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# Glasgow and West of Scotland Blood Transfusion Service

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RM/HD

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Mr. John G. Watt,
Scientific Director,
SNBTS,
Protein Fractionation Centre,
Ellen's Glen Road,
EDINBURGH.



Dear John,

Factor VIII Supply and Demand

I can never previously remember you writing to me in your own handwriting. I therefore understand the grave anxiety which has prompted you to take this action. I was profoundly saddened by your letter and, in some ways, it is as well that you did not take up the correspondence in the British Medical Journal.

Before I pass on to our letter in specific detail, I can tell you that Dr. Cash was pleased at the tone of our letter and previously had laid on the meeting to talk about dried cryo-precipitate at Headquarters. He has further encouraged the clinical evaluation in this Region and you and he have been well aware of our application to the Medicines Commission for the present trial.

Turning to our letter, I find it impossible to accept that it is critical of the Scottish Fractionation Centre's efforts. The reference to exceeding the capacity of Fractionation Centres to process extra plasma is a reference to the earlier correspondence which appeared in a leading article which was frankly hostile and critical of the British Centres. I need not remind you of the problems of England and we presumed that this was the reference to which the anonymous leader writer referred.

At the time, other correspondence appeared on the value of small pool products in the avoidance of transmissible disease. We presented a short communication to the BMJ which was refused on the grounds that they would prefer to wait until

some clinical data had been assembled. We were, nevertheless, trying to make the case that there still is a need for small pool cryoprecipitate. If we ever develop the dried cryoprecipitate to the extent of stockpiling for clinical use, I can assure you that it will not be an easy decision in view of the forthcoming Trends Report.

We see a considerable advantage, however, in having a dried product rather than a frozen product which can be held at peripheral hospitals without the need for deep freeze storage facilities. Such a product would have a lot better ease of use in our view. We are well aware that any switch to large scale production would inevitably mean some problems of standardisation of the yield. I did not attend the HQ Symposium on Freeze Dried Cryoprecipitate, but I have had a full report from those members of staff who did attend. As well as reporting the positive elements of the meeting, they also reported the negative and critical aspects which I have noted.

I am not aware of any major medical political move to advance any particular individual. As you say, I inherited the problem of dried cryoprecipitate production. I have not impeded its progress since I believe that there is a place for such a product in the day to day management of mild to moderate haemophilia.

We find it strange that the United Kingdom is the only country in Europe which does not have a Dried Cryoprecipitate programme. It may be that you consider the rest of Europe is out of step! As I indicated at the Leeds meeting last week as an aside remark on the proposed clinical trial of frozen platelets, it is somewhat galling to find that even Turkey and Luxembourg are manufacturing freeze dried cryoprecipitate! I have no doubt they are also purchasing commercial concentrate which we in this country are all keen to avoid.

You mentioned a quotation from Louis Pasteur, perhaps I could be excused on this occasion for sending you the enclosed.

Yours sincerely,

Andrew Prince

Regional Director.