Reference.....

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I have now had a chance to speak to Dr Harris at Armour and I have also contacted Duncan Thomas at NIBSC. Duncan Thomas has just returned from Jerusalem where he met someone from CDC in Atlanta at the Committees of the ICTH. He understands that someone in Australia has informed CDC that there is a case of sero-conversion in the United Kingdom with Armour concentrate. The CDC felt that in view of this and the casesin Holland and North Carolina which I understand concerned several different manufacturers concentrates, that they should inform the FDA with regard to action. The CDC have no further data on the British case which is assumed to be the Lewisham one. Duncan Thomas is concerned that the Lewisham case has in fact only be tested by ELISA on two occasions and would therefore fulfil the criterion of "repeatedly reactive" used by the FDA. Unfortunately since testing has been done at PHLS there is no confirmatory Western blot.

I spoke to Dr Harris at Armour who told me that the FDA already know about the Lewisham case. He said that Armour in the US had been told that if they had a sero-conversion they should put this on their data sheet. Obviously they are extremely anxious about this. He is trying to persuade Dr Whitmore to release some plasma to carry out Western blots on the Lewisham patient to make sure that this is not in fact a false positive result. The patient remains well, there are no further reports of sero-conversions and no further data areforthcoming on any of the patients.

I feel that really we have no further information than we had at the EAGA meeting when I presented the response to Dr Jones' letter. Mr Christie from Armour will contact me next week when he returns from the World Federation of Haemophilia meeting in Milan, ~~and~~ I can discuss with him further any possible new evidence they have from Europe since he is the person who has been following this up. I enclose a copy of the Lancet letter from Gilbert White in Chapel Hill.

GRO-C

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