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GRO-C

23rd May 1994

Professor Sir Robert Shields
Professor in Surgery
RLUH

Dear Professor Shields

RE: William Murphy

GRO-C

Liverpool

GRO-C

Diagnosis - Severe Haemophilia
Cirrhosis of the liver
Herniorrhaphy
Scrotal haematoma

Thank you for your letter. I entirely concur with the decision to manage a scrotal haematoma conservatively, as you obviously appreciate the multifaceted haemostatic defects in this man are inordinately difficult to correct, and there would be a significant risk of recurrence.

When I saw him a fortnight ago, I added in 40 mg of Frusemide every second day to his Amiloride 10 mg a day. His peripheral oedema and his ascites are now significantly less marked, and hopefully his umbilical hernia will be less of a problem. I also note that the scrotal haematoma appears to be softening up somewhat, and will doubtless resolve to some degree over the next few months.

Mr Murphy last had an endoscopy for his oesophageal varices in August of last year, at which time they did not require any further sclerotherapy. At present he has no further appointment for an endoscopy, and I wondered whether he should have a further endoscopy

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CHAIRMAN - MR J. B. FITZPATRICK C.B.E. CHIEF EXECUTIVE - MR MALCOLM F. STAMP



soon. If you agree, I would be grateful if you could send him an appointment, and let us know when he is coming in.

With best wishes.

Yours sincerely

GRO-C

Charles Hay
SENIOR LECTURER IN HAEMATOLOGY
DIRECTOR OF MERSEY REGION HAEMOPHILIA CENTRE

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1/8/94

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