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EKB/EL

12th December, 1972

Sir George Godber, G.C.B., D.M.,
Chief Medical Officer,
Department of Health & Social Security,
Alexander Fleming House,
Elephant & Castle,
LONDON, S.E.1.

By Dr. Walter 27/12

Dear Sir George,

I am taking the liberty of writing to you in my capacity as Chairman of the Haemophilia Centre Directors of the United Kingdom. At its meeting on Friday, 27th October 1972, at the Churchill Hospital, Headington, Oxford, I was instructed to write to you asking if the Department of Health & Social Security would set up an expert committee to consider the supply of therapeutic materials in relation to the treatment of haemophilia and allied disorders.

The most effective materials available for the treatment of haemophilic patients are :-

- (1) Cryoprecipitate
- (2) Frozen-dried Factor VIII concentrate.

The cryoprecipitate is made at the Regional Blood Transfusion Centres, and the quality and amounts of this material vary from one region to another. The freeze-dried material is made at the Blood Products Laboratory at Elstree, at Oxford and at Edinburgh.

The Haemophilia Centre Directors would prefer always to use the freeze-dried product, but only about one-tenth of the required material is at present available in this form. The supply of cryoprecipitate is very variable. The directors of thirteen centres state that the supply is adequate, while the directors of seventeen centres state that their supply is inadequate.

The great shortage of materials is limiting the treatment that can be performed, particularly the introduction of Home Treatment. Recently, the Hyland Laboratories (U.S.A.) and Immuno Laboratories, Austria, have produced preparations of human concentrate. These commercial concentrates are effective and satisfactory to use, but both are more expensive per unit than the present cost of the British Concentrate.

Sir George Godber,
London.

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12.12.72.

The Directors feel that there is an urgent need to increase supplies of Factor VIII Concentrate, in particular of the freeze-dried concentrate. Many feel that if a British preparation cannot be made available very shortly, the commercial preparations should be bought.

If I can supply any further details, please do not hesitate to let me know.

We were all very sad to hear the bad news re Dr W.B. Obank, who proved to be such a good friend to us as a group.

With best wishes,

Yours sincerely,

E.K. Blackburn

P.S. It would be helpful if the Department of Health & Social Security could stimulate the various Regional Hospital Boards and Boards of Governors to provide adequate therapeutic materials for the treatment of Haemophilia and allied disorders, until an adequate supply of freeze-dried concentrate can be provided.

The supply of Christmas Factor concentrate appears to be adequate at the present time.

cc: Dr W.d'A. Maycock, C.B.E., Lister Institute,
Elstree, Herts.

Dr Rosemary Biggs, Research Laboratory,
Oxford Haemophilia Centre, Churchill Hospital,
Headington, Oxford.