Dr. John Beattie, Director Bernhard Baron Research Laboratories Royal College of Surgeons of England Lincoln's Inn Fields London, W.C. 2

Dear Dr. Beattie:

To date there have been 14,047 appointments for donations in the nine hospitals now associated in this work collecting blood for transshipment to England in the form of diluted Plasma. Approximately 11,000 - 500cc donations have been taken and processed. By the middle of January we hope to have collected blood from 20,000 donors. A step-up in publicity is under way at this time.

According to our latest information from Sir Edward Mellanby, if the present rate of shipment of Plasma is continued until about the first of February, the set-up in England will be functioning smoothly enough to take care of all your needs. We realize that this is an assumption based on observations which may change at any minute and we therefore are prepared to continue to ship Plasma as long as there is a need.

Requests have come in from many cities all over the United States to assist in this work. It has been felt that until the routines are more thoroughly worked out and final decisions have been made concerning the type of container, the antiseptic of choice, the merits and demerits of Plasma vs. Serum, and the advisability of drying the final product, that the work should remain localized in this vicinity where it can be more adequately supervised.

Should the needs greatly increase I think that it would be able to swing into operation in a period of about six weeks in at least three major cities. Until there is some indication that this is necessary we shall continue at the present rate. At the same time, devoting a lot of energy to the solving of some of the problems which have arisen in attempt-

ing such mass handling of blood. Late growth has shown up in pools which have shown negative cultures for one month. This is particularly discomforting. The drying of the material may be a way to get around this problem.

If the knowledge of the methods of preparing pyrogen-free water is no better in some of the outlying districts of Great Britain than it is in the United States, the problem of supplying such water for reconstituting dry plasma or serum would I think be a very real one.

When one considers the matter of supplying plasma to an army on the march in a territory such as that in which the Greeks are fighting, the question of the final form of the blood substitute becomes even more difficult to adequately answer.

This whole process has many more angles to it than was at first suspected. The methods used in a hospital for a blood bank simply do not fill the needs of a factory-sized job such as this one. But, with all that we feel now that the work is going along very smoothly and the number of contaminated pools markedly reduced. We should of course like to see them disappear entirely but we know that even in the best bacteriological laboratories where the personnel has been serving for many years and where methods are very refined a certain percentage of material is constantly contaminated. Some of the hospitals have had phenomenal records as regards this point. One in particular has taken approximately 2,000 donors with a loss through contaminations of only 0.14%.

I am including with this letter the minutes of three of our recent meetings to give you some insight into the progress and problems of this particular group.

We are working in close cooperation with the National Research Council, the Army and Navy of this country, and with similar agencies in Canada so that any information which might come to one is immediately transmitted to the other groups interested in this work.

Interest remains high. Everyone seems to want to help and help in an increasingly vigorous manner.

Reports as we get them on this side seem much more optimistic as regards the eventual outcome of this scrap. Continued good luck to you.

Very sincerely yours,

BLOOD PLASMA DIVISION Charles R. Drew Medical Superviser