Haemophilia

Mr Dutton

CRYOPRECIPITATE PRODUCTION

Thank you for sending me a copy of your appreciation of cryoprecipitate production and minute of 13 August 1976.

I have these specific comments on para.4

a. Yes
b. Possibly
c. Should be considered
d. Cryoppt. can be pooled, as it is in some European countries. It can then be sampled and assayed and also freeze dried. Pooling would thus result in "a more standardized form."

All the above would involve investigation, some money and people and, possibly, most important of all, some enthusiasm. It should be possible to improve our cryoprecipitate.

Dr Gunson's group is now actively arranging to examine cryoppt. from each region and Dr Bidwell is now planning visits to centres. I think this survey is probably the first step because little if anything new, I understand, came out of the Edinburgh meeting.

Several countries (eg Australia, Switzerland, Holland and Sweden) tend to use more cryoppt. and less concentrate because the former is cheaper. Clinicians in these countries are apparently satisfied with this arrangement - but one cannot, of course, be certain about this. UK clinical experts have so far thought exclusively in terms of concentrate and might not agree that the quality of treatment enjoyed by haemophiliacs in those countries was as high as here. The Australian estimate of needs in i.u. is equivalent to 50 million i.u. for England and Wales.

Professor E K Blackburn, the Chairman of the unofficial Haemophilia Centre Directors' Meeting, has arranged a meeting between Reference Centre Directors and RTDs. in Sheffield on 22 October. I attach a copy of the agenda. (I was not asked whether I was willing to appear in the roles shown.)

I propose to discuss this agenda, which publicizes a new target and raises some other interesting questions, at RTD meeting 6 October.

GRO-C

W d'A Maycock

22 September 1976

Copies: Dr Raison
Dr Waiter
Mr Draper
Mr Cleasby