F.A.O CAROLLIN,

DEPARTMENT OF GASTROENTEROLOGY

Consultant: Dr A J Stanley

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AJS/EH/439157 14 February 2002

Dr Ken Simpson
Consultant Physician
Liver Transplant Unit
Royal Infirmary of Edinburgh
Laurieston Place
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Dear Ken

VICTOR TAMBURRINI, D.O.B. 27.4.57. 284E LONDON ROAD, GLASGOW G40 1PT

Further to our telephone call, I would be grateful if you could review this 44 year old gentleman who was referred initially to me in November having been found to be Hepatitic C PCR positive with no obvious risk factors (he had a blood transfusion only in 1999). He has drunk alcohol to excess but has been abstinent for three months with good social support. The concern is that his alphafetoprotein was 156 in October then 366 on the 17th December, 449 on the 21st January and 535 on the 4th February this year. He has had two ultrasound scans, an MRI scan and a contrast CT scan, all of which reveal established liver cirrhosis with varices and no splenomegaly with two stones in the gall bladder only. In particular, no scan has shown any evidence of an underlying hepatoma. He has mild ascites and has poor synthetic function with an albumin of 24 and prothrombin time 20 seconds. Recent bilirubin was 60 with an AIT 137. Hepatitis B surface antigen is negative and auto-antibodies were all negative and he had a normal ferritin.

He awaits an imminent endoscopy for screening for varices and is obviously concerned regarding his condition and we have explained the reasons why he has been referred to yourself. Currently he takes Frusemide 40 mgs and Spironolactone 100 mgs daily.

His telephone number is 0141 564 3889.

Kind regards and thanks for your help.

Yours sincerely

A J Stanley Consultant Physician & Gastroenterologist

cc Sister Margaret Neilson, Ward 32