

Portsmouth Pathology Service



Haematology Department
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Clinic date: 26.1.00
 Typing date: 27.1.00

Dr. Knapman,
 The Surgery,
 148 Forton Road,
 GOSPORT,
 Hants.

Dear Dr. Knapman,

Re: Norma WINDSOR, Code A
Code A

Diagnosis: CLL
 Ischaemic heart disease

Let me start by saying the bone marrow we did a couple of weeks ago shows quite an infiltration of the marrow with lymphoma and cytogenetics indicate that this is in all probability a follicular lymphoma i.e. one that should respond quite nicely to low doses of Chlorambucil. In the past I thought this lady was allergic to Chlorambucil but I have a letter from Dr. John Cook saying that he does not think this is so. When the moment comes I think that is the drug I will use.

On no treatment her breathing has improved. She has no cough and produces no sputum. What she complains of most is that on the least exertion she runs completely out of energy. The blood transfusion we gave her should have corrected her anaemia up to about 12.0 g/dl, made absolutely no difference whatsoever. The iron that she has been on for the last few weeks has equally done no good. She complains that this frustrating tiredness started in November and after appalling diarrhoea which she describes having taken place a month or so previously. I am tempted to think that the diarrhoea may have been viral in origin and therefore speculate that her tiredness is really post viral fatigue. I think it would be dangerous to draw this conclusion without further investigation of her GI tract and she is to see Dr. Duncan in the very near future. So far as treatment goes, I was thinking of starting her on treatment for the lymphoma today but frankly I do not think that is such a good idea. What was causing me to think of starting treatment was her falling haemoglobin but in fact that has been accompanied by a rising platelet count, last time it was roundabout $600 \times 10^9/l$ and I really do not think you can have a compromised marrow that is capable of producing that level of platelets. We have therefore to discover why she is anaemic, I suspect that she may well be bleeding and with any luck Dr. Duncan will tell us where from. Her other worry is her heart operation, what Southampton will do when they see her current state. I told her that I suspect that due to the flu epidemic her heart operation will be delayed by some months during which time I hope her general state improves. Her other question to me was could this tiredness be due to her heart and in the absence of any signs of heart failure I thought on balance probably not. I have sent in chain a whole series of tests and she is going to pop back and see me in three weeks' time.

Yours sincerely,

Code A

Code A

Code A

DR. P.J. GREEN
 Consultant Haematologist

Notes Please	
Send Appointment	
Is Patient Satisfactory	
Show H.V.	
Show Drs.	
Show Practice Nurse	