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## The Royal Free Hospital

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Ref: CAL/cb

18th July 1983

Dr C R Rizza  
Oxford Haemophilia Centre  
Churchill Hospital  
Headington  
Oxford OX3 7LJ

Dear Dr Rizza

Following our telephone conversation today, I thought it would be as well to set out in writing what we are planning to do.

I think the main object of looking at T subsets in your patients would be to firmly establish that low ratios are found in patients who are treated with non commercial concentrate. It would therefore be better to test patients who are severe haemophiliacs with high treatment. It would be nice to look at both haemophilia B and A in order to hopefully confirm our finding that treatment with factor IX concentrate is not associated with abnormalities in immune regulation.

Our technician here feels he can cope with about five or six specimens for process on a Tuesday. He says he is quite happy if they are posted and thus patients can be bled on a Monday and we should receive them on a Tuesday morning. I must say that I am a little dubious about this arrangement but maybe we should just see how it goes to start with. As far as specimens are concerned, we need 10 ml of blood in a Lithium heparin tube on which both ratios and PHA stimulation can be performed. In order to calculate the results we also need a differential white count with an absolute lymphocyte count which I hope you can do your end. I think it would also be helpful if some serum could be stored for future use, either for thymosin assays or possibly viral antibodies etc.

I look forward to receiving the specimens, I think it will be a very valuable contribution to have these results in a population of patients treated with non commercial factor VIII. Thank you for your help.

Yours sincerely

**GRO-C**

Christine A Lee MA MRCP MRCPATH  
Research Senior Registrar