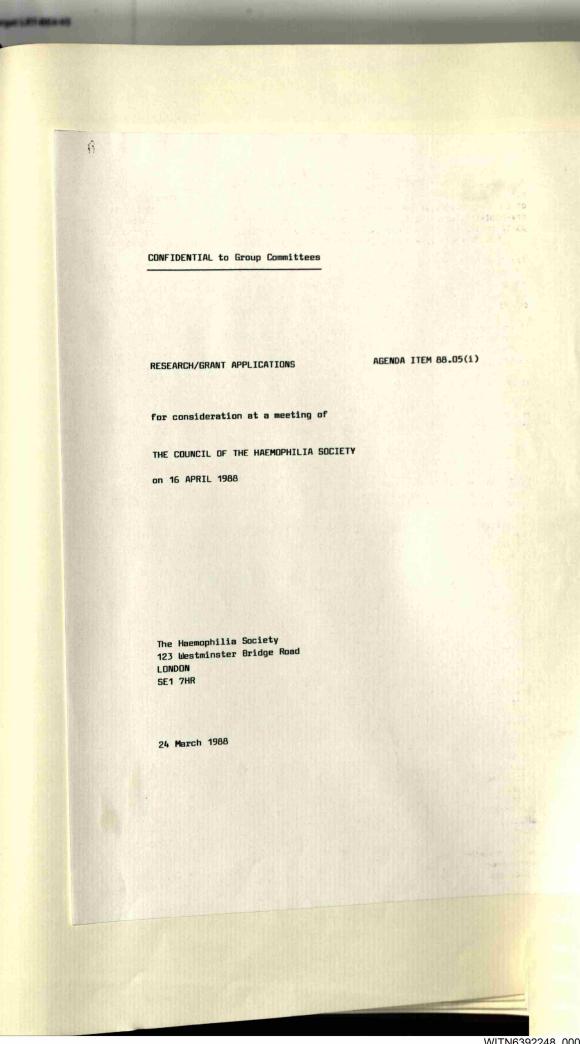
Witness Name: Katherine Victoria Burt

Statement No: WITN6392001

Exhibits: WITN6392002 - WITN6392267

WITN6392248



RESEARCH/GRANT APPLICATIONS

Introduction

Grant applications are received at the national office twice each year closing dates for such applications being 1 January and 1 July. Those applications are, first of all, considered by a sub-committee of the Executive Committee (in fact the Chairman, Vice-Chairmen and Treasurer). This sub-committee reports to the full Executive Committee who determine the recommendations which will be made to the Council in respect of each application.

Details of the applications received and the recommendations which will be placed before the Council are listed below and overleaf.

[i] Dr C R Hay, Liverpool:

This is an application for a grant of £3,000 pa for three years to investigate immunodepression caused by factor VIII concentrate. It is recommended that the application succeed.

Or Hay's study aims to identify more clearly the contaminant responsible for immunodepression in haemophilic patients by using a variety of tests on lymphocyte and monocyte functions. The effect of incubation of the white cells in those tests, first with factor VIII concentrate and then with component fractions of factor VIII concentrate will be explored. Dr Hay anticipates that when fVIII concentrate is incorporated into those tests of immune function there will be some inhibition of white cell function. If this is the case the effect will be explored further by repeating tests using fractions of fVIII to identify which fraction is responsible for the effect observed. Once this contaminant has been identified a natural approach to its exclusion from fVIII may be developed. This application is also supported by the local Group who aim to meet the annual grant from its own fundraising efforts.

[ii] Dr M O'Doherty, London St Thomas':

This is an pplication for a grant of £10,000 for one year to fund work on haemophilia, AIDS and lung epithelial permiablity. It is recommended that the application succeed.

With the increasing number of haemophilic patients with AIDS a non-invasive technique has been evolved at St Thomas' to diagnose the most common infection of the lung- PCP. This technique was developed on homosexual men with AIDS and PCP. The patient is required to inhale a nebulised solution of 99m-TcDTPA for two minutes and then to lie still on a couch for one hour. The result is available in 30 minutes from completion of the test. The technique is suitable for use on children as well as adults. Dr O'Doherty, who works in conjunction with Dr Savidge, needs to establish that the situation in people with haemophilia is the same as in his original cohort. If this is so, it will reduce the number of bronchoscopies needed and thereby, in time, reduce patient risk, inconvenience and Health Authority expenditure.

[ii] Dr M O'Doherty

At the moment Dr O'Doherty only has access to the special equipment one afternoon each week and, in addition, he needs extra finance for the supply of DTPA - £50 for each patient. In the longer term this would compare with £1,000 for each brochoscopy.

[iii] Dr P B A Kernoff, London Royal Free:

This is an application for a grant of £11,044 to fund the salary of an MLSO to work on a project concerned with carrier detection and prenatal diagnosis of haemophilia using gene probes. It is recommended that this application succeed.

In his application Dr Kernoff wrote: "the recent introduction of gene tracking techniques for carrier and antenatal diagnosis has made it possible to offer diagnosis/exclusion of the carrier state for haemophilia in 70% of individuals and this should increase to 100% as more probes become available".

Gene tracking technology is complex, time-consuming and expensive. It is only available at a limited number of Centres in the UK. The Royal Free provides this service as a socciality from a wide area of Southern England, including NE and NW Thames RHA's and East Anglia. The technician is needed to ensure the continuance of the work.

[iv] Dr E Tuddenham, MRC Clinical Research Centre:

This is an application for a grant of £2,000 pa for two years, plus equipment costs of £311.60 in year one, to meet the cost of a project on haemophilia C - factor $\overline{\mathrm{XI}}$ - purification and characterisation. Factor XI deficiency is the fourth commonest bleeding disorder in the UK and is very common amongst Jewish people. Dr Tuddenham has a student from Nara in Japan working with him and the grant is aimed to cover a small part of his costs while in the UK. A major piece of work on fXI and monoclonal antibody characterisation has been started in Japan and this is the work now being continued under Dr Tuddenham at the MRC.

It is recommended that this application succeed in repsect of year one costs only at this stage.

[v] Dr L A Parapia, Bradford:

For the past two years the Society has funded, on a year by year basis, a psychological study of HIV positive patients at the Bradford Haemophilia Centre. Reports have been received for each of the two years funded. Dr Parapia now applies for funding for a third year of the study in the sum of £3,500.

It is recommended that this application not succeed.

[vi] Dr R Mibashan, London Kings College:

Dr Mibashan seeks a grant of some £16,500 pa for two years to

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[vi] Dr R Mibashan, London

to fund the salary of a basic grade biochemist, plus consumables and on-costs (NI etc). The aim of the project is the analysis of the molecular basis of mutation in haemophilia A and its diagnostic implications. This is part of the development of the diagnostic work of Kings College Hospital.

It is recommended that this application not succeed.

Those were all the applications received for consideration by the 1 January 1988 deadline. In fact no additional applications were received up to the end of March.

David G Watters General Secretary

24 March 1988