arms, but she still had to cover them because of the loose skin. Um and basically there was no help for her whatsoever, other than going private. Um, so she went private, and paid, obviously we paid I think it was nearly £5000 to have both arms reduced. But that disappointed her in a way, because like she said, I've lost 8-and-a-half stone, I'm no longer a diabetic, my health has improved tremendously, and yet she felt that that was like no help for her with regards to the position she was in at the end, where like she said if I had boobs that were too big or too small and I went to my doctor and said I'm depressed because I've big boobs or I've got little boobs and I want them changing, 9 times out of 10 they would get that done under the NHS, y'know? But then y'know, I looked at it, said well yeah I understand the NHS is really strapped, y'know, but yeah that was the only side that my wife found a little bit disappointing at the end of it was that y'know there was no help for her in that respect other than, well, we can give you a contact number of a good plastic surgeon, who, private surgeon to do it, y'know which we appreciated because you wouldn't want to go and have that done and somebody do it wrong.

RB: No. Absolutely.

HWM10: So as I say we appreciated the referral to a good surgeon, albeit wasn't cheap but y'know we paid for it and she had it done, y'know. So yeah, as I say with regards to the.. little bit.. I think.. I

think a lot of people would be, would be far happier to have, to know that they're gonna have support if they're told that their weight is beginning to be an issue and they need to do something about it.

RB: Yeah, that package needs to be there

HWM10: Yeah.

RB: Ok. [Name] that's all my questions, thanks so much, you've been really really interesting to talk to. Is there anything else that you wanted to discuss or add?

HWM10: Um, no I don't think so

RB: Fine. Ok. I've just got a couple of sort of general questions if that's ok. One is your ethnicity, how do you define your ethnicity?

HWM10: Er, British

RB: Are you white British?

HWM10: Yep

RB: Yeah. And what's the highest level of education that you completed?

HWM10: Erm, GCSEs.

RB: Mhmm. And then finally, this is one that usually makes people laugh, I usually ask people for a pseudonym because in the study I don't want to refer to [name] and id.. you know, people be able to identify you. Um if I were to give you another name, what would it be?

HWM10: Er….. I don't know! [laughs] Best not ask me wife 'cause that might not be printable! Erm.. I don't know.. Peter?

RB: Peter'll do just fine. What'll happen next then is I'll um type up this interview which will probably take me a couple of days to do because it's quite a long process, then I produce a summary of what we've talked about. Then I'll send you that summary by email and you can just have a look through it and let me know if I've got the gist right or if there's anything that's a bit off or anything you want to add or change in any way, that's absolutely fine. Is that ok?

HWM10: That's fine yeah

RB: So I'll probably be in touch again in a week or so with that. And if there is anything else you think of in the meantime you can ping me an email or you can phone me on my work number you've got in the information sheet there. Alright?

HWM10: Ok, yeah

RB: Lovely, so thanks ever so much for your time today

HWM10: That's alright, not a problem

RB: Alright, Byebye for now

HWM10: Cheers! Bye!

[END]