

CONSULTANT

GLASGOW ROYAL INFIRMARY  
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ADMITTED 14 10 87	DISCHARGED 16 10 87	WARD 3	AGE 1 5 37	HOSPITAL NUMBER 3181484
DISPOSAL		NAME AND ADDRESS  DAVID BLACK 23 PARK AVENUE BISHOPBRIGGS		
FOLLOW UP				
FINAL DIAGNOSIS AND ANY OTHER COMPLICATING ILLNESS		DISTRIBUTION OF LETTERS  DR ROBERTSON 5 BALMUILDY ROAD BISHOPBRIGGS		
1. OLD MALLORY WEISS TEAR				
2. GRADE I OESOPHAGEAL VARICES		OPERATION		
3.				
4.		CODE		
5.		1.		
6.		2.		
		3.		

Mr Black, a 50 year old severe haemophiliac with factor VIII level of 3% was seen at the Clinic on arrival back from a holiday in the United States of America. He had left Glasgow in mid September to the US after having had a dental extraction which required cryoprecipitate, Penicillin and Tranexamic Acid to control a dental socket bleed. He was well after treatment. Ten days later while in the US he experienced a sudden onset of melaena and tachycardia together with sweating and tiredness. He was admitted to Fort Pierce Hospital in Florida. He was found to have a haemoglobin of 5.6 gm/dl and a BP of 210/70. His pulse was 86 beats per minute - regular and temperature 98.4 F. Upper GI endoscopy done then showed Grade I oesophageal varices together with the presence of duodenal polyps, no source of active bleeding was seen. Colonoscopy, brain scan, CAT scan of abdomen and pelvis did not show any abnormality. He was provided with 6 units of packed cells and 23 units of cryoprecipitate which stopped his melaena and his haemoglobin returned to 11.3 gm/dl. He however, sustained a further episode of melaena on 11 October 1987 for which he received 1600 units of Factor VIII and his melaena stopped. He has not experienced any further episodes of melaena since. There was no history of any alcohol ingestion or non-steroidal anti-inflammatory drugs. He is a non-smoker and lives with his wife.

On examination he looked well and was not in distress. He was afebrile and his palmar creases were pale but his conjunctiva were injected. There was no lymphadenopathy or hand lesions. His BP was 110/70 and his pulse was 80 beats per minute - regular. His precordium and chest were normal. His abdomen was soft with no masses or organomegaly. Bowel sounds were present.

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Mr Black's haemoglobin was found to be 13 gm/dl, white cell count of  $4.1 \times 10^9/l$  and platelets of  $158 \times 10^9/l$ . His urea and electrolytes were normal. His base line factor VIII level was 1% and a post-transfusion of 2,000 units of Cryoprecipitate was 120%. An endoscopy was arranged which showed 2 grade I varices at the lower oesophagus and an old mallory weiss scar at the gastro-oesophageal junction. No active bleeding was found. There was a polypoidal swelling in the superior inferior aspect of the duodenum but no other abnormalities were detected. VChest x-ray was normal. A liver and spleen scan was obtained but the results are now awaited. Mr Black remained asymptomatic and had no further melaena. He was discharged from our care on a prescription of Ferrous Sulphate, 200 mgs tds, Hydroxide, 10 mls qds and Cimetidine, 400 mgs bd. We will review him in the Haemophilia Clinic in about 6 weeks time.

L SOO  
SENIOR HOUSE OFFICER

GENERAL PRACTITIONERS NAME and ADDRESS

Dr Robertson  
 5 Balmuildy Road  
 BISHOPBRIGGS