H/H7/15 vol A
42A

AHG PRODUCTION

Mr Brandes 14/3

~~Mr Alexander 17/3~~

Mr Brandes 1202 Hon. Hse 18/3

Dr Hidden 12\3 20/3

Mr Jacobsen

Y/2 hews

Mr Brandes

I understand from Parliamentary that you are already taking action on the attached minute to you from Dr Owen.

Will you please address any reply to me

GRO-C

D618 ext GRO-C

4/3/75

Mr. [illegible]

[illegible] [illegible] [illegible] [illegible]

[illegible] 4/3

H/HT/15/5/A

Mr Alexander

AHG PRODUCTION

Dr Owen's minute below.

GRO-C 17.3.71

1. Immediately after the decision was taken in December last to invest £ .5m of special finance in AHG concentrate production, provisional targets of plasma production were drawn up for each of the 14 Regional Transfusion Centres. These were then circulated to Regional Transfusion Directors and discussed with them at a special meeting on 19 February. The targets have now been revised and we shall be asking Regional Health Authorities next week to indicate the amounts of money required for extra staff, equipment, transport, and adaptation of accommodation. A copy of our draft circular letter is attached (Appendix 1 needs some revision). We shall process these returns as speedily as possible.

2. **The time-table for starting up this programme is** likely to depend on the time taken for:-

(a) delivery and installation of three Sharples centrifuges at Blood Products Laboratory. The quoted delivery period is six months; this is evidently the key factor determining the speed with which we can get on; we shall pursue this to see if we can shorten the period.

(b) adaptation of premises at Regional Transfusion Centres and Blood Products Laboratory; at the latter laboratory recruitment and training of staff may be a problem.

There is a **possible** risk that delivery and installation of certain other items of equipment eg freezers for plastic bags and refrigerated vehicles, may also add to the time taken; this will not be known until information is received from the suppliers.

3. While the equipment is being delivered and any necessary adaptation of premises made, we are assuming that Directors will be successful in persuading clinicians to accept a steadily increasing proportion of blood in the form of concentrated red cells, since this is yet another possible limiting factor. But we are proceeding on the basis of immediate progress once the equipment is working. Meanwhile we can expect that the rate of production of fresh frozen plasma, with existing resources, will continue to increase, which will help marginally in the interval before the planned programme gets under way. NHS production of AHG concentrate increased from 5927 bottles in 1972 to 9624 bottles in 1974.

4./Much

4. Much effort will be required of Regional Transfusion Directors, some of whom may not see eye to eye with their clinical colleagues treating haemophiliacs. For example, some Haemophilia Centre Directors envisage home prophylaxis, whereas the present proposals are based upon home treatment of a bleed when it occurs. Other Haemophilia Centre Directors, apparently, are not fully persuaded of the practicability and value of home treatment.

5. There are therefore several clinical issues involved. But these need not delay the start of increased production. It should be noted (a) that Factor VIII concentrate has not previously been prepared in the NHS on the scale envisaged; this will in itself almost certainly give rise to some problems, and (b) the procedure of fractionation is constantly under review with the purpose of improving the yield of Factor VIII from plasma; at present this is 30-40 per cent.

6. We will report again at the end of next month when we should be able to see which Centres are able to get off the mark quickly and give some estimate of the rate of increase of AHG production.

7. Dr Owen also suggested we might consider issuing a letter to Authorities asking them to view demands for the supply of the commercial material with sympathy. This could cause irritation if conveyed in an official letter. We suggest instead that we might make the point in answer to further PQs, which we are almost certain to get.

GRO-C

L H Brandes
HS2

17 March 1975

cc Dr Raison
Dr Maycock
Dr Waiter
Mr Gidden
Mr Jackson