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TELEPHONE GRO-C

THE ROYAL FREE HOSPITAL,
NORTH WESTERN BRANCH,
LAWN ROAD, N.W.3.

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18th December, 1970.

D. Guthrie, Esq., M.A.,
Director,
National Fund for Research into Crippling Diseases,
Vincent House,
Vincent Square,
London, S.W.1.

Dear Mr. Guthrie,

Thank you for your letter of 8th December with which you enclose a copy of the application from the Lord Mayor Treloar Trust for a continuation of the grant made to them in 1967.

During the 2½ years that there has been a Research Fellow at Alton, the strides made in establishing a Research Unit there have been tremendous. As you know, this has had to be done from scratch, and, when one considers that there was, at first, no Coagulation laboratory there at all, and that now they have assays going and research projects well under way, the progress made has been remarkable.

I appreciate that there have so far been no publications but I ask the Committee to bear in mind the fact that, when a grant is given to a University, or some other place in which a laboratory is already set up, the position is entirely different from the case as it was at Alton, where equipment had to be bought, techniques learnt and standards set up and prepared. Dr. Rainsford has done an extremely good job, which has not always been particularly easy. This has now been fully recognised by all those who have been involved with his work. In planning his research projects, Dr. Rainsford has inevitably laid the foundations of a special Haemophilia Unit. The Wessex Regional Hospital Board, which is already financing a research technician, is expected to take over those aspects of this very specialised Unit which have been presented to them as "routine" treatment. Before the appointment of the Research Fellow, the junior hospital staff were called upon to administer treatment as they saw fit. Frequently, this was very inadequate. Moreover, it was entirely without laboratory control. No sooner had the Research Fellow set out his protocol for the various regimes, then it transpired that the hospital staff were being very hard pressed to cope with his requirements. Now that the Regional Hospital Board has definitely recognised the tremendous value of "doing the job properly", it is more important than ever to continue the appointment of the Research Fellow, who will now be able to "forge ahead" with the projects outlined in the Research Programme which has been submitted to you.

Last Tuesday, December 15th, I attended a meeting at St. George's Hospital at which Dr. Rainsford, Dr. Franglen and Professor Nicholas Martin discussed the results of the work on the immuno-globulins, which has been carried out on the blood samples sent by Dr. Rainsford, from the haemophiliacs at Treloar, to Dr. Franglen. I was very interested in these and in the possible implications

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of this work. I have, in fact, agreed to join them by contributing blood samples from some of my own patients and also to see that the necessary samples of blood are taken from Lord Mayor Treloar College boys, who are also my patients, during the holidays when they are in London. We do not like to be too hopeful but we can envisage that this work might have some bearing on the very serious problem of inhibitor-development amongst haemophiliacs. This complication, which affects about 10% of haemophiliacs, inevitably results in deformity and crippling, since it is impossible to treat joint and muscle bleeds in haemophiliacs who have inhibitors to factor VIII.

The work on the Australia antigen and antibody is proving extremely valuable to the Public Health Laboratory Service, who are carrying out a national survey. Hepatitis is the big drawback to plasma therapy and, during the last nine months or so, the systems for increasing the sensitivity of the tests used for detecting these antigens and antibodies have been improved and made more accurate. These supplies of Au positive blood from Treloar have greatly assisted in this work. It would be quite impossible to send the number of samples which are needed by the Public Health Laboratory Service without their being a Research Fellow at the College. One hopes very much that further work along these lines will lead to more accurate screening of blood donors and hence reduce the incidence of this most serious complication.

One of the main things that stands out from this application is the fact that those people with whom your Research Fellow, Dr. Rainsford, is collaborating, are all well-known people whose scientific standard is very high. They, themselves, would not trouble to work with anybody if they did not think the work was likely to be rewarding. I do hope very much that you will be able to renew this grant.

With kind regards.

Yours sincerely,

GRO-C

Katharine M. Dormandy, M.D., M.R.C.P., M.C. Path.
Reader in Haematology, Consultant Haematologist.
Director of the Haemophilia Centre.