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Sir Philip Rogers

I think you and Ministers should know that there is a development in the treatment of haemophilia which is likely to involve us in increasingly heavy expenditure for the maintenance in reasonable health of a group of patients born with a particular congenital abnormality. The control of haemophilia has become more and more effective, but it involves the use of special blood products which are now very expensive and are not likely to be greatly reduced in cost in the near future. They are however available in much larger quantities now and inevitably the haemophilia centres where these patients are treated will expect to be able to use them.

There are commercial sources of supply, one American and one Austrian, of which the American product is now licensed for sale in this country. We have a home produced preparation but in limited supply.

The demand for the two preparations involved is likely to increase progressively and the cost will eventually be measured in millions of pounds so far as we can estimate now. We are already using these products from home supply and when this larger supply becomes available, can hardly refrain from using it. This will be another example of the way in which pharmaceutical advances can place us in an impossible position if we fail to take advantage of them. The last large-scale example of this was the introduction of l-dopa.

The details of this are being worked out and Dr Reid will be arranging consultation with some of the people now engaged in managing these cases at haemophilia centres.

GRO-C

6 February 1973

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