Anderson, Julia Christopher Ludlam [Christopher.Ludlam@ GRO-C From: Sent: 09 March 2002 13:25 To: Liz Chalmers; Anderson, Julia; Campbell Tait; 'Gordon Lowe'; Henry Watson; Bill Murray; Philip Cachia; Isobel Walker; Angela Thomas; Lishel Horn Subject: Fw: Letter to haemophilia patients Herewith the response from the Incidents Panel and my initial reply. I sent to the Panel a copy of the letter we proposed to sent to patients who received concentrate 1987-89 along with the letter etc we sent last year. I should be grateful for your views on the Panel's response and how we should proceed. There is a CFWP meeting on 25th March - potentially we could have a short Haem Directors premeeting to discuss this. Look forward t hearing from you Christopher A. Ludlam Professor of Haematology and Coagulation Medicine, Director Haemophilia and Thrombosis Centre, Department of Haematology, Royal Infirmary, Edinburgh, EH3 9YW. e-mail reply from Prof Banner. U.K. Tel GRO-C Fax email Christopher.Ludlam@ GRO-C ---- Original Message -----From: "Christopher Ludlam" < Christopher Ludlam@ GRO-C To: <Philippa Edwards@ GRO-C Cc. "Aileen Keel" < Aileen Keel@ **GRO-C** Sent: Saturday, March 09, 2002 1:18 PM Subject: Re: Letter to haemophilia patients > Thank you. One of our concerns is to be as open as possible with out > patients and we are concerned that further delay might be construed as with > holding information. It would be very helpful to know when the Incidents > Panel could come to a view. Apart from further information being requested > from the manufacturer what additional information will be the Panel require. > If Haemophilia Directors are not considered sufficiently knowledgeable on > this topic could you tell me who would provide the counselling to our > patients or what training would be given Haemophilia Directors so that there > are appropriately informed. > I am sending your response to my colleagues so that we can together reach > most appropriate way forward. > With regards > Christopher Ludlam > Christopher A. Ludlam > Professor of Haematology and Coagulation Medicine, > Director Haemophilia and Thrombosis Centre, > Department of Haematology, > Royal Infirmary > Edinburgh, EH3 9YW.

> U.K. > > Tel

> Fax

GRO-C

1

> email Christopher.Ludlam@ GRO-C --- Original Message ---.om: <Philippa Edwards@ GRO-C > To: <Christopher.Ludlam@ GRO-C > Cc: <Aileen.Keel@ GRO-C <l.southgate@ GRO-C > < J.Oneil[@ <patricia.hewitt@</pre> <hward@ GRO-C **GRO-C** > <tim.wyatt@L ; <agaffin@ GRO-C : <cidnet@a **GRO-C** > "Michael Banner" < Michael.Banner@ **GRO-C** : "Michael Banner" > <michael.banner@ GRO-C | <moira.langston@ GRO-C | "Don Jeffries" > <d.j.jeffries@ ; <Claire.Mills@c GRO-C GRO-C > <Charles.Lister@ **GRO-C** ·; <glenda.mock@ GRO-C > <martin.donaghy@ >; <mike.simmons@v **GRO-C** GRO-C > <Pat.Troop@ **GRO-C** Sent: Friday, March 08, 2002 3:14 PM > Subject: Re: Letter to haemophilia patients > >> > > RESTRICTED MEDICAL > > > > Dear Dr Ludlam Thank you for sending your draft letter to the Panel for comment. >> > > Having discussed the matter with Panel Members, I would like to draw your > > attention to the concerns we have about the letter. >> > > 1. Haemophiliac patients represent a special group and the Panel > > acknowledges that providing adequate support to clinicians providing > > information to patients may be less of a problem than in other > > circumstances. However, there remained some concern that not all > > recipients of the letters would be in frequent contact with their > > consultants and therefore might not receive the necessary counselling. > > Furthermore, the Panel was concerned that not all haemophilia centres > > be well informed about CJD and in particular, the uncertainties > > the potential for transmission through products derived from blood. >> >> 2. The Panel also expressed some concern about the lack of details > > available for this incident, which precludes a better assessment of the > > potential risks. It appears that the patients will be given the option of > > finding out whether they have received any of the involved batches, but > > will not be able to learn anything more in relation to their potential > > exposure. There may be a proportion who the Panel would classify as > > contactable, who should be alerted to their potential exposure in order to > > safeguard public health. The option not to be told may therefore > > subsequently be overruled at a later date on public health grounds. The > > exposure of other patients may be unlikely to be significantly above > > background. Although the risks are not known with any certainty, the > > Panel's analysis does allow an estimate of the potential exposure. The > > Panel has also been contacted by the Dr Anderson from the Haemophilia >> Centre in NI and been provided with details of doses of specific batches > > received by unidentified individual patients. Details of the products and > > pool sizes have been requested from the producers, so that the Panel Will > > be in a position to give some estimate of the potential risk for each > of dose. This would enable the consultant to identify any contactable > patients and to provide more informed risk estimates to any database > > patients who indicate they would like to know. The Panel can carry out

sessments of the possible risks for all potentially exposed patients once the necessary information is provided. > > > > 3. The Panel appreciates your desire to be open with haemophilia > > but asks you to consider whether it would be preferable to consult the > > Panel first in order to provide the patients with the best informed > > estimate of the potential risk that it is possible to carry out at > present. > > > > with regards >> > > Professor Michael Banner >> > > cc Recipients are reminded of the sensitive nature of CJD incidents and > > asked not to discuss this incident with others. >> > >