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Written Answer
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FACTOR VIII

- 94 Mr Lewis Carter-Jones (Eccles): To ask the Secretary of State for Social Services, how many units of Factor VIII have been used by the National Health Service for the treatment of haemophilic patients in the last year for which figures are available; what is her estimate of the annual requirement of Factor VIII for such treatment; what is her estimate of the annual cost of providing sufficient Factor VIII for the treatment of haemophiliacs as and when they require it; and if she will make a statement.
- 96 Mr Lewis Carter-Jones (Eccles): To ask the Secretary of State for Social Services, what assistance she is giving to regional health authorities to purchase sufficient supplies of Factor VIII; and if she will make a statement.
- 105 Mr Lewis Carter-Jones (Eccles): To ask the Secretary of State for Social Services, how many units of Factor VIII are manufactured annually in the United Kingdom; how much money she has allocated to boosting production as announced in the reply to the honourable Member for Islington South and Finsbury on 22nd January; and if she will make a further statement.

DR DAVID OWEN

As the yield of Factor VIII from blood donations varies significantly it is not possible to give the information requested in terms of units, but I am advised that it is necessary to process 375,000 blood donations annually in England and Wales for the preparation of Factor VIII, of which 275,000 donations should be for anti-haemophilic globulin (AHG) concentrate and 100,000 for cryoprecipitate. In 1974 about 64,000 donations were used to prepare AHG concentrate and approximately 221,000 to prepare cryoprecipitate.

Under arrangements centrally negotiated by my Department, Health Authorities spent £412,000 on the purchase of commercially imported AHG concentrate between November 1973 and January 1975.

It is estimated that it would cost £1.5m to £2m annually to purchase enough commercial AHG concentrate to supplement present NHS supplies. In deciding on the amount to be devoted to the purchase of AHG concentrate, Health Authorities have to take into account other demands on their limited resources which also claim priority. They are in a position to make an assessment of individual cases, and to take account of the costs of not providing AHG concentrate as opposed to cryoprecipitate, these judgments are difficult enough to make locally, they are very hard to make centrally.

As I told my hon Friend the Member for Sowerby on 17 February, I have authorised the allocation of special finance of up to £0.5m (about half of which would be recurring) to increase the existing production of AHG concentrate within the National Health Service with the aim of the NHS becoming self sufficient as soon as possible.