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The Royal Free Hospital

HAEMOPHILIA CENTRE & HAEMOSTASIS UNIT

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PBAK/VHL/

6 March 1987

WERN CAREFY STOYLOW SY

Mr Michael O⁴Driscoll GRO-C London

Dear Mechan

As I am sure you know, a problem of concern for some years has been the transmission of non-A, non-B hepatitis (NANBH) viruses by clotting factor concentrates. Many people with haemophilia have abnormal liver function tests (LFIs) and, although the significance of these abnormalities is not known with certainty, there is a possibility of progressive liver damage due to chronic NANBH infection.

Recent evidence suggests that a newly available drug, interferon, can be beneficial in the treatment of people with possible chronic NANBH, by normalizing LFTs and preventing progression of liver damage. We shall be starting a clinical trial of interferon in the near future, and I wondered whether you would like to participate? The main problem, so far as you are concerned will be the inconvenience of attending for blood tests at frequent intervals. I should also mention that in order to be sure that any benefit is due to interferon, some people included in the study will act as 'controls' - ie not receive interferon - until the value of the drug is proved.

Initially, we shall only be including 10 people with haemophilia in the study, which will be co-ordinated by Dr Elizabeth Miller. If you would like to participate, I should be grateful if you would let either myself or Dr Miller know as soon as possible and in any event before 19 March. In the first instance, I think it would be a good idea for you to make an appointment to see Dr Miller to discuss the study in more depth.

Yours sincerely

GRO-C

P B A Kernoff Director

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