

Centers for Disease Control  
Atlanta, Georgia 30333

July 9, 1982

TO: Mr. Charles Carman, President, The National Hemophilia Foundation

SUBJECT: Pneumocystis Carinii Pneumonia among Patients with Hemophilia

I am writing to inform you that three cases of Pneumocystis carinii pneumonia (PCP) among patients with severe hemophilia A have recently been reported to the Centers for Disease Control (CDC).

One of these men has died, and the other two remain in critical condition. None of the patients showed evidence of underlying disease or had received immuno-suppressive therapy associated with such life-threatening opportunistic infections. In vitro immunologic studies revealed profound dysfunction of cellular immunity. All three patients were heterosexual American white men with no history of intravenous (IV) drug abuse. All three patients had received Factor VIII concentrate frequently for at least the past 5 years. No two of the patients are known to have received concentrate from the same lots.

During the past 12 months, over 440 cases of life-threatening opportunistic infections (primarily PCP) and Kaposi's sarcoma have been reported to the CDC among persons without underlying disease. Most of these cases have occurred among homosexual men, heterosexual men and women who were IV drug abusers, and Haitians who recently entered the United States. Studies of the patients showed evidence of cellular immune dysfunction. Although the cause of this immune dysfunction is unknown, the possibility of a transmissible agent has been suggested, and concern about possible transmission through blood products has been raised.

Additional details on these cases will be published in the Morbidity and Mortality Weekly Report (MMWR) on July 16, 1982. Physicians caring for patients with hemophilia should be alerted to the occurrence of these three cases. CDC is conducting surveillance and gathering additional information to determine the significance of these reports.

Cases of opportunistic infections or suspected acquired immune deficiency should be immediately reported through your State Health Department to CDC. Inquiries and reports should be directed to Bruce Evatt, M.D., Division of Host Factors, Center for Infectious Diseases, CDC, Atlanta, Georgia, 30333 (Telephone: 404-329-3925).

Thank you for your assistance.

GRO-C

William H. Foege, M.D.  
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