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JOINT STEERING COMMITTEE ON BLOOD PRODUCTS PRODUCTION

Summary of Aims and Consequences

(Note: It has been assumed that 1.0L plasma is derived from four donations).

1. Approximate number of donations devoted to treating haemophilia in U.K. (fresh frozen plasma, cryoprecipitate, AHG concentrate)

Scotland (year ending March 1973	34,000
England and Wales (1972)	<u>250,000</u>
	<u>284,000</u>

Of these donations about 45,000 were used to prepare concentrate.

2. Two aims agreed in principle at meeting on 20th March 1973

- (a) To increase number of donations devoted to treating haemophilia in UK, in first instance to at least 4000,000 (paper 1.3 p.3)
i.e. about an excess over donations used in 1972 of 120,000
- (b) To prepare concentrate from 250,000 donations by 1975 (paper 1.4. p.17)
i.e. to fractionate about 62,500L per year or approx. 1250L plasma/wk.

This would yield about 20M. units per year (assuming 40 per cent recovery and 0.8 units/ml fresh plasma).

3. As consequences

- (a) 85,000 donations (i.e. 130,000 donations less 45,000 already used to prepare AHG concentrate) will have to be diverted from cryoprecipitate, assuming the additional 120,000 donation in 2(a) are used solely to prepare AHG concentrate.
- (b) Depending upon how the additional plasma is collected up to 120,000 preparation of concentrated red cells will be available for clinical use and in addition to those now arising from the preparation of cryoprecipitate.

4. Sources of additional plasma

Additional donations per year:	at least 120,000
" " per week (50)	at least 2,400

If this burden were distributed in proportion to population (Scotland 1: E and W. 10) the additional responsibilities would be

Scotland:	About 200 donations/week
E and W	About 2200 " /week.

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5. 120,000 additional donations might yield the following numbers of preparations of concentrated red cells per year.

Scotland	10,000
E and W	110,000

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