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HAEMOPHILIA CENTRE & HAEMOSTASIS UNIT Director: Dr Christine A Lee MA MD MRCPath FRCP Fax No: 071 431 8276

CAL/MJ

16 November 1992

Dr Abrams
Chairman
Expert Advisory Group on AIDS
Room 509 Richmond House
79 Whitehall
LONDON SW1 2NS

Dear Dr Abrams

Dr Margaret Johnson has suggested that the matter of high purity factor VIII and earmarked AIDS funds is brought to the attention of your committee. This is a particularly important issue for the Royal Free Hospital where there is a large haemophilic population infected with HIV (90 living, but 40 have died already), as well as Dr Johnson's large non-haemophilic practice.

A letter was sent by Dr Gwenyth Lewis of The AIDS Unit on 19th August 1992 to all regional haemophilia Centre Directors, stating that earmarked AIDS funds should not be used to cover the costs of high purity factor VIII for haemophiliacs who are HIV positive. (attached).

I pointed out in a letter to The British Medical Journal (7 March 1992 - attached) that there is evidence that high purity concentrates slow immunological deterioration in haemophilic patients infected with HIV. These early findings were supported and amplified in a recent symposium 'Immune function in haemophiliacs treated with concentrates of different purity' at the World Federation of Haemophilia meeting in Athens October 12-17 1992. (abstracts attached) The Department of Health directive means that the resources required to meet the recommendations of the UK Haemophilia Directors (copy attached) will be denied to many HIV-infected haemophilic patients.

Treatment with clotting factor concentrate is mandatory for the management of haemophilic patients infected with HIV. It appears that the use of intermediate purity concentrate will reduce the life expectancy for these patients exclusively because of their HIV infection. Hence it seems reasonable that the additional cost of providing optimal treatment for these unfortunate patients is borne by AIDS monies.

119 NOV 1992 6/102 - 2 -Dr Abrams

Dr Gwyneth Lewis' letter is of particular concern in light of the recent judgement involving the French National Blood Transfusion Centre. Professor Robin Carrell, head of Cambridge University's Haematology Department has suggested (Health Service Journal 5 November 1992) that the episode holds a potent lesson for NHS managers 'The defect in my mind - not crime - was the failure of administrators and lower-level politicians to release the resources that were required to meet the recommendations of the health professionals.'

Yours sincerely

GRO-C

Christine A Lee

abrams