

# NORTH LONDON BLOOD TRANSFUSION CENTRE

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*With the Compliments of*

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DIRECTOR

- 5 MAR 1990

EBHG.1(C)

C.C. Marcela Contreras  
David Henry

it seems the DoH is washing its hands of  
the problem - it is particularly difficult for  
NUTRA to advise we have no haemophilia  
centre!

CURRENT USE AND PURCHASE OF FACTOR VIII

Sheela  
19/2

1. The RMOs attention is drawn to a difficult situation which is developing on supply and use of factor VIII in haemophilia.

2. After a period in which domestic demand could not be satisfied, the Blood Products Laboratory (BPL) at Elstree is now fully operational and can supply the needs of English and Welsh haemophiliacs with its factor VIII product, NHS8Y. This is made entirely from British plasma from unpaid donors, as provided by the NBTS. Until recently, BPL provided all products "free" to NHS users in exchange for plasma, with regional transfusion directors as middlemen. A system of cross charging is now in place so the BPL "buys" plasma from the NBTS ie reimburses the Regions for the cost of providing plasma. With money previously allocated directly to the BPL, regions are supposed to buy the product they need from BPL. This system is in accordance with market principles and was to encourage Regions to collect maximum amounts of plasma.

3. This system appears to be running into difficulties because users are obtaining product from commercial sources and as a result there is an increasing stockpile of (short shelf-life) NHS8Y. In some cases the problem has arisen because the system is misunderstood, both pharmacies and RTCs are buying in product or because users are unaware BPL can now satisfy demand. These problems need to be rectified by BPL's management. But haemophilia directors are also being influenced by commercial companies to favour their products. The price of NHS8Y is very competitive, so the selling point for commercial factor VIIIs is based on claimed therapeutic advantages particularly for the HIV-infected haemophiliacs. There are no real differences between current major products as regards viral contamination, and NHS8Y has a longer cleaner record than any of the others.

4. The department has no intention to restrict the clinical freedom of haemophilia directors. However, RMOs should be aware that very expensive foreign factor VIII may be being purchased whilst product already paid for by the NHS goes unused.

Hilary Pickles MED ISD/3  
15th February 1990

