

5/10/04

Royal Infirmary of Edinburgh

51 Little France Crescent, Old Dalkeith Road, Edinburgh, EH16 4SA. Telephone: 0131 242 1000

To: DR RR JAMIESON
BRIDGETON HEALTH CENTRE
201 ABERCROMBY STREET
GLASGOW

Admission date: 14/09/2004
Discharge date: 15/09/2004
Consultant: Dr K Simpson

Ward: SLTU

Our reference: AR/CJC

G40 2DA

Name: **VICTOR TAMBURRINI**

Number: 620109706M

Address: 284E LONDON ROAD
GLASGOW
G40 1PT

CHI no:
D.O.B.: 27/04/1957

LIVER /
ICD LSA 1200990000

No Complications

20 September 2004

DIAGNOSIS -

1. Hepatitis C and alcohol induced cirrhosis requiring transplant - 2002
2. Recurrent hepatitis C with graft failure and retransplant February 2004
3. Fibrosing cholestatic hepatitis in current graft
4. Re-fashioning of entero-enterostomy February 2004
5. On hepatitis C therapy

MEDICATIONS -

Tacrolimus 0.5 mg bd, Erythropoietin, GCSF, Ribavirin, pegylated Interferon

Mr Tamburrini was admitted electively on the 14th September for abdominal ultrasound and liver biopsy. He had been on optimum doses of pegylated Interferon (180 ug weekly) and Ribavirin (1000 mg daily) for around one month now with GCSF and Epo support. He has been tolerating this therapy well although requires blood transfusion every two to three weeks.

Liver ultrasound was performed which was unable to detect flow in the portal vein but also reported a 2 x 2 x 0.6 cm cystic collection in the left lobe of the liver as well as splenomegaly and moderate ascites. Liver biopsy was performed without complication.

He required blood transfusion of 2 units prior to discharge as his Hb had fallen to 69.

An HCV RNA titre was sent prior to discharge but neither this result nor the liver

biopsy were available at the time of discharge.

He will be reviewed with these results in the clinic.

Yours sincerely

ALEX RODGERS
() SPECIALIST REGISTRAR to Dr K Simpson

Copy to: Dr A Stanley
Consultant Physician
Royal Infirmary
GLASGOW