

## BLOOD MONEY INTERVIEW NOTES

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Craske wrote paper in Lancet re study of F8 in Bournemouth. Clear proof that concentrate associated with Hep A and more serious Hep B. Lot more information collected by Craske. Adds up to many more cases. Crake to publish data later in the year.

Asked to test first three batches imported into UK by UK distributor for Hemofil. We found evidence that Hep B present in all three. B most serious.

Four different products available in UK. read leaflets. Warnings vary enormously. We went into how Hemofil prepared in US. We thought way prepared ensured Hep B present.

Infection due to produced from large number of donors. i in 500 new donors carrier of Hep B. Nicaragua and US donors for Helpful. Half of British haemophiliacs immune to Hep B because of contracting it in past fro constant transfusions. Much higher in US due to blood products. Possible to use concentrate in US and not produce same outbreak due to higher immunity from past experience of dirty blood. Less immunity by UK haemophiliacs as not so used.

Quite an epidemic of Hep A and B in past 18 months in UK.

Why need to import? Could produce locally and safer. DoH put off due to cost.

Lister Institute to produce F8 by end of year. Have profitable effect on previously severe haemophiliacs. Raw material much better in UK for concentrate.

Baxter said percentage of donors from Nicaragua and percentage of paid US donors from prisons. US paid donors considerably higher rate of carrying Hep. 10x UK volunteer figure. Nicaragua 20x UK rate. UK 2 per 1000 of new donors. Old donors 1 in 14,000. Weed out from panel.

Immuno say West Germany and Austria source of donors. Little higher Hep rate in WG and Austria than UK. Who want cash in WG or Austria? Foreign workers. High carrier rates in Turkey and Yugoslavia. Immune collected blood in Botswana not for F8 but other blood products. F8 process preserves Hep B virus and other viruses.

Hemofil produced from very casual donor plasmapheresis process. Immuno say regular donors weekly. Say test all donors. If as say good system but ?

Testing for Hep B not efficient in either Immuno or Baxter as carried out. Not tested for Hep B at start.

1971 North London BTS 34 cases of post transfusion Hep., many B cases. 1975 two cases so far. Not sure if carried by North London blood products. Both Hep B. No evidence of Hep C.

Moves to upgrade testing by Immuno and Baxter. Hyland say doing already. RIA most sensitive. Should lead to big improvement in detecting virus. Abbott all tested before pooled. All from US. Could be from Puerto Rico. Cutter give one of best warnings. Immuno test final product not good enough.

Radio assaying much more effective/sensitive on initial plasma. Final pool only contain relatively little virus. Not get all virus but most. Virus diluted by pool by 100 or 1000.

