SCOTTISH NATIONAL BLOOD TRANSFUSION SERVICE
Headquarters Unit
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PROTEIN FRACTIONATION CENTRE
Received: 19 DEC 1984

Scottish Haemophilia Direc-
ors

SNBTS Heat Treated Factor VIII

I'm pleased to inform you that within the next day or so you will be receiving supplies of our first generation heat treated factor VIII. This will be the start of a complete changeover from the non heat treated product.

We are extremely anxious to obtain your collaboration with regard to examining certain aspects of its efficacy, aspects which we would normally have wished to have done prior to widespread release of a product, and are important with regard to obtaining licence variations and the development of future products.

Specifically, I would be most grateful if you would undertake the following, where practically possible:

(a) Clinical Efficacy
It would be extremely helpful if you keep a note on any evidence which demonstrates the product controls (arrests) bleeding. I will write in 3 months' time to obtain a very brief summary from you.

(b) HTLV-3 Antibody
Experts have advised us that we should try and obtain serial (2 ml serum) samples on patients who start heat treated product (particularly if they are HTLV-3 antibody negative). Ideally they should be obtained at monthly intervals if possible. What we are looking for is evidence of sero-conversion. At least 2 of our Centres have made informal arrangements to obtain limited access to HTLV-3 antibody tests. We know that the laboratory concerned (Middlesex Hospital) is almost overwhelmed. At the present time, for those Haemophilia Centres who have not made arrangements for HTLV-3 antibody testing, I would suggest that your serial samples are stored at -20°C.

I am sure you will appreciate that it is absolutely vital that we all know as soon as possible if our heat treatment is not effective.
17 December 1984

(c) Neo antigens
It would be of considerable advantage if 1ml (serum) samples (collected at approximately monthly intervals also) were retained for future studies designed to see if the patients developed antibodies to "foreign" proteins.

Many thanks for your help.

Kindest regards,

Yours sincerely,

John D Cash.

(Dictated by Dr Cash and signed in his absence)

Copy to:  Dr W Whitrow
          Dr S J Urbaniak
          Dr E Brookes
          Dr D B L McClelland
          Dr R Mitchell
          Dr R J Perry

          Dr A E Bell