THE ROYAL INFIRMARY
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CHIEF EXECUTIVE

SCOTTISH LIVER TRANSPLANT UNIT Tel: 0131 536 1620, Fax: 0131 536 1520 Email: SLTU@compuserve.com

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KD/CJC

16/02/1999

Dictated Date 15/02/1999

Dear Dr Murie

MR DAVID BLACK DOB 01/05/1937 Unit No. 0105371564

1 ST TEILING LANARK ML11 7HY
Attended: 11/02/1999 Consultant: Dr K Simpson TRANSPLANT SURGERY

DIAGNOSIS -

- 1. Liver transplant for hepatitis C cirrhosis April 1996
- 2. Previous haemophilia
- 3. Abnormal liver function tests, recurrence of hepatitis C

I reviewed your patient in the liver transplant out patient clinic. Reverend Black reported no problems regarding his liver disease. He was informed that his liver biopsy showed recurrence of hepatitis C and that we would probably consider ating him for hepatitis C. He himself was not quite sure if that would be the toption for him at this present time as he felt that the side effects of interferon would be too much for him. He agreed though to have an appointment with our hepatitis C team which will help discuss the options with him.

On examination - weight 100 kg, blood pressure 105/65. Abdominal examination revealed no abnormalities.

Routine bloods were checked and they showed a normal full blood count, normal urea, creatinine and electrolytes. Bilirubin 14, ALT 143, GGT 66, alk phos 68, albumin 41. Tacrolimus level was satisfactory at 6.

Reverend Black is keeping quite well at this point. He will be reviewed by the Hepatitis C team and will have an ultrasound scan and alpha feta protein checked at that time.

We plan to review him again in the liver transplant out patient clinic in two





MR DAVID BLACK 01/05/1937 Unit No. 0105371564 1 ST TEILING LANARK ML11 7HY

months' time.

Yours sincerely

Maray

Dr K Dabos Locum Lecturer to Dr K Simpson

Copy to: Dr J MacKenzie, Consultant Physician, Professor Lowe,

Royal Infirmary

GLASGOW

Dr R Herd, Cons. Dermatologist Law Hospital, CARLUKE. Dr Ludlam, Cons Haematologist, RIE