Sheffield Regional Hospital Board

Hospital Arrangements for the Diagnosis and Treatment of Haemophilia and Allied Disorders

Recommendations of a meeting of Haemotology/and Pathologists with an interest in Haemotology held at Derbyshire Royal Infirmary on 5th May 1972.

Those present included: Professor E. K. Blackburn (Chairman)
Drs. Ackerley, Blecher, Bowley, French, Guyer, Johnstone,
Lawrence, Lee, Murphy, Richards, Ryrie, Scott, Swan,
Tetley, Wagstaffe and Wylie

1. DESIGNATION OF CENTRES FOR DIAGNOSIS AND TPEATMENT

At the present time there are four centres in the region where the diagnosis and treatment of haemophilia is undertaken; these are located at Sheffield, Derby, Nottingham and Leicester. The Sheffield and Derby centres are designated by the D.H.S.S. as "Haemophilia Diagnostic and Treatment Centres" and the Sheffield centre is also one of three National Centres dealing with major surgery and other special problems arising in haemophilic patients.

It was agreed, in view of the population to be served, to recommend that arrangements be put in hand to provide at Nottingham and Leicester the standard of service required for their recognition as "Haemophilia Diagnostic and Treatment Centres". Improvements at Derby would also be necessary if it was to retain its designation.

2. FUNCTIONS OF "HARMOPHILIA DIAGNOSTIC AND TREATHENT CENTRES"

The Departmental Memorandum HM(68)8 states that 'Haemophilia Diagnostic and Registration Centres' will provide:-

- (i) a laboratory service able to carry out the tests from the results of which an exact diagnosis can be made and the haemophilia card issued;
 - (ii) a clinical service to provide treatment at short notice;
 - (iii) an advisory service to provide patients with advice on the wide range of topics which cause concern to them, and in the case of child patients, to their parents; the service will include advice on the care of small children with coagulation disorders and on the most suitable education available. The service will also provide General Practitioners, who have haemophilic patients on their list, with advice about emergency treatment, and procedure to secure patients' admission to hospital when required, including what the patient should do to obtain ambulance transport in an emergency."

- (11) Rendy access to in-patient accommodation, at least on a courtesy basis, should be provided for those patients who, in the haematologist's opinion require admission.
- (iii) Consultant cover for the centre should be provided by appropriately qualified haematologists.
 - (iv) Adequate non-specialist medical staff should be available to provide 24 hour cover.

(b) Technical Staffing:

- (i) Qualified technical staff should be available to provide a 24 hour service for the assay of factors VIII and IX.
- (ii) The technician in charge of the service should be of at least Senior Technician grade.

4. LIAISON BETWEEN CENTRES AND THE BLOOD TRANSFUSION SERVICE

It was recommended that close contact should be maintained between the peripheral centres and the Sheffield Haemophilic Centre and the Regional Blood Transfusion Centre. The Blood Transfusion Centre should be supplied with details and a blood sample from patients diagnosed as suffering from haemophilia or a similar condition.

5. STANDING ORDER FOR ACCIDENT AND EMERGENCY DEPARTMENTS

It was recommended that the Standing Orders for Accident and Emergency Departments should include reference to the procedure for dealing with known cases of haemophilia and allied diseases. This should specify the need to contact the consultant in charge of the hospital blood bank and also the appropriate Haemophilia Centre for advice on the patients' management.

JAS/JZ 23.6.72.