

Centers for Disease Control Atlanta, Georgia 30333

July 9, 1982

TO: Ms. Marietta Carr, Alpha Therapeutic Corp.

SUBJECT: Pneumocystis Carinii Pneumonia among Patients with Hemophilia

I am writing to inform you that three cases of <u>Pneumocystis csrinii</u> 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 imminosuppressive therapy associated with such life-threatening opportunistic infections. In vitro imminologic studies revealed profound dysfunction of callular imminity. All three patients were heterosemial 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 Esitians who recently entered the United States. Studies of the patients showed evidence of cellular immine dysfunction. Although the cause of this immine 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 Norbidity and Mortality Weekly Report (MOWR) 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, H.D., Division of Host Factors, Center for Infectious Diseases, CDC, Atlanta, Georgia, 30333 (Telephone: 404-329-3925).

Thank you for your assistance.

GRO-C

AIR 007713

William H. Foege, M.D. Assistant Surgeon General Director

NEGULATORY AFFAIRS

cc: Assistant Secretary for Realth, PBS Commissioner, FDA Director, NIH Regional Offices

001602 annata-