DRAFT

I am very glad to learn from your letter of the 22nd August that you are willing to help the Standing Joint Committee on the Classification of Proprietary Preparations by acting as Consultant on preparations in your own field.

I am very aware of the present shortage of human antihaemophilic globulin concentrate and Christmas factor. When the extended Blood Products Laboratory, Elstree, the Plasma Fractionation Laboratory, Oxford and the new Plasma Fractionation Laboratory, Edinburgh are in full operation in two or three years time, it is planned to use some 40,000 donations of blood for making these materials. This amount of blood was estimated by the MRC Working Party on Human Antihaemophilic Globulin before the advent of cryoprecipitate. It is possible that Elstree and Edinburgh could deal with more than their planned shares of this total.

As you say, what is now urgently needed is a new assessment of therelative values of antihaemophilic globulin concentrate, cryoprecipitate and fresh frozen plasma and of what amounts of each are likely to be needed for treating the haemophilic population in England, Wales and Scotland. I believe that a Working Party of the MRC Blood Transfusion Research Committee is likely to be set up under your chairmanship to consider the preparation and production of cryoprecipitate and the possible effects its wider use may have on the plasma fractionation programme. In considering this problem it seems possible that the Working Party will have to consider the relative merits of the three preparations available and the amounts of each likely to be wanted. Would you let me know if you think this is so?

/I agree entirely......

H/H 7/1 Dr R. Biggs
H.

GRO-C

This draft together with originals of letter from Dr. Biggs, Dr. Archibald's minute & mine of 31/8 & 1/9 returned by post to Dr J.G. Thomson from Elstree 12/9/67

I agree entirely that the treatment of haemophilia in this country should be independent of commercial preparations. Because of the relatively elaborate accommodation and equipment needed, I do not think it would be possible to advise an emergency plan for making antihaemophilic globulin concentrate, pending completion of the fractionation units I have mentioned. It might be possible to prepare more cryoprecipitate, but here again it would seem advisable to have the advice of the MRC Working Party before arranging for this to be done.