GRO-B

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GRO-B, GLASGOW GRO-B

TELEPHONE: GRO-B

Our Ref.: AFP/MMcA
Your Ref.:
Enquiries to: HAEMATOLOGY DEPARTMENT

19th February 1986

Dr Charles Forbes
University Department of Medicine
Royal Infirmary
Glasgow

Dear Dr Forbes

Re: S GRO-B - H.N. GRO-B - D.O.B: GRO-B 71

S is the younger brother of S2, and like him he suffers from haemophilia with a base line Factor VIII level of 8%.

S was diagnosed in 1977 when he was routinely investigated after his brother S2 had been diagnosed as having haemophilia. He had a few haemorrhagic problems as a child.

He was given Cryoprecipitate for a haematoma of the left thigh in 1981. During that year he also received commercial Factor VIII for a swelling of the left ankle. I also note that he had attended our Day Bed Area in April of 1984 with what appeared to be subsiding angioneurotic oedema. He complained of puffiness of his hands, itch and erythema. At that time there appeared to be no precipitating factors.

We saw S recently in November of 1985 with a haemarthrosis of the left ankle. He was treated with daily Cryoprecipitate 8 units, however, this haemarthrosis was slow to settle and he required Cryo-precipitate daily for 9 days.

He had a recurrent haemarthrosis of the same ankle in early January of this year. This appeared to be precipitated by a fall, during which he twisted his ankle. We again gave him daily Cryoprecipitate, however after his third dose he developed an obvious allergic reaction with facial erythema, conjunctival injection, peri-orbital oedema and blistering on his upper lips. On careful questioning he did confess to having patchy erythema following previous injections of Cryo-precipitate. We therefore on the fourth day of treatment gave him an infusion of DDAVP 16 µg. I am happy to say we obtained a post Factor VIII level of 100%. By this time his haemarthrosis had virtually settled and he had full range of movement.

Contd/

I reviewed S at the clinic on 7.2.86 by which time his ankle appeared completely normal. He had had no other recent problems.

He attends GRO-B where he intends to remain until 5th year, and he participates in most activities apart from gymnastics.

He attends his own dentist regularly and saw Mrs GRO-B annually on 27.11.85. HTLVIII Antibody was negative as was his HBsAg. Full blood count was satisfactory and liver function tests were normal (ALT 30 u/l and AST 17 u/l). X-ray of ankles on 7.2.86 showed "slight thickening" around the left ankle but no bony changes.

S has also attended Professor Mackie in the past for treatment of recurrent wart-like skin lesions. These were thought to be Granuloma Annulare and were treated topically with Demovate.

As S is now 15 years of age, I feel he has out-grown the Paediatric Hospital and I would be very grateful if you could continue his Haemophilia care at the Royal Infirmary.

Kind regards.

Yours sincerely

GRO-C

GRO-B

Clinical Assistant

cc Dr GRO-B, GRO-B

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cc case notes