

Royal Liverpool University Hospital



PRESCOT STREET LIVERPOOL L7 8XP TEL: 051-706 2000 FAX: 051-706 5806

Your	Ref:	1
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Our Ref:

If telephoning please ask for:

CRMH/TAA

EXT GRO-C

26 October 1993

Professor R Shields Consultant Surgeon RLUH

Dear Professor Shields

William Murphy - dob GRO-C 34

<u> Diagnosis - Severe Haemophilia</u> Cirrhosis of the Liver Portal Hypertension Oesophageal Varices Recurrent Right Inguinal Hernia

You are seeing this gentleman already for intermittent sclerotherapy. His varices are under good control. You also operated on his right inguinal hernia some 18 months to 2 years ago. This has recurred and the patient is wearing a truss, which he says is uncomfortable and does not keep the thing under control, although he is not getting much pain from it.

I would be grateful if you could review the hernia to see either whether further surgery would be of any benefit, or provide him with a more effective truss. Should he require surgery, he would need Factor VIII replacement twice a day for 7 days, and we would almost certainly have to give him cryoprecipitate as well to increase his fibrinogen level, and possibly platelets. I am sure that we would be in a position to correct his haemostatic but it would clearly be more complex than in straightforward severe haemophilia.

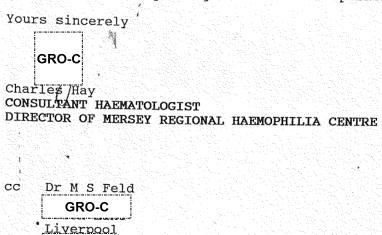
The patient understands the pros and cons of further surgery, and appreciates that further surgery carries a greater risk of

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recurrence than was quoted to him for his original operation, and he is not in fact pushing for a further operation.



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