

OXFORDSHIRE HEALTH AUTHORITY
OXFORD HAEMOPHILIA CENTRE

Tel: Oxford (0865) 64841

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Churchill Hospital,
Headington,
Oxford OX3 7LJ.

JMT/MB

31st January, 1983

Dr. J.M. Winter,
1, St. Peter's Road,
Cirencester,
Glos.
GL7 1RF

*In fact I had lost a lot
of weight & my clothes were
then too big!*

Dear Dr. Winter,

re: Malcolm James SLATER, d.o.b. GRO-C47.

GRO-C

I was asked to see Mr. Slater again because his liver function test has been intermittently abnormal since his episode of hepatitis. The results from December and from last week show that he has an ALT of greater than 200, although he is not jaundiced. His symptoms obviously fluctuate and I think that he was unwell with nausea and vomiting intermittently during the month before I saw him. There is also no doubt that he is still sensitive to increased quantities of fat in his diet and I think finds it difficult to remain with any strict dietary regime or in fact to give up alcohol for any significant period of time. Both of these may to some extent influence his symptoms and I think that the amount of alcohol he consumes could explain to some extent his slow recovery. However we have found that patients with this nonA non-B hepatitis sometimes run symptoms over many months before they subside and I hope that he is coming towards the end of this period.

*Rubbish!
I know Dr.
Rizza &
Matthews
were concerned
because I was
just one of
a number of
their patients
who were
given infected
plasma.*

The other aspect that he subsequently raised with my Research Nurse was the effect that this might have on his wife's pregnancy and on their child. He is, of course, haemophilic and this has implications for the child and I think that when he next attends Dr. Rizza would probably like to discuss this with him. The hepatitis is not straightforward. As far as I am aware there are no well-documented episodes of this type of hepatitis being transmitted from a father and at this stage of his illness one would hope that he was not highly infectious but without a virological marker for non-A non-B hepatitis it is of course difficult to be dogmatic. My own policy would be to make minimum concern of this aspect of the problem.

Yours sincerely,

GRO-C

J.M. Trowell
Lecturer in Medicine

5/12/18
*Only now seen a photocopy of this letter.
I have never had alcohol in excess
apart from once. I'd like to see what
the Churchill records show.
I admit I had that one episode
care of excess. No other.
Because of Hep. I have not had
alcohol for many years. I am
tea total.*

** in my cottage in Farnham c1979-80
before moving to Cirencester*