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**SOUTH GLAMORGAN HEALTH AUTHORITY
AWDURDOD IECHYD DE MORGANNWG**

Eich Cyf. / Your Ref.

Ein Cyf. / Our Ref.
ALB/KO/A036183S

23rd September, 1985
(Clinic 19.9.85)

Dr. P. Thomas,

GRO-C

Dear Dr. Thomas,

RE: Paul SUMMERS - d.o.b. **GRO-C** 64

GRO-C

I reviewed Paul in the clinic this week. He last bled three months or so ago with a haemarthrosis of the left knee, but this has now settled down.

On examination there was crepitus in the left knee, but otherwise the knee was normal. There was no lymphadenopathy. Liver and spleen were not palpable.

I am pleased to say that the liver function tests which were grossly abnormal last year have now reverted to normal, so that presumably his attack of hepatitis has cleared up. However, haematological examination shows that although his haemoglobin is normal at 16.6 g/dl, his white cell count is a little low, $3.7 \times 10^9/l$ 50% neutrophils, 45% lymphocytes, 5% monocytes. He also has a significant thrombocytopenia at $60 \times 10^9/l$. Unfortunately his tests for HTLVIII antibody came out as positive and I will clearly have to keep a close eye on him. There is no current evidence that he has the immune deficiency syndrome and I do not think there is the slightest need to label him as such, but nevertheless I shall keep a close eye on him and review him from time to time. I will also counsel him regarding his mode of life etc. Can I suggest that this information be maintained in the strictest confidence. I will write to you again when I see him next.

Yours sincerely,

GRO-C

A.L. BLOOM
Professor