

5. MINUTES OF THE MEETINGS OF THE SUB-COMMITTEE ON THE CENTRAL LABORATORIES  
HELD ON 24 NOVEMBER 1975 AND 9 FEBRUARY 1976

The part covered does  
not relate to the matter in  
question in this action.

7. FACTOR VIII IN THE TREATMENT OF HAEMOPHILIA

7.1 The Committee were informed that the current target for the production of freeze-dried Factor VIII concentrate by the NBTS was expected to be achieved in mid-1977 as forecast. The Department was now considering the advice of an expert group on the treatment of haemophilia that demand for Factor VIII could, within a few years, become significantly greater than that reflected in the current target. The full implications of this advice were still being assessed, but consideration would be given to the amount of plasma that could be removed from whole blood donations and to the possibility of increased use of plasmapheresis. Meanwhile, purchases of commercially produced Factor VIII concentrate were rising, though the Department remained committed to achieving self-sufficiency in the National Health Service.

7.2 The distribution of all forms of Factor VIII (freeze-dried concentrate and cryoprecipitate) was then discussed by the Committee. Dr Stratton explained the system operating in the North Western Region whereby the Regional Transfusion Director held all stocks of Factor VIII from whatever sources. The RTD and

Directors of Haemophilia Centres agreed on the likely need for Factor VIII over the coming year, and the RHA made an allocation of money to the RTD to be spent on NBTS production or purchases from commercial sources as necessary. Professor J W Stewart thought that the system might well fail in situations where a patient's life was at risk; in such cases the Haemophilia Centre might have to purchase Factor VIII from commercial sources, this being paid for from Area or District funds, thus undermining financial control by the RHA. Professor Scott and Dr J C Stewart supported the North Western Scheme; in the Trent Region, haemophilia services were seen as a Regional responsibility.

7.3 The Chairman said that the Department would carefully consider the comments of the Committee. During the development of production capacity in the NBTS there would be some shortages of Factor VIII, and decisions about rationing supplies were for the clinicians themselves to take. As an extension of the problems encountered in Factor VIII production he suggested that there was a need to review the overall use of blood and blood products, and to examine whether optimal use was being made of the raw material, namely donated blood. The Department would prepare a paper for the next meeting, setting out the information currently available.

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9. CODE OF PRACTICE FOR THE CLINICAL USE OF BLOOD CELL SEPARATORS - PAPER NBTSCC(76)2

The Committee noted the background to the establishment of a Working Party to prepare a code of practice for the clinical use of blood cell separators, and the terms of reference and membership of the Working Party.

10. TESTING FOR HEPATITIS B SURFACE ANTIGEN AND ITS ANTIBODY

During the formal consultation on the draft circular implementing the second report of the Advisory Group on Testing for Hepatitis B Surface Antigen and its Antibody, the Department had received comment which was critical of the proposal to readmit to donor panels persons who had a history of jaundice. Although the Department was anxious to issue the circular, further consideration would be necessary before agreement could be given to what was, in effect, the relaxation of a safety measure.

11. APPOINTMENT OF A PRINCIPAL MEDICAL OFFICER

The Chairman said that the post had been advertised twice but not yet filled. It was considered wise to allow an interval before the Department began again actively seeking to fill the post, but meanwhile he would appreciate hearing personally of any ideas members might have on the appointment.

12. REPORT OF THE WORKING GROUP ON MEDICAL STAFF IN REGIONAL TRANSFUSION CENTRES - PAPER NBTSCG (76)3

12.1 Dr Maycock introduced the report which had been prompted by the view of Regional Transfusion Directors that the consultant medical staffing situation in the NBTS would deteriorate seriously over the next 10 years unless steps were taken to increase the number of such staff coming into the Service. In order to ensure that the Service continued to function as existing staff retired, it would be necessary to appoint a minimum of 23 consultants by 1982.

12.2 Professor Jacobs questioned the belief that it would not be possible for Regional Transfusion Directors to enjoy the same facilities for developing interests in nearby hospitals as those proposed for other consultant staff at centres. He thought this could act as a disincentive to doctors joining the NBTS. The number of training posts in haematology and blood transfusion should be assessed to see if they were sufficient for the Service's needs. The idea that not all the consultant posts in RTCs need be filled by haematologists was generally welcome.

12.3 Anxiety was expressed by the Committee at the apparent low level of recruitment to the Service. The Chairman said that the Department would be studying the report, and the Committee's views would be drawn to the attention of those concerned.

13. REPORT ON THE SOUTH LONDON TRANSFUSION CENTRE - PAPER NBTSCG(76)4

The paper had been circulated to the Committee for information.

14. PROPOSED SYMPOSIUM ON THE CLINICAL DEMAND FOR BLOOD AND BLOOD PRODUCTS - PAPER NBTSCG(76)5

It was suggested that a one day symposium on the demand for blood and blood products, involving "users" and "suppliers", might be useful in identifying some of the future needs and the problems in meeting them. In discussion, two views emerged on the form a symposium might take. One view supported an essentially scientific meeting with papers drawing attention to recent advances; on the other hand, some members saw a need for a meeting aimed at the normal hospital user of blood and blood products, which some suggested could be more appropriately held on a Regional basis. The two views were not mutually exclusive. The Chairman thanked members for the comments and said that the Department would give the matter further thought in the light of the discussion.

15. ANY OTHER BUSINESS

15.1 Wales Professor Jacobs said that he understood the Welsh Transfusion Service to be understaffed and that plans to replace the present unsatisfactory buildings at the Cardiff transfusion centre had been deferred by the Welsh Office. He feared this situation could, if continued, impair the efficiency of the Service. The Chairman said that Professor Jacobs' point would be drawn to the attention of the Welsh Office.

15.2 AMA Guide Professor Jacobs commented that a publication of the American Medical Association, entitled "General Principles of Blood Transfusion", was of considerable merit and he thought a British version would be desirable. Copies of the AMA guide would be circulated to members of the Committee.

16. DATE OF NEXT MEETING

Tuesday 2 November 1976 at 2.15 pm.

DHSS