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SGR/RCS

8th May, 1975

Dr. J. M. Chessells,
Consultant Paediatrician,
The Hospital for Sick Children,
Great Ormond Street,
London, WC1N 3JH

Dear Dr. Chessells,

Thank you for your letter of the 2nd May to Dr. Kirk concerning
I GRO-A

Whilst I fully agree with you with regard to the prophylaxis in Christmas disease, and I think it may well be worth our while to adopt this regime in selective cases; on the whole it would not pay us with regard to the use of high potency concentrate, to adopt it universally for all our cases of Christmas disease. We now have on our books nine such cases and six of these bleed very infrequently - approximately once to three or four times a year. In fact, out of the nine cases only four bleed at all frequently. We have now had GRO-A under observation for two terms and if he continues to bleed at the same rate as he has done in the previous two terms we will probably adopt your suggestion.

I think perhaps, I should also let you know that the incidence of hepatitis with icterus amongst boys with Christmas disease has been very much higher than of the boys with haemophilia, namely three out of nine.

Furthermore, the reversion rate from Hb antibody negative to positive has always been higher in the Christmas disease cases than the haemophilic boys. We have always assumed that this is due to the fact that the Christmas boys are almost invariably transfused with high potency factor IX prepared with material from large donor pools. However, I think this is a debt we shall have to continue to pay, since this high potency concentrate is so effective and no case of hepatitis that we have experienced can be regarded as even moderately severe.

Yours sincerely,

S. G. Rainsford, C.B., M.D.,
Research Fellow

c.c. Dr. P. J. Kirk, SHO Haemophilia,
Treloar Haemophilia Centre