154

DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Alexander Fleming House, Elephant & Castle, London SE1 6BY

Telephone 01-407 5522

From the Joint Parliamentary Under Secretary of State

The Revd Alan J Tanner MA
Chairman
The Haemophilia Society
PO Box 9
16 Trinity Street
LONDON
SE1 1DE

28 SEP 1983

Dear Mr. Tanner,

When we met on 8 September, I promised to write to you confirming some of the information I gave you in our meeting. I am sorry I have not done so sooner.

I would first of all like to reassure members of the Haemophilia Society of the Government's commitment to self-sufficiency in blood products. The Central Blood Laboratories Authority has embarked on a £21 million redevelopment programme. The target date for completion is the end of 1985, by which time the Authority aim to have a new laboratory of a size capable of meeting the demands of England and Wales for blood products.

The manufacture of any product is of course dependent upon an adequate supply of raw material - in this case blood plasma from Regional Transfusion Centres. Regional Health Authorities have agreed in principle to the need for national self-sufficiency in blood products, and are examining ways to gradually build-up plasma supplies for the Blood Products Laboratories to the necessary volume.

Meanwhile, until self-sufficiency in Factor VIII is achieved we shall be dependent upon additional material to make up the short-fall in the home-produced supply and this is imported primarily from the USA. The question whether these imports should cease has been widely publicised and is a cause of great concern to haemophiliacs, but against the possible risks of infection from AIDS must be balanced the obvious risks of not having enough Factor VIII. In March this year the US Food and Drug Administration initiated new Regulations for the collection of plasma, designed to exclude donors from high-risk groups. Although future supplies of Factor VIII both for export and for use in America will be manufactured from plasma collected in accordance with these Regulations, there is still a quantity of stock, some already in the UK and more in America awaiting shipment here, which has been made from "pre-March" plasma. The FDA has recently decided not to ban the use of similar stocks intended for the USA market because to do so would cause a crisis of supply. The same considerations apply here.

You suggested that genetically engineered Factor VIII, may be the ultimate answer, because it would not carry the risks associated with human plasma, but this is very far from being a reality at the moment. Although it is being intensively researched, there is still a long way to go before it can even be estimated when such material might become available.

Perhaps I could also mention Government-funded research efforts into AIDS generally. May I reassure you that we are most concerned to fill the gaps in our knowledge of this disease. Only then shall we be able to make inroads into prevention and treatment. As I mentioned when we met, the Medical Research Council has established a Working Party to review scientific knowledge and research on AIDS in this country and abroad and to advise the Council accordingly. It will encourage contact and co-operation between research workers in this field and will also advise on grant applications for research on AIDS. The Council has, in fact, already awarded one such grant, under which a particular aspect of the depression of the immune system in homosexual males with AIDS and related disorders will be investigated. Other applications are under consideration.

I hope you will agree that the establishment by the Council of this group of eminent professionals provides the best hope of ensuring that centrally-funded research is soundly based scientifically and does not duplicate work being done elsewhere. We have of course much to learn from the experience of the United States in this field and any attempt to develop research in the UK must take full account of research being undertaken there. I understand that the Working Party will have this very much in mind, the Medical Research Council being in close touch with activities sponsored by the US National Institutes of Health.

A further, but somewhat different, aspect of centrally funded investigation into AIDS is the work being carried out by the Communicable Disease Surveillance Centre of the PHLS at Colindale. They have established a surveillance system to detect AIDS in the UK and to monitor trends in its incidence. This involves detailed notification of all individual cases of AIDS which will provide an invaluable data base for those undertaking research. The PHLS is represented on the MRC Working Party.

I hope this information will be of use to you and reassuring. I enjoyed our meeting and will look forward to maintaining our dialogue.

Yours sincerely

GRO-C

THE LORD GLENARTHUR