Dear Sir,

We have read with interest the recent publication of Aygören-Pürsün et al. (1) in which they ascribe 5 seroconversions for human parvovirus B19, among 16 previously untreated and susceptible persons receiving recombinant factor VIII, to possible B19 contamination of the albumin excipient.

A more likely explanation, in the absence of a close temporal association with infusion of a particular product batch, is that this just represents community-acquired infection of this endemic virus, particularly in a group of young age. We have suggested this previously (2-4) and such an explanation would also be supported by a study we performed in 1995 showing similar age dependence of B19 seroprevalence in the Scottish population and Scots persons with haemophilia (Fig. 1), and by other studies that include an appropriate control group, such as that of Williams et al. (5).

Yours sincerely,


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Fig. 1 Seroprevalence of IgG antibody to human parvovirus B19 in the Scottish normal and haemophilic population, 1995. Samples (1036 normals, 143 haemophiliacs) were assayed using the Biotrin ELISA for IgG to B19. Clearance to obtain samples for this purpose was obtained from the appropriate local ethical committee for control children, blood donors and persons with haemophilia respectively. The higher prevalence in very young children is ascribed to passive maternal antibody transfer.

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