



SCOTTISH NATIONAL BLOOD TRANSFUSION SERVICE

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JDC/ZW

11 February 1987

*Mr Chapman.
Previous info please.
ajio/a.*

Mr A J Murray
Scottish Home & Health Department
St Andrew's House
Edinburgh EH1 3DB

Dear Mr Murray

Thank you for your letter of the 5th February 1987 referring to the arrangements that will be made with regard to compensation following significant detached reactions in patients receiving heat-treated Factor VIII concentrates prepared as FFP not as an integral part of their treatment but for efficacy trials purposes.

We are agreeable with the view and would like to take this opportunity of thanking all SHHD colleagues concerned for their efforts on our behalf.

In the light of this development I believe it is important to take the principle of what has been achieved a stage further, to refer to other FFP products that are, and will be, subject to efficacy trials.

At the present time the following products are undergoing clinical trials:-

- (a) Special Albumin Solution for Burns.
- (b) Factor I.V. IgG for idiopathic thrombocytopenic purpura.
- (c) I.V. IgG (anti CMV) for:
 - (i) CMV in renal transplantation.
 - (ii) CMV in bone marrow transplantation.
- (d) I.V. IgG (anti measles) for measles in Irish-born children.

It is anticipated that within the next 18 months further efficacy studies will be required to be established. The candidate products will include:-

- 1. Anti-thrombin III concentrates.
- 2. Factor VII concentrate.
- 3. Fibrin glue preparation.
- 4. Activated factor IX concentrates.
- 5. Human Meas to HSAAb.
- 6. Human Meas to anti CMV.
- 7. Normal I.V. IgG to HIV infected neonates.

Two further points should be emphasised. All the products referred to above would be efficacy trialed on the basis that there was reasonable evidence to believe the product might be of benefit to the patient and thus could be regarded as of potential value in the management of specific illness. Secondly, several trials already established and one yet to emerge will be multicentre in nature and will involve medical teams in Scotland, Wales and Northern Ireland.

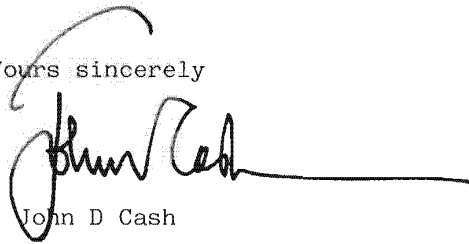
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Mr A J Murray
Scottish Home & Health Department
Edinburgh

I would be most grateful if you would now take up this logical extension of the progress made since December 1986. You might also wish to consult with Duncan McNiven as he will be aware of the particular point made by the haemophilia Directors, with regard to their perceived need for cover during the period a product is being made available for patient treatment on a named patient basis.

Kindest regards.

Yours sincerely

A handwritten signature in black ink, appearing to read 'John D Cash', with a long horizontal line extending to the right.

John D Cash

cc. Dr A MacIntyre
Mr J T Donald (for info.)
Transfusion Directors