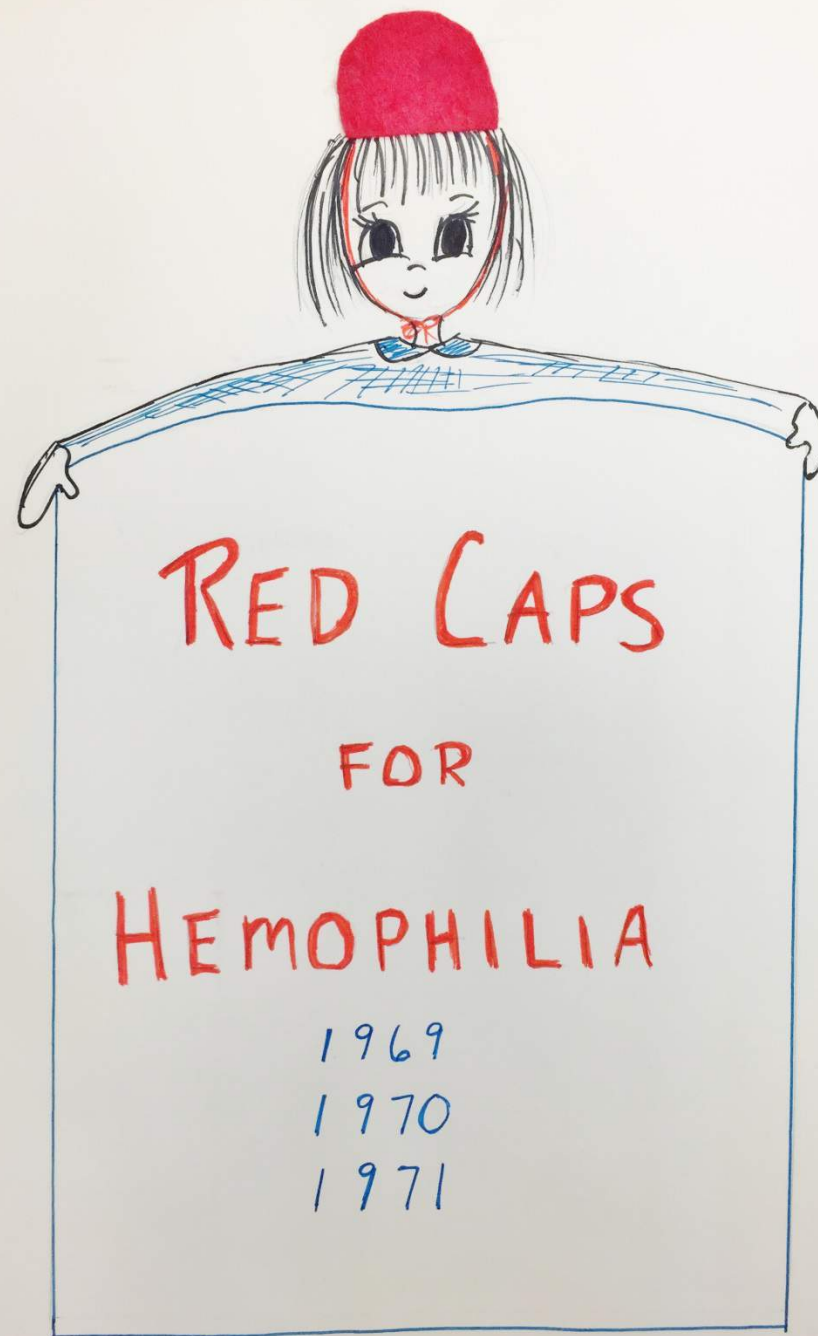


Red Caps for Hemophilia Scrapbook 1969 – 1971

A Fundraising Organization for the
Minnesota Chapter of the National Hemophilia Foundation



RED CAPS

FOR

HEMOPHILIA

1969

1970

1971

Hemophilia Is Incurable

Red Caps Hold Out Helping Hands

By TINA FITZMAURICE

A simple tooth extraction becomes major surgery, an insignificant bump results in crippling pain and a long walk on a pleasant day can be fatal if you are a hemophiliac.

Learning about the incurable disease and research efforts to find a blood coagulant or clotting substance are members of the Red Caps.

At a recent membership meeting the Red Caps viewed a film depicting a hemophiliac's life from childhood to adulthood. Heightening the film's dramatic impact was Mrs. Richard Mooney, Minneapolis, president of the Minnesota Chapter of the

National Hemophilia Foundation and mother of a 17-year-old hemophiliac.

HEMOPHILIA is a disease in which bleeding can start spontaneously or from a small cut or bruise and cannot be stopped without professional treatment.

"Only another person's blood with the needed clotting factor will stop a hemophiliac's bleeding," says Mrs. Mooney.

Cases of hemophilia in women are rare, but possible, explain Mrs. Mooney. She says the disease is transmitted by the mother to her sons. It can skip as many as seven generations before reappearing.

Any woman who be-

lieves there may have been a hemophiliac in her family history should be tested to determine if she is a carrier of the disease. Mrs. Mooney says such tests are simple — only a blood sample is required — and are conducted at the University of Minnesota Hospitals.

How do you raise a son who is a hemophiliac? How do you manage to reduce the danger of bleeding from minor cuts, bruises, running, jumping or perhaps a sock with too tight elastic binding his leg? Things that are minor episodes in a normal person's life may be fatal to the life of a hemophiliac.

"**YOU GUARD** against being overly protective," says Mrs. Mooney. "And you take heart in the fact that you know hemophiliacs can live to adulthood and lead productive lives."

She quietly adds that internal bleeding is terribly painful.

The high cost of hospitalization and blood transfusions have been slightly reduced by use of a blood concentrate — rich in the clotting factor a hemophiliac's system lacks.

She tells, too, of the financial drain the disease is for families with more than one hemophiliac and even for families who only have only one hemophiliac child.

RESEARCH in hemophilia is continuing says Mrs. Mooney. "We know for certain that coagulant or factor A is manufactured in a person's spleen, liver and bone marrow and in at least eight places in the body. But so far, medical science has not found an answer to hemophilia treatment — other than massive and frequent blood transfusions."

Young as it was last year, the Red Caps managed to raise over \$1200 for hemophilia research.

ORGANIZED by a group of suburban women who said they had free time and lots of energy, the group found that the National Hemophilia Foundation also offered them a chance to use their creativity.

"We were searching for an organization that would give us an opportunity to plan fund-raising campaigns and would let us use our initiative in finding ways to benefit the organization. The Minnesota Chapter of the National Hemophilia Foundation was the answer," says Mrs. David Schore of Minnetonka, immediate past president of the Red Caps.

THE GROUP meets the third Tuesday of every month from 8 to 10:30 p.m. at a member's home. Dues are \$5.00 per year. Benefits to the community are many.

SUN
NEWSPAPER'S
WRITE-UP
ON
MEMBERSHIP
TEA



PLANNERS

Discussing Red Caps' goals are the Mmes. Stewart Moss, Jew Hope (left); Randy Engel and Stewart Moss, both from St. Louis Park and both seated and Mrs. Robert Wernick, Hopkins.



AFTER THE SHOW

Discussing the film on hemophilia shown at the membership meeting are the Mmes. Robert Hendrix, Edina (left); Donald Spector, St. Louis Park, Red Caps' treasurer and Mrs. Arnold Schribman, St. Louis Park.

-----Name Here-----of the



RED

CAPS

FOR

HEMOPHILIA

Invites you to a membership tea

Wednesday

August 27, 1969

2:00 to 4:00 PM

At the home of

Mrs. Judy Schwartz

2619 Kipling

St. Louis Park

R.S.V.P.

Judy Schwartz

922-5742

L to R

MRS. W. SMITH
SECRETARY

MRS. R. MOONEY

MRS. J. FOWLER

PRESIDENT & VICE PRESIDENT
ON MINNESOTA CHAPTER OF
THE NATIONAL HEMOPHILIA
FOUNDATION





L to R

MRS. D. SCHORE
IMMEDIATE PAST
PRESIDENT

MRS. T. CARLSON
PRESIDENT

MRS. G. SCHWARTZ
VICE PRESIDENT

TRINKET SALE

APACHE PLAZA

NOV 14-15 1969
(PROFIT \$270.54)



UP and COMING EVENTS

especially for women

RED CAPS

The Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. David Schore, 9708 Sandra Lane, Minnetonka. Plans for a Trinket Sale Nov. 14 and 15 at Apache Plaza will be finalized. New members are welcome to the meeting.

Red Caps Set Sale of Trinkets

The Red Caps for Hemophilia will hold a bazaar and trinket sale Friday from 9 a.m. to 9 p.m. and Saturday from 9 a.m. to 5 p.m. at Apache Plaza.

Items for sale include decorated baskets, beads, canister sets, paper and pine cone flowers and Christmas accessories. Proceeds will go to the Minnesota Foundation for Hemophilia.

Red Caps For Hemophilia bazaar — 9 a.m. to 9 p.m. Friday and 9 a.m. to 5 p.m. Saturday, Apache Plaza, St. Anthony.

Thurs., Nov. 13, 1969



BAZAAR BOUND are flowers, wreaths, Christmas decorations and trinkets—proceeds from which will be donated to the Minnesota Foundation for Hemophilia. Members of Red Caps for Hemophilia readying items for the sale are the Mes. Stewart Moss, New Hope (left); Robert Wernick, Hopkins; Arvid Prickett, St. Louis Park and Charles Ulven, Minnetonka. The sale is set from 9 a.m. to 9 p.m. Friday and from 9 a.m. to 5 p.m. Saturday at Apache Plaza.

POSTER BOY

NOV 19, 1969



United Press International

POSTER BOY — Timothy James Bakarich of Portland, Ore., the poster boy of the National Hemophilia Foundation, called at the White House Tuesday in connection with a fund-raising drive and received a hug from Mrs. Pat Nixon. Timothy is one of 100,000 youngsters and adults suffering from hemophilia — the absence of the clotting factor in the blood, which leads to bleeding episodes resulting in crippling and sometimes in death.

OTHER EVENTS

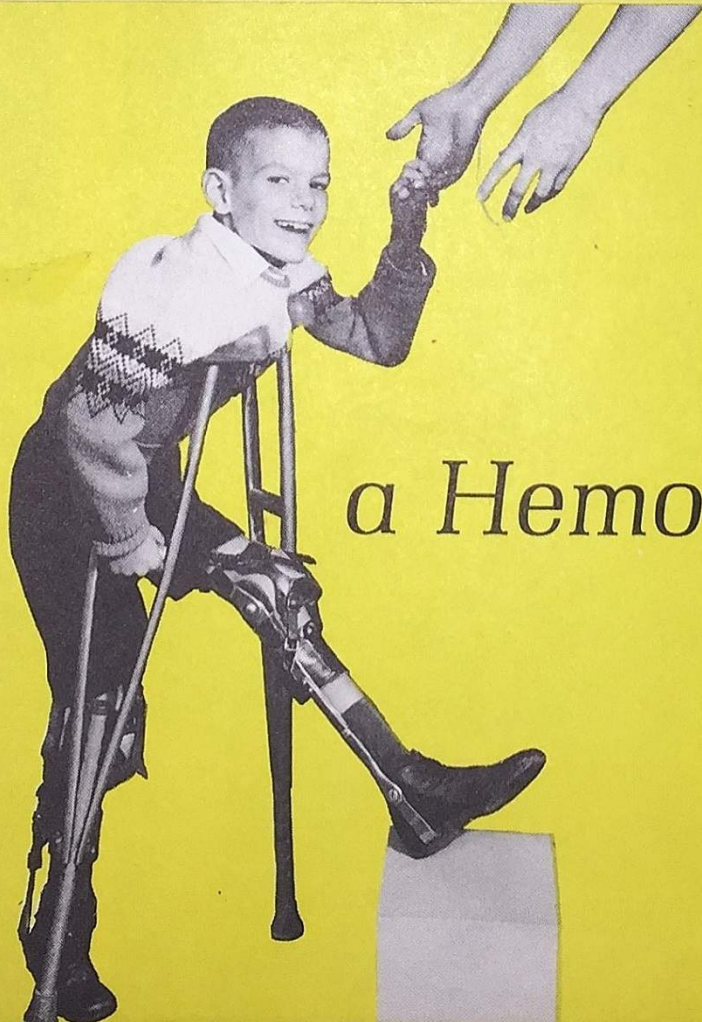
1969 AND 1970

I SOLD CHRISTMAS CARDS
PROFIT \$352.33

II WINONA RESEARCH
(MEMBERS SAMPLE VARIOUS
FOOD PRODUCTS - EACH
MEMBER RECEIVES A FEE
WHICH IS DONATED TO
THE HEMOPHILIA FOUNDATION
PROFIT (1969-1970) \$103.75

WHAT DO YOU KNOW ABOUT HEMOPHILIA

your help



a Hemophiliac's hope...

Mrs. Richard Mooney
3208 Edmund Blvd
Minneapolis, MN

THE FAMILY BLOOD PLAN



Minneapolis War Memorial
Blood Bank

THE FAMILY BLOOD PLAN

The Blood Bank's Family Blood Plan assures the blood needs of your family. There is no limit to the amount of blood that can be used. No cost to join. A full year's coverage is provided by making one blood donation.

WHO IS INCLUDED?

You and your immediate family: husband, wife, all dependent unmarried children under age 19, including babies born during membership period.

WHAT ARE THE BENEFITS?

The Plan provides unlimited blood coverage to any qualified member. You would not be faced with the need to provide replacement donors nor would you be required to pay the non-replacement fee. Without such coverage you could find your blood debt to be a serious personal and financial problem.

WHERE IS COVERAGE AVAILABLE?

Your family's blood needs would be met in any Hennepin County hospital. In addition, the Plan will provide blood replacement on a pint for pint basis to any hospital or blood bank in the United States that will accept credit through the American Association of Blood Banks Clearinghouse Program. If you or a member of your family need blood, just call the Blood Bank 338-0643; give us the complete details and we will make the necessary arrangements.

LIMITATIONS

Benefits of the Plan are not available for transfusions resulting from any of the following diseases or conditions known to have existed on the date of application for membership: hemophilia, leukemia, aplastic anemia, ulcers, cancer, congenital defects, or transfusion during the first year of membership for surgical correction of acquired heart lesions.

The Plan does not cover Blood Bank or hospital laboratory service fees or charges for administration of a blood transfusion. Charges payable by Workmen's Compensation are excluded.

RENEWAL AND SUBSTITUTE DONOR

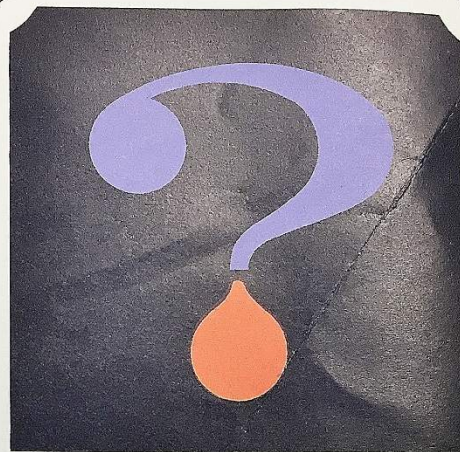
Your coverage can be renewed by a blood donation at the end of the Plan year. Renewal notices are mailed 30 days prior to the Plan's termination date. In the event no family member is medically qualified to donate, a substitute donor may establish or renew membership for the family.

REMEMBER

There is no substitute for blood. Your membership in the Family Blood Plan will help make certain that a continuing supply of blood is always available.

Provide for your family's blood needs. Join the Family Plan — NOW.

SUPPLY, DEMAND AND HUMAN LIFE



WILL BLOOD BE AVAILABLE WHEN YOU NEED IT?

The next person to need blood could be you! You may use 20 pints. You may use two. Regardless, your need is just as great.

If you believe that your immediate need for blood is remote, consider that each and every day more than 13,000 units of blood are transfused in the United States—nearly 6,000,000 units per year.

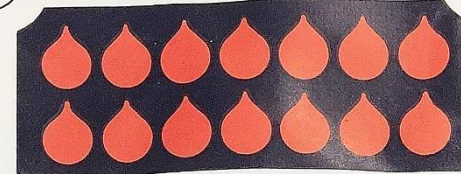
The demand for blood increases, yet it is estimated that the annual blood requirements of the nation are provided by less than 3% of the eligible donor population of the United States—approximately 3,000,000 donors.

The nature of blood is such that it must be transfused in its whole state within 21 days after being drawn, and the blood given to a patient must be compatible with his own blood group and type.

Unless more people become donors, the supply will not keep pace with the growing demand for blood. Someday your life may depend on its availability.

To assure that blood will be there when you need it, give blood now and encourage others to become voluntary blood donors.

Artist Charles Lewis uses the symbol of a patient's outstretched arm seeking life-saving blood to depict the great need throughout the United States for more voluntary blood donors.



BLOOD BANKS

A blood bank is a medical facility which draws, processes, stores and distributes human whole blood and its derivatives. Some blood banks also perform other services and administer blood transfusions.

Hospital blood banks are self-operated and function primarily to meet the blood needs of their own patients. Many hospital banks depend on other facilities to supplement their blood supplies.

Community blood banks are usually locally organized and operated to serve the blood needs of a majority or all hospitals in a community.

Most hospital and community banks are members of the American Association of Blood Banks. These banks supply about half of the blood used each year in the United States. The other half comes from regional blood centers of the American National Red Cross. A very small percentage of blood is supplied by commercial banks which are privately owned. With the exception of the latter, most blood banks are nonprofit and depend primarily on voluntary blood donors.

Through a National Clearinghouse Program of the American Association of Blood Banks and a reciprocal agreement between the AABB and the American National Red Cross, banks can exchange supplies from one area to another to balance blood surpluses or shortages. The clearinghouse program also enables a blood donor to replace blood for a patient receiving a transfusion in most any area of the country. For example, you can donate a unit of blood in Hawaii for someone undergoing surgery in New York and have the credit transferred through the program to the patient's account.

These facilities operate to protect you against the unexpected. Support your local bank by giving blood.

SUPPLY,
DEMAND
AND
HUMAN
LIFE



THE VOLUNTARY DONOR

You cannot put a price tag on the life of someone you love. Money, the best medical skills and all the newest, most spectacular drugs often are not enough to save a life without the gift of blood which can only come from another human being.

Most banks obtain blood from persons who give voluntarily to replace blood used by a relative or friend, to establish protection against future blood needs for themselves and their families, or to fulfill a community responsibility. Some banks also obtain blood from paid donors. A few banks sponsor plans which provide future blood protection for an annual blood donation or cash premium. Cash payments, however, cannot assure a safe, adequate and economical supply. **Therefore, the voluntary blood donor is still considered the backbone of blood banking today.**

The following organizations know the importance of voluntary donations and urge healthy people to be blood donors:

American Association of Blood Banks
American Hospital Association
American Medical Association
American National Red Cross
Blue Cross Association
Health Insurance Council
National Association of Blue Shield Plans
Public Health Service, U. S. Department of
Health, Education and Welfare

WHAT IS BLOOD AND WHY IS IT SO IMPORTANT?

Blood can do wonderful things. It is composed of trillions of tiny cells suspended in a watery fluid called plasma. Red cells carry oxygen from the lungs to all parts of the body. White cells fight off disease and infection. Platelets help blood to clot when bleeding occurs. The plasma also contains proteins, required to control bleeding, and other essential materials.

To fully meet the needs of physicians and surgeons, blood of every group and type must be available at all times. Donors often respond when there is a special need or emergency. *But blood banks depend much more on donors who are willing to give to meet day-by-day blood needs.* Banks throughout the country must rely on a constant stream of donors to keep a "river of blood" flowing each day.

No substitute for blood has ever been developed. The only source is still the human body. As long as blood cannot be manufactured, blood banks must depend upon people like you to assure an adequate blood supply.

GIVING IS SAFE AND SIMPLE

Nature makes it easy to give blood. An average person has about 10 to 12 pints in his body. A normal donation is about one pint. Medical authorities say that donating a unit of blood quickly stimulates a healthy person's bone marrow and his blood count is as normal after the donation as before.

Under medical supervision, the collection of blood is made by a medical technologist or a nurse. The procedure is simple and safe. The entire process takes less than an hour.

After you have given blood, you receive a card which lists your blood group and Rh type. This is important as the blood of every human being is almost as distinctive as his fingerprint.

The giving of blood can be a satisfying and rewarding experience for you.

"Make no little plans. They have no magic
to stir men's blood. Make big plans
aim high in hope & work"

H. Burnham

FACTS ABOUT

HEMOPHILIA



MINNESOTA CHAPTER
of the
NATIONAL HEMOPHILIA FOUNDATION
FAIRVIEW HOSPITAL - MINNEAPOLIS, MINN. 55406

some facts about ...



Rh



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Minneapolis War Memorial Blood Bank
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Support
Your
Community
Blood Bank



FACTS ABOUT

HEMOPHILIA



MINNESOTA CHAPTER
of the
NATIONAL HEMOPHILIA FOUNDATION
FAIRVIEW HOSPITAL - MINNEAPOLIS, MINN. 55406

WHAT IS HEMOPHILIA?

Hemophilia is an inherited disease—for which at present there is no cure—in which the clotting of blood is abnormally delayed, due, at least in part, to a deficiency of an essential agent for coagulation.

Hemophilia runs in families, but the pattern of heredity is a most unusual one, for while it shows up only in males*, it is passed on only through females.

In other words, none of the sons of a hemophiliac inherits or transmits the infirmity, but all of his daughters, while not themselves hemophiliacs, are carriers. Some of the sons of a carrier *may* have hemophilia and some of her daughters *may* likewise be carriers.

How many of a carrier's sons will be hemophiliacs or how many of her daughters carriers, it is impossible to predict. Some case histories show all of the sons to be hemophiliacs; others, only one out of four, etc.

Hemophilia always skips at least one generation in the direct line, and it may skip several. Sometimes in fact, so many generations elapse before its recurrence that the family no longer has any knowledge of the ancestor from whom it was inherited. At other times, hemophilia arises "de nova" without any preceding family involvement.

WHAT IT MEANS TO BE A HEMOPHILIAC

From infancy to death, a hemophiliac's life must be lived in terms of his affliction.

The disease may be evidenced at circumcision. With many, it is revealed when the child begins to creep and walk. In some cases, the discovery is not made until a tooth is extracted, an operation is performed or an accident occurs.

Internal bleeding is more serious than external.

Bleeding into a limited space, especially a joint, is accompanied by pain; sedatives are often necessary.

Repeated hemorrhage into the joints, if untreated, may lead to crippled arms and legs.

A hemophiliac differs from other handicapped children in that his affliction may not be visible ex-

*For purposes of simplification we have omitted all reference to the types classified as P.T.A. and P.T.C. In the former case the bleeding tendency is also found among females, many of whom are now registering with us.

cept during a bleeding episode—unless he has become permanently disabled. One day, a boy may look and feel wonderful; the next, an internal hemorrhage may strike without warning.

The disease varies in severity in individual cases. The defect is apparently constant throughout life.

In every other respect the hemophilic child is a normal boy with a normal boy's aptitudes and desires. But his activities must be circumscribed.

Repeated hospitalization and inadequate schooling are the lot of many. Faced with these difficulties, he still must prepare himself vocationally for adult life. Handicapped as he is, his choice of career is limited.

As in all instances where a child is "different," there are psychological difficulties to be overcome and important adjustments to be made—by both parents and child.

WHAT IT MEANS TO THE FAMILY OF A HEMOPHILIAC

Having a hemophilic child is an emotional and financial strain for families.

How much activity can they permit their son? How can they refrain from "spoiling" him? How can they treat him as a normal, growing boy and yet safeguard him against bruises or mishaps which may lead to serious bleeding episodes? How can they provide him with healthy mental attitudes?

The child must be watched day and night and is a source of constant anxiety.

Hospitalization and ambulance service are costly; so are doctor bills, transfusions and such frequently needed requisites as braces, crutches and wheel chairs. A family of modest means is hard pressed to meet these expenses. A poor family is desperate. The boy must have vocational or professional training especially suited to his needs. Such education is not everywhere available and may prove expensive.

All the other members of the hemophiliac's family are necessarily affected by his infirmity, and where funds are lacking all are called upon for sacrifices.

WHAT IS BEING DONE FOR HEMOPHILIACS?

Although hemophilia is in a sense a life long disorder, it can now be controlled. Every effort should be made to prevent crippling. Local measures such as pressure, application of cold and the use of various hemostatics, can at times control bleeding, but the keystone for therapy in hemophilia remains fresh whole blood, fresh plasma, or its derivatives.

During the past few years the active ingredient which is lacking in hemophilia has been isolated and has been made available in relatively purified form. Early administration of such products does much to prevent the crippling effects of joint hemorrhages that have plagued hemophiliacs in the past.

For those joints that have sustained damage, there is now hope for restoration of function by the application of orthopedic treatment and braces.

At the present time dental extractions so fraught with danger in the past can be done quite safely. Even major surgery may now be done with some degree of assuredness that the outcome will be favorable. The change in the picture has largely been the result of dedicated men and a great deal of effort. Research is constantly going on in an effort to improve what has already been accomplished and to build further for the future.



FACTS ABOUT

HEMOPHILIA



**MINNESOTA CHAPTER
of the
NATIONAL HEMOPHILIA FOUNDATION**
FAIRVIEW HOSPITAL - MINNEAPOLIS, MINN. 55406

FACTS ABOUT THE NATIONAL HEMOPHILIA FOUNDATION

The National Hemophilia Foundation was incorporated in 1948. Its purposes are:

- Registration of all hemophiliacs.
- Support of research.
- Direct aid to hemophiliacs.
- The development of new and improved therapy.
- The dissemination of information to the families of hemophiliacs, professional personnel, and the general public.
- To assist in the education, vocational guidance, rehabilitation and social adjustments of sufferers from hemophilia.
- To enable the hemophiliac to be a useful and productive member of society.

Among the accomplishments of the Foundation are:

- Grants of funds for research and fellowships.
- Financial assistance given in many needy cases.
- Publication of information for hemophiliacs, their families, and all others concerned.
- Sponsorship and financial support of orthopedic treatment for Hemophilic Arthropathy.
- Formation of chapters, chartered by the Foundation, in strategic localities for the mutual aid and benefit of hemophiliacs living in the areas.
- Establishment of blood and plasma banks, facilities for medical treatment and other services by Chapters.

some facts about ...



Rh



Published as a public service by the
Minneapolis War Memorial Blood Bank
2304 Park Avenue, Minneapolis, Minnesota 55404
888 - 0643

Introduction

Individuals can be classified on the basis of many distinguishing characteristics. By observation we can group people by their size, shape, physical features, color of skin, eyes, and hair. Many of the characteristics that can be used to classify individuals cannot be determined by observation, but require complex laboratory tests. For example, there are differences in the blood of various individuals which can be defined only by a series of laboratory tests. These differences between individuals are the result of complex factors. Environment can play a role in some differences, however, many of them are the result of heredity and are controlled by the genes that are inherited from our parents. Every individual inherits a set of genes from his father and another set from his mother.

In 1900, Dr. Karl Landsteiner demonstrated differences in the red blood cells of humans that allowed him to classify individuals into four groups. This was one of the first demonstrations of Mendelian heredity in humans. Since Dr. Landsteiner's discovery of what is now known as the ABO blood group system, at least fourteen other blood group systems with a multitude of separate factors have been described. These genetically controlled differences in human red blood cells can be used like finger-prints to distinguish differences between individuals. If it were possible to test for all of the known factors, no two individuals in a million, who are not identical twins, will have an identical set of blood group factors. In this pamphlet we shall describe a few facts about the blood group systems and factors with emphasis on the Rh-Ir blood group system.

What Is RH?

The RH factor is a chemical substance present on the red blood cells of approximately 85% of Caucasians. Its name is derived

from the Rhesus monkey, since it was first discovered by injecting cells from rhesus monkeys into rabbits. Those individuals possessing the Rh factor are called Rh positive, and those who lack it, Rh negative. The percentage of individuals who are Rh positive varies depending upon hereditary factors. For example, American Indians, Chinese, and Japanese people are almost 100% Rh positive.

Antigens-Antibodies

Blood group factors are antigens, and if an individual lacks a blood group factor, such as the Rh factor, he can produce antibodies against this factor following exposure to it. This is very similar to the events that occur when an individual is inoculated with a vaccine such as Typhoid. The treated Typhoid organism acts as the antigen, and after the injection the individual forms antibodies against the Typhoid antigen. Exposure to red cell antigens occurs commonly in two ways: 1) transfusion 2) pregnancy. During a transfusion of blood, the individual receiving the transfusion will be exposed to red cell antigens that are present on the donor red cells, but absent on his own red cells. During a pregnancy, the red cells of the developing fetus can cross the placental barrier, and enter the maternal circulation, thus the mother can receive a minute transfusion from her developing infant. Since the infant has a set of genes from its father, it will have red cell antigens that the mother lacks, and thus can sensitize her to these factors in the same way that a transfusion can sensitize an individual. If at a later time, an individual who has been sensitized to a blood group factor receives blood with this factor, the antibodies which were formed during the initial sensitization can now cause a rapid destruction of the transfused cells. Careful and extensive laboratory testing is done prior to transfusion to insure that donor blood is compatible with the recipient.

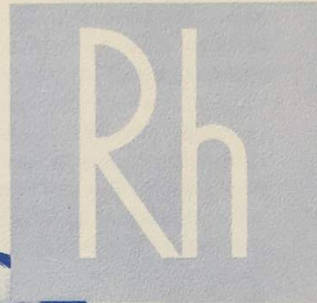
Antibodies Cross Placenta

Some kinds of antibodies occurring in the mother's circulation cross the placenta and enter the circulation of the developing fetus. These antibodies will protect the infant from certain infections during the first few months of life, when it has a poor ability to produce antibodies. If antibodies to red cell antigens are circulating in the mother's blood, these too can cross the placenta. If these antibodies are specific for an antigen present on the developing infant's red cells, then the normal mechanisms for destroying antibody coated red cells will occur. If the rate of destruction becomes great, the infant will become anemic, develop jaundice, and occasionally die in utero. This disease process is known as erythroblastosis fetalis.

Frequency of Erythroblastosis

Erythroblastosis Fetalis (hemolytic disease of the newborn) occurs most frequently in marriages where the wife is Rh negative and the husband, Rh positive. Although in one out of every ten marriages, hemolytic disease might be expected, it only occurs in one marriage of 250. There are several reasons for the smaller number of affected pregnancies than would be expected. Since the Rh factor is hereditary, it is quite possible that an Rh negative woman can also have an Rh negative infant. This is always the case if her husband is also Rh negative. If on the other hand, he is Rh positive, she might or might not have an Rh positive infant. The husband can be either homozygous (have two genes alike), or heterozygous (have one Rh positive gene and one Rh negative gene). If he is heterozygous, then there is a fifty per cent chance in every pregnancy that the infant will be negative. If, however, he is homozygous for the Rh factor, then all the infants will be Rh positive; even in the latter case the chances are quite good that

some facts about...



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the infants born to such parents will not be affected. The first baby from such a mating is nearly always normal, and it often takes one and sometimes several pregnancies to sensitize an Rh negative mother.

Diagnosis in Prenatal Period

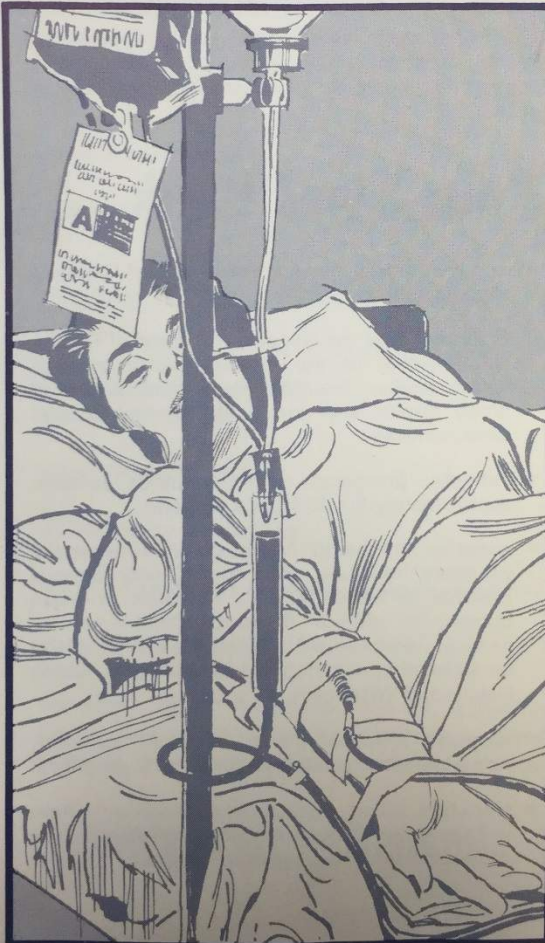
Appropriate laboratory tests make it possible to establish the chance of hemolytic disease of the newborn occurring in any pregnancy. First, the mother's red cells are tested to see if she is Rh negative, and her serum is tested to see if it contains antibodies to the Rh factor or any of the other blood group factors. If the woman is Rh negative, or has antibodies to a blood group factor, then her husband is tested to establish whether he is positive for the Rh factor or other factor, and whether he is homozygous or heterozygous. If antibodies are found in the mother's serum, the blood group antigen with which they react is identified. The amount of antibody present is also determined by a test known as titration. Changes in the antibody titer during pregnancy, can give the physician an indication of the severity of the disease in the affected infant.

Once a mother has given birth to an infant with erythroblastosis due to Rh incompatibility, it is likely that any future child will also be affected. In these instances, the Rh titer, although helpful, might not give all the information needed by the physician. Recently a technique known as amniocentesis has become a useful aid in the diagnosis of erythroblastosis. If there is red cell destruction going on in the developing fetus, a pigment will be found in the amniotic fluid.

Erythroblastosis - Treatable

Early accurate diagnosis of hemolytic disease of the newborn is important since this is a treatable disease. If the physician

Support Your Community Blood Bank



The Minneapolis War Memorial Blood Bank was established in 1948 as a non-profit, self-supporting, medically sponsored, community blood bank.

Your Blood Bank...

- **is governed** by a volunteer Board of Directors of community leaders.
- **is licensed** by the National Institutes of Health, is a member of the American Association of Blood Banks, the Minnesota Association of Blood Banks and the North Central District Clearinghouse.
- **collects**, processes, and distributes annually approximately 50,000 units of blood.
- **supplies** the blood needs of all Minneapolis voluntary hospitals, Hennepin County General Hospital, & Mercy & Unity Hospitals in Anoka County. In addition it provides supplementary services to over 40 affiliated hospital blood banks in other communities in Minnesota, South Dakota and Wisconsin.
- **employs** a highly trained medical, technical, and administrative staff to conduct its programs.
- **transfers** blood replacement credits anywhere in the nation through the American Association of Blood Banks clearinghouse program.

- **needs** your support to maintain an adequate supply of blood. Help meet this need by making regular blood donations.

Your Blood Bank...

- **provides** the following services to physicians and hospitals:

BLOOD COMPONENTS

Whole Blood
Packed red cells
Leukocyte poor red cells
Pediatric units
Reconstituted frozen red cells
Platelet concentrate
Normal serum albumin
Heat treated protein fraction concentrate
Fresh frozen plasma
Anti hemophiliac globulin
Typing and grouping antisera

CONSULTANCY SERVICE

RH studies
Transfusion problems
Transfusion reaction studies
Paternity studies
Genetic studies
Rare donor file participation with American Association of Blood Banks
Regional reference laboratory for American Association of Blood Banks

TRAINING AND OTHER SERVICES

Training for American Association of Blood Banks certification
Training for affiliated blood banks
Dissemination of scientific information
Research

Your Blood Bank...

FEES AND REPLACEMENT POLICY:

- **is financed** by its service fees, non-replacement fees and income from consultancy services.
- **receives** no financial support for its operating programs from federal, state, or local government, or from any charitable organization.
- **charges** a service fee for each unit of blood used.
- **charges** an additional fee for each unit not replaced. This fee is refunded if the blood is replaced.
- **depends** upon volunteer donor replacement. There is only one source of human blood and there is no substitute.

Your Blood Bank...

- **provides** the following advance deposit plans:

BLOOD DONOR CLUB — for employee groups, churches, labor and fraternal organizations.

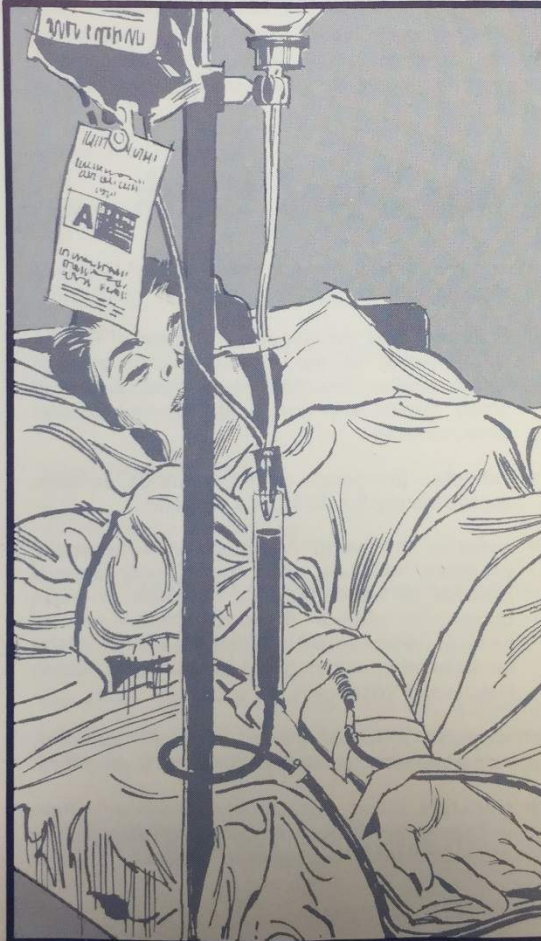
INDIVIDUAL OR FAMILY PLAN — for individual or family coverage.

HEMOPHILIA & COMMUNITY SERVICE PROGRAMS — Voluntary blood donations are needed for Hemophilia and other patients unable to provide replacements.

Call the blood bank to learn about any of these plans and become an active participant: You may one day be a grateful recipient.

"Give That Others Might Live"

Support Your Community Blood Bank



DONOR REQUIREMENTS

Age 18 through 65.

Normal Good Health.

Individuals are not eligible as donors with a history of:

Hepatitis, jaundice, or jaundice contact within 6 months.

Major surgery, blood transfusions or pregnancy in the past 6 months.

Heart disease or malaria.

Active allergy or hay fever.

Three months should elapse between donations.

There are no diet restrictions for donors.

For safety of the donor and recipient, a medical history including temperature, weight, pulse, blood pressure, hemoglobin, is taken prior to donation.

Don't Wait — Donate!



Letters from readers

Minneapolis Sun

Tuesday - September 21, 1971

Criminal 'wants a fiesta'

In reference to the editorial "No 'coddling' in the prisons" and the article "Two programs for prison reform" of Sept. 15, it seems to me that, after a pollution fad, a new fad is picked up by the news media—namely, the prison fad.

All sophisms, eloquence, rhetoric and diatribes aside, the basic fact is that it is the coddling of the criminal at the expense of the society. You and others alike try to sell the idea that "regimentation, restriction and an authoritarian rule" are inhumane. The Attica incident is very unfortunate. But to subordinate the law and the government to the mob rule in the prison is treason of the ideals for which the government exists.

If the prison system, particularly for the hard-core criminal activists, is so bad and "inhumane," why don't the criminals stay away from prisons? Is it a picnic or a correctional institution? The robbed pay the taxes for the upkeep of the criminal convict to keep him in isolation, and then the prisoner complains and wants a fiesta. A prison should have necessities, not the luxuries. A very interesting perversion of justice and morality is propagated in the news media. — **The Rev. George Krasovich, St. Paul.**

Rehabilitation, not punishment

The recent activities at Attica State Prison in New York illustrate once again the need for prison reform. Emphasis should be placed on rehabilitation, not punishment. More psychiatrists, psychologists and clergymen are des-

perately needed for counseling at such institutions. It might also be wise to have indeterminate sentences, so that people can be released when they are ready to be released.

At one point the inmates demanded to be taken to "non-imperialist" countries. By this I assume they meant Communist countries. It ought to be noted that even Communist countries are imperialist. The words of Dr. Martin Luther King, Jr. seem appropriate. He said: "You cannot solve it by turning to communism, for communism is based on an ethical relativism, a metaphysical materialism, a crippling totalitarianism and a withdrawal of basic freedom that no Christian can accept."

It is true that poverty contributes to crime; however, crime is not confined to any economic system — in fact, crime is basically a spiritual and psychological problem, not an economic problem.

It seems to me that Gov. Nelson Rockefeller must share the blame for the deaths for refusing to go to the prison and personally negotiate.—**Ronald Pajari, Blaine.**

Encourage blood donors

Regarding "Tax break for blood donors?" (editorial from the Washington Post) and the follow-up letter from Dr. Herbert F. Polesky, director, Minneapolis War Memorial Blood Bank, I want to express my disappointment with Dr. Polesky's opposition to the proposed legislation which calls for a federal income-tax deduction under charitable contributions of \$25 for each pint of blood donated, up to a maximum of five pints a year. The tax

break in this bill is financially insignificant and will certainly not attract the so-called skid-row, paid-donor type

Hemophiliacs use enormous quantities of blood, literally hundreds of pints a year in some cases, but only a small fraction of each pint is used. The other components in a pint of blood can be used for treatment of other ailments. Hemophiliacs residing in Hennepin County are serviced by War Memorial on a strict pint-for-pint replacement basis. They and members of their families are prohibited by War Memorial from joining blood-donor clubs and receiving the resulting benefits. This exacting replacement policy is not the case in Ramsey County, whose residents are served by the American Red Cross.

The proposed federal legislation, I feel, is primarily designed to give federal recognition and encouragement to volunteer blood donors.—**Arthur J. Sullivan, president, Minnesota chapter, National Hemophilia Foundation, Edina.**

Cut glare at Bottleneck

One solution to the "lighting problem" at the Hennepin-Lyndale Bottleneck would be to erect a 1,000-foot carport at the entrance to the tunnel. There would be no sides except for the supporting pillars. The last 300 feet next to the tunnel could have plastic walls to let in diffused light.—**Ray B. Gamble, Edina.**

Support for blood bill

We were pleased to read the Washington Post editorial (Tribune Sept. 6) concerning the possible tax deduction for blood. Our groups are actively supporting the Koch bill. We have written to Reps. Koch and Frenzel expressing our endorsement and wish more people would do so.

Many readers are not aware of the constant need for blood, as well as the fact that blood can be donated in the name of charitable groups, such as the Hemophilia Foundation. If the bill passes, it will help solve a few of the more pressing problems of hemophilia sufferers.

A hemophiliac family has a constant need for blood, either through outright purchase or donation. The Minnesota Chapter, Hemophilia Foundation, has an open account at the Minneapolis War Memorial Blood Bank, where donors may give blood directly to the foundation.

— Mrs. Robert Hendrix, Edina.

*Minneapolis Sun
Thursday - Sept 23, 1971*

RED CAPS PLAN TEA

The Red Caps for Hemophilia will hold its annual membership tea from 2 to 4 p.m. Wednesday at the home of Mrs. Linda Weber, 1516 Boone Av., Golden Valley.

'Red Caps' to Stage Annual Membership Tea

The Red Caps for Hemophilia will conduct its annual membership tea from 2 to 4 p.m. Wednesday, Aug. 26, at the home of Mrs. Linda Weber, 1516 Boone Ave., Golden Valley.

A member from the Minnesota chapter of Hemophilia will show a movie explaining the disease.

New members are welcome. Call 546-1906 for reservations.

Name _____
LAST FIRST HUSBAND

Address _____ Zip Code _____

Telephone _____ Husbands Occupation _____

In which of the following areas will you participate as a committee member ?

Plastic Bags _____

Coupons _____

Halloween Candy _____

Xmas Cards _____

Winona Research _____

Membership _____

Cannisters _____

Inventories _____

Tupperware _____

Ways & Means _____

Calling _____

By-Laws _____

Blood Program _____

Garage Sale _____

Cosmetics _____

Publicity _____

Ball Park _____

Contributions _____

Scrap Book _____

Roster _____

Old Log _____

Membership
Tea
1970



SEP • 70

Judy Schwartz
President -1970-71



Betty Crocker
Coupons

September, 1970

Dear Member:

We hope you will be able to come to the next Hemophilia Chapter meeting:

Sunday, October 11, 1970
FAIRVIEW LECTURE HALL
Coffee 3:30
Meeting 4 PM

This is the Annual meeting for Election of officers and Board Members. Mr. Arthur Sullivan has consented to have his name presented for the office of President. He has very ably handled this position the past year. Mr. Bernard Maguire has also allowed his name to be presented again for the office of Treasurer. Mr. Maguire's address is 1058 Summit Avenue, St. Paul. Annual dues are \$5.00 per family. You may send your remittance directly to him -- please.

Mrs. Shirley Fowler is head of the nominating committee. If anyone has any ideas for officers or Board Members, please do contact her at 869-8773. Board Members do not have to be directly affiliated with hemophilia.

At this meeting, the RED CAPS will again bring Christmas cards, which will be offered at the same low price as last year, \$2.60 per box of 25 cards. These are beautiful cards and it will be well to choose those you wish to have at this meeting.

The RED CAPS are also selling a "baker's dozen" of the large trash bags, 30" X 37", for \$1.00. Good to have any time, but especially now to bag up all those lovely leaves which will be falling in your yard. They also are selling the plastic utility one-pound bread size bags, 100 for \$1.00, which is cheaper than you can buy at the store. Please take some of these bags to sell to your friends -- if you can bear to part with them. They are really the handiest things to have around the house! Also good for freezing. The girls are also selling Halloween treats for \$1.00. If they have any left, they will bring them to the meeting.

The RED CAPS have been as busy as bees, working for our HEMOPHILIA CHAPTER. They are constantly having fund raising activities, and membership drives. We are very grateful for the monies they have raised for us and the accompanying publicity for our cause. Keep up the tremendous work, RED CAPS.

Dr. Abramson will continue with his hypnotherapy sessions. The sessions will be held every two weeks. Those interested in joining the sessions please contact Richard Mooney, 722-4855.

A complete BULLETIN will be published next month, following the NATIONAL Hemophilia Board Meeting. We will include all pertinent information on recent developments in the field of Hemophilia.

Sincerely,
Shirley Fowler

Blood Drive

April 13, 1970

RELEASE RE: IMPORTANT INFORMATION ABOUT HEMOPHILIA
From the RED CAPS FOR HEMOPHILIA
Minnesota Chapter, National Hemophilia Foundation

FROM: Jean Schore
9708 Sandra Lane
Minnetonka, Minnesota 55443

Yes, you can help! Not by giving money or a few extra hours of your time every month...but by giving HOPE. To boys and men who need your hope because it is a matter of life and death.

These individuals all suffer from Hemophilia, an inherited disease of the blood. It is especially hard on children; their blood will not clot as will yours and mine. Otherwise, they are healthy and normal.

Since there is no cure available at this time, their only treatment is transfusions of normal blood fractions containing the clotting factor.

They know what will result from a minor bruise or scrape, not to mention the dread of simply having a tooth pulled. Internal or external bleeding. Or both. Countless transfusions and hours of pain.

It may happen again tomorrow or the next day...for absolutely no reason whatever. It just happens, and when it does, it cannot be controlled or stopped without medical treatment.

But life goes on. They have accepted their life and try to make the best of it. HOPE? That's something they read about...the result of research into the secret causes of their tragic disease. Hope can be more than some new development that may benefit future generations. Of course the research is vital, but knowing that folks like you and me are prepared to pool our most precious resource provides HOPE today. It's real! Genuine proof of support and understanding.

Yes, there is HOPE...because we believe you care enough to help! Indeed, you have proved it. By joining a blood donor group, you have already expressed a fine understanding of the problem -- the need for blood. And you have taken certain carefully prescribed steps to protect yourself, your loved ones, and all the other members of your group.

For obvious reasons, hemophilia victims cannot join blood donor groups. Thus, they will never have the peace of mind you share with your family, knowing in advance, that a virtually unlimited supply of blood is available to you and your loved ones.

By comparison, the very best a hemophilia family can possibly hope for is a lessening of their ever-present burden.

Much of the blood used to treat hemophilia cases is obtained from a very limited stock of blood credits maintained at the War Memorial Blood Bank by the Hemophilia Foundation. It represents only a small fraction of the annual requirements needed by the 60 hemophilia families in our community.

24 Units Donated by Air Mail Guard
19 Units Donated by Red Caps

43 - 1970-71

GENERAL INFORMATION

Revised March 1970

Donor may be from age 18 to 66.

Weight requirement

Minimum 125 pounds for men and 105 pounds for women.

Malaria

New donors ever having had a single attack of malaria will be permanently disqualified.

Malaria exposure

Must be 2 years with or without suppressive treatment. All those returning from Viet Nam must wait 2 years.

Jaundice

Anyone having had jaundice may never give blood.

Jaundice exposure

Donor will be rejected for six months if exposed to jaundice.

Major Surgery

May not donate until six months after major surgery, or transfusion.

Pregnancy

Those who are pregnant or who have been pregnant in the past six months are not acceptable donors until six months after birth of the baby.

Hay Fever

Temporary rejections until the hay fever season is over.

Illness

Temporary rejections for colds, upper respiratory or flu symptoms, and open sores or active skin lesions. Teeth extractions.

Diet

Donor should eat a non-fatty meal before giving blood.

Checking

Blood pressure, pulse, temperature and hemoglobin are checked before blood donation, as well as medical history.

Benefits

Members of the donor club and dependents are covered for their blood needs. Being a member of the donor club eliminates searching for donors at a time of emergency. Contact your chairman if blood is needed, and he will order a transfer of credits.

The Minneapolis War Memorial Blood Bank has reciprocal arrangements with other blood banks so that members of the donor club and their dependents are covered almost anywhere in the United States.

Rules

The rules of the donor club are decided by the donor club committee. The Minneapolis War Memorial Blood Bank helps with the organization of the donor club and assists the club should problems arise.

Blood Bank

The Minneapolis War Memorial Blood Bank is a non-profit, self-supporting community blood bank and is sponsored by the Hennepin County Medical Society. The Blood Bank has the responsibility of keeping on hand at all times in Minneapolis hospitals sufficient bloods ready for immediate issuance.

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PLEASE GIVE
TO CONQUER

HEMOPHILIA

The bleeders dis-
cripples thousan

The National
Hemophilia Foundat





Merry Christmas

Bringing you every good wish
for Happiness this Christmas
and in the coming year.
The Boners. Dave, Sissy, Steven.
Greg

This card represents
a contribution to the
HEMOPHILIA FOUNDATION

Christmas Cards

HUGE GARAGE SALE

3630 Bloomington Av.
MAY 15, 16 & 17

SACRIFICE—MUST SELL—relocating.
Whirlpool washer & elec. dryer, di-
nette, ped. table/4 chairs, encyclopedia,
diag. set, etc. 1500 W. Edin. 822-0344

GARAGE SALE 9708 Sandra Lane,
Minnetonka (1 block off county 18)
Lots of goodies + new born puppies.
May 15th & 16th, 9 to 5.

GARAGE SALE May 15-16, pri. mow-
er, air cond., 20" bike, kit, lat.,
misc. furn. clothing, hsehold. (9:30-5
p.m.) 6524 W. Shore Dr., Edina.

GARAGE SALE

Clothes, hsehold items & TV. May
14-15, 9-6, 8325 Washburn Av. S.

CLUB GARAGE SALE, May 14, 15, &
16, 9 to 4, 4009 W. 82nd St., 1
block West of France.

W.A.A.B.I. BENEFIT GAR. SALE
Thurs. thru Sat. 10 a.m. to 5 p.m.
421- Ottawa Av S.

BASEMENT SALE Fri., Sat., Sun. 9-6,
lots of clothing, furniture & misc. 309
Herman Terrace Hopkins.

MOVING Sale, May 15-16, Clothing,
furn. appli. & misc. 4805 Vallicher 2
blks. E. of Miracle Mile.

NEIGHBORHOOD GARAGE SALE May
15 & 16, 7416 West Shore Drive. Fur-
niture, books, sport, qds., antia.

GARAGE Sale, Misc. items, Fri. &
Sat. May 15 & 16, 9 to 4, 5317
Humboldt Av. S.

GARAGE Sale, 2315 Thorndale Ave.
New Brighton, May 14, 2 camp stor-
age cabinets, dishes, & misc.

BASEMENT SALE, LEAVING CITY
1306 E. 60th St. Fri. & Saturday.

BASEMENT SALE Thur. & Fri. May 14
& 15, 9 to 4:30, 5648 25th Av. S.

GARAGE Sale Saturday 9-5, 2201 E.
87th St., Bloomington.

SLIM JIM EXERCISOR, \$90, HARDLY
USED 474-4884

KARE garage sale: May 16, 17, 3638
France Av. S. Sat. 9-6, Sun. 12-6.

GARAGE & ANTIQUE SALE May 15,
16, 1930 W. Ctv. Rd. D. St. Paul.

GARAGE Sale misc items May 15, 10-
5, May 16, 10-4, 1800 49th Av. NE.

GARAGE SALE, clothes, furn., etc.
Fri. & Sat. 9-6, 5621 2nd Av. S.

SALE—5944 Newton S. Starts 5/15
Baby & girls clothes, toys, misc.

GIGANTIC neighborhood gar. sale:
May 14, 15, 16, 3601 Dupont Av. S.

12 FAMILY Gar. Sale, May 14, 15 &
16th, 8820 Fremont Av. S.

NORTHROP Rummage Sale 5201 S.
Blake Rd. Sat. & Sun. from 9 until 5

20 GALLON aquar. New, \$14.95.
561-1566 Pet ranch 6548 Univ. Av NE

BASEMENT SALE, 4415 Wentworth
Av. S. May 15 & 16, 9 a.m.-5 p.m.

HOPKINS SUN
MINNETONKA-EDEN PRAIRIE SUN

Thurs., May 14, 1970

RED CAPS SALE

Red Caps for Hemophilia
will sponsor a garage sale from
9 a.m. to 5 p.m. Friday and
Saturday at the home of Mrs.
B. Schore, 9708 Sandra Lane,
Minnetonka. New born puppies
will be included in the items for
sale.

Red Caps Set Election, Sale

Red Caps for Hemophilia
will meet at 8 p.m. Wednes-
day at the home of Mrs.
James Robichon, 5137 Bed-
ford Ave. S., Edina.

New officers for the year
will be elected.

Following the business
meeting, members will
price and arrange for dis-
play merchandise for the
group's annual garage sale
from 9 a.m. to 4 p.m. May
20 and 21 at the Robichon
residence.

RUMMAGE SALES

Joe Smith American Le-
gion Auxiliary and Post, 468
— 5:30 to 9 p.m. today, 8
a.m. to 1 p.m. Friday, 1308 E.
Franklin Av.

American War Dads Auxil-
iary — 1 to 9 p.m. Friday, 9
a.m. to 4 p.m. Saturday, 2610
Central Av. NE.

Saturday, 1308 E. Franklin
Av.

Red Caps for Hemophilia
9 a.m. to 5 p.m. Friday
and Saturday, 9708 Sandra
Lane, Minnetonka.

Ivy Rebekah Lodge, 30, In-
ternational Order of Odd Fel-
lows — 6 to 9:30 p.m. Friday,
8 a.m. to 1 p.m. Saturday,
1310 E. Franklin Av.

Minneapolis Junior Acade-
my — 6 to 9 p.m. Monday, 9
a.m. to 1 p.m. Tuesday, 1310
E. Franklin Av.

Delta Tau Chapter of Epsi-
lon Sigma Alpha Sorority —
10 a.m. to 5 p.m. Friday, 5805
Concord Av. S., Edina.

Law Wives of William
Mitchell College of Law — 9
a.m. to 2:30 p.m. Saturday,
601 Western Av. N., St. Paul.

Sophomore Class of North-
rop Collegiate School — 9:30
a.m. to 5 p.m. Saturday and
Sunday.

Richfield Chapter of Amer-
ican Field Service — 10 a.m.
to 5 p.m. Friday, 10 a.m. to 5
p.m. Saturday, 6244 Newton
Av. S., Richfield.

Total Sales

\$255.00

F 15

Minneapolis Tribune
Sun., May 9, 1971

Hemophilia club plans sale

Red Caps for Hemophilia
will elect officers at their
meeting May 19 at the
home of Mrs. James Robi-
chon, 5137 Bedford Av. S.,
Edina.

The women are planning a
garage sale for May 20-21
at the Robichons' and will
price merchandise and ar-
range displays following the
business meeting.

16 A

★

THE MINNEAPOLIS STAR

Mon., May 10, 1971

HEMOPHILIA AID

A garage sale on behalf
of the Minnesota Hemo-
philia Foundation will be
held Thursday and Friday
from 9 a.m. to 4 p.m. at
5137 Bedford Av. S., Edi-
na. The event is sponsored
by the Red Caps for Hem-
ophilia.

Thurs., Dec. 16, 1971 ST. LOUIS PARK SUN
EDINA SUN

HOPKINS SUN
MINNETONKA-EDEN PRAIRIE SUN

Red Caps Meet

The December meeting of the Red Caps for Hemophilia will be held at 8 p.m. Tuesday at the home of Mrs. Robert Kline, 610 Drilane Road, Hopkins. A special election will be held for the newly vacated office of Secretary.

Club to meet

The Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. Edmund Groebner, 15102 Crown Dr., Minnetonka.

Hemophilia film

The Red Caps for Hemophilia will hold their monthly meeting at 8 p.m. today at the home of Mrs.

Robert Hendrix, 5129 William Av., Edina. The group will preview a movie on hemophilia, entitled "Threshold."

Butterflies Are
the Old Log T
the Minnesota C
Hemophilia F
will be present

Red Caps for Hemophilia Slate Meeting

Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. Edmund Groebner, 15102 Crown Drive, Minnetonka.

Mrs. Elizabeth Kallberg, newly elected president of the Minnesota Chapter of the Hemophilia Foundation, will be guest speaker. Those wishing to attend should call Mrs. Robert Hendrix, president, at 925-1560.

Feb. 10, 1972 ST. LOUIS PARK SUN
EDINA SUN

HOPKINS SUN
MINNETONKA-EDEN PRAIRIE SUN

Annual Drive For Hemophilia Set for March

The fourth annual canister drive sponsored by the Red Caps for Hemophilia will begin March 1. This year's theme is "Happiness is Sharing a Pint or a Penny."

The group will meet at 8 p.m. Tuesday at the home of Mrs. David Maron, 1840 Oregon Ave. S., St. Louis Park. At that time, cans

will be distributed to members for placement in suburban and metropolitan stores. The Red Caps aid families and persons afflicted with hemophilia.

Blood donors are sought in Edina

The Red Caps for Hemophilia will meet Tuesday at the home of Mrs. James R. 5137 Bedford Road, Edina.

The organization is dedicated to raising funds for maintaining blood banks. The Minnesota Chapter of the Hemophilia Foundation will hold a blood mobile on Tuesday, Feb. 10, at South View. The mobile will be open from 7:30 p.m. to 9:30 p.m., and will accept blood donations. Further information may be obtained by calling 925-1560.

Further information may be obtained by calling 925-1560.

Thurs., May 14, 1970 **ST. LOUIS PARK SUN**
EDINA SUN

HOPKINS SUN
MINNETONKA-EDEN PRAIRIE SUN



(Sun Photo by Tina Fitzmaurice)
DAISY'S DOING HER share for the garage sale sponsored by the Red Caps for Hemophilia. The sale will be from 9 a.m. to 5 p.m. tomorrow and Saturday at the home of Mrs. D. Schore, 9708 Sandra Lane, Minnetonka, and Daisy's puppies will be sold. Daisy is part Irish Setter and Golden Retriever. The pups' father—it is reported—was a Black Labrador. Mrs. Toby Carlson, Minnetonka (left) and Mrs. Schore are coaxing the camera-shy puppies.

30 FAMILY
GARAGE SALE

5137 BEDFORD AVE. SO.
EDINA

THURSDAY, MAY 20
FRIDAY, MAY 21

9:00-5:00

ALL PROCEEDS TO
HEMOPHELIA

Hemophilia Group Schedules Meeting

Red Caps for Hemophilia will be shown. Tickets will meet at 8 p.m. Tuesday at the home of Mrs. Toby Carlson, 15103 Crown Drive, Minnetonka. A slide presentation on hemophilia will be shown. Tickets for the benefit performance of "Catch Me If You Can" at the Old Log Theater will be available from Mrs. H. Weber, 545-2284.

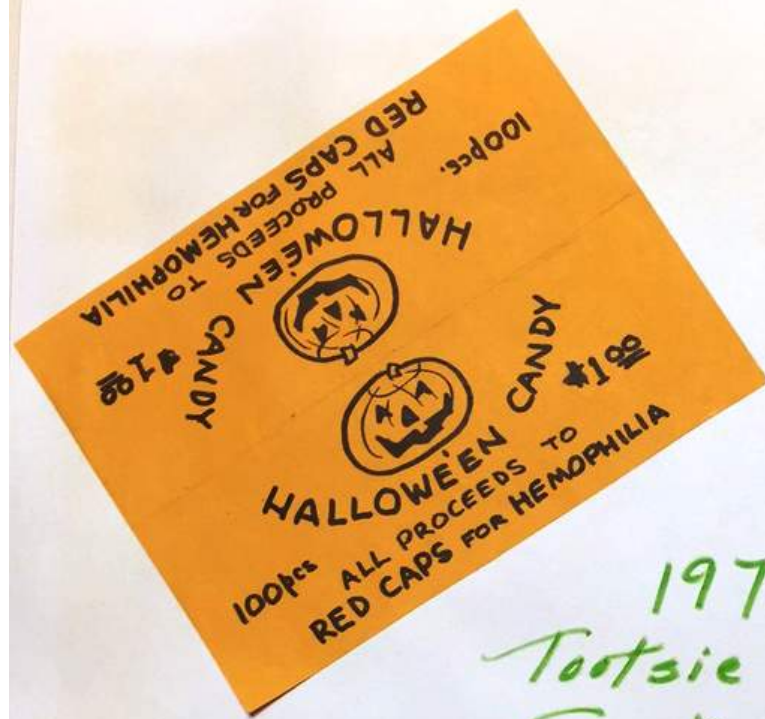
The Old Log Theater

EXCELSIOR, MINNESOTA



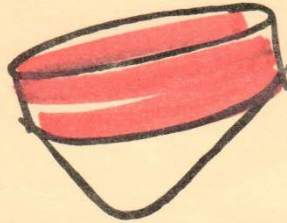
"LOVERS AND OTHER STRANGERS"

Producer-director Don Stolz



1970
Tootsie Rolls
Suckers

1971
Fruit Bon Bons
Assorted Penny Candy



CAPS

COMING EARLY

— 1ST MEETING —

SEPT. 14th. - 8 P.M.

NINA WERNICKS * ⁶⁰¹~~610~~ DRILLANE RD., HOPKINS

BE SURE TO MARK THIS DATE DOWN , BE SURE TO COME !!

ALL VISITORS AND PROSPECTIVE MEMBERS WELCOME

BRING YOUR **QUALITY** MERCHANDISE WITH YOU

INVITE YOUR FRIENDS

MINNESOTA CHAPTER SPEAKERS

MARK THESE
DATES DOWN

SEPT. 14th.

SEPT. 30th.

OCT. 1 & 2

OCT. 22

Garage Sale

SEPTEMBER 30th.


SET UP DAY FOR THE SALE

SALE DAYS :: OCTOBER 1 and 2

QUALITY MERCHANDISE PREFERABLE

PLEASE

HELP TO MAKE THIS A VERY SUCCESSFUL SALE !!!

SELL YOUR  CANDY, AND DON'T FORGET OCTOBER 22,
YOU KNOW WHAT DAY THAT IS

first meeting in the FALL of 1971

2 Birthdays: NINA WERNICK'S &
BILL KALLBERG

MR & MRS. MAGUIRE



MEMBERS & Friends



Thursday, September 23, 1971

Minneapolis Tribune

Established 1867

Bower Hawthorne Editor
Wallace Allen Managing Editor
Leonard Inskip Editorial Editor

Encourage blood donors

Regarding "Tax break for blood donors?" (editorial from the Washington Post) and the follow-up letter from Dr. Herbert F. Polesky, director, Minneapolis War Memorial Blood Bank, I want to express my disappointment with Dr. Polesky's opposition to the proposed legislation which calls for a federal income-tax deduction under charitable contributions of \$25 for each pint of blood donated, up to a maximum of five pints a year. The tax

break in this bill is financially insignificant and will certainly not attract the so-called skid-row, paid-donor type.

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The proposed federal legislation, I feel, is primarily designed to give federal recognition and encouragement to volunteer blood donors.—Arthur J. Sullivan, president, Minnesota chapter, National Hemophilia Foundation, Edina.

10 A

Tuesday, September 21, 1971

Minneapolis Tribune

Established 1867

Bower Hawthorne Editor
Wallace Allen Managing Editor
Leonard Inskip Editorial Editor

Support for blood bill

We were pleased to read the Washington Post editorial (Tribune Sept. 6) concerning the possible tax deduction for blood. Our groups are actively supporting the Koch bill. We have written to Reps. Koch and Frenzel expressing our endorsement and wish more people would do so.

Many readers are not aware of the constant need for blood, as well as the fact that blood can be donated in the name of charitable groups, such as the Hemophilia Foundation. If the bill passes, it will help solve a few of the more pressing problems of hemophilia sufferers.

A hemophiliac family has a constant need for blood, either through outright purchase or donation. The Minnesota Chapter, Hemophilia Foundation, has an open account at the Minneapolis War Memorial Blood Bank, where donors may give blood directly to the foundation.
— Mrs. Robert Hendrix, Edina.

Monday, September 6, 1971

Minneapolis Tribune

Established 1867

Bower Hawthorne Editor
Wallace Allen Managing Editor
Leonard Inskip Editorial Editor

Tax break for blood donors?

An editorial in the Washington Post

Donated any blood lately? Probably not. Unless a relative or friend is on the operating table and needs a quick transfusion, or if an alert goes out that the neighborhood hospital is low on blood, most of us seldom roll up our sleeves to donate blood.

Periodically in its 22 years of collecting blood, the American Red Cross has announced that it may run short. Although this matter is not among the major problems of the current American health crisis, it is one on which Rep. Edward I. Koch (D-N.Y.) has introduced legislation that might offer a solution.

His bill would give a \$25 tax reduction for blood donated to a nonprofit collecting organization. "Presently," says Rep. Koch, "only 3 percent of

the public donates blood through nonprofit organizations such as the Red Cross. If we can just increase this by 1 percent, the blood shortage problem will be eliminated."

The Koch bill, which has some two dozen co-sponsors from both parties, would allow up to \$125 in deductions annually per person, meaning a maximum of five donated pints.

Besides this economic incentive that would increase the blood supply, the quality of blood might also be improved. Many commercial blood banks now offering cash to donors often attract people of questionable health. According to Koch, "Today the chances of contracting hepatitis from a transfusion of commercial blood is 10 times that of donated blood."

The Internal Revenue Service, recognizing donated blood as a "service" which is not deductible rather than "property," which is, does not allow a tax benefit for donors. This is odd; a citizen can write a \$25 check to the Red Cross and take a deduction for that, but he cannot take off anything for the pint of blood he gives the same agency.

Changing the tax law — in this case, amending the Internal Revenue Code of 1954 — is not an impossible goal, and can be accomplished by action in Congress. It would be pleasant if Americans gave blood out of only noble sentiments — as many do — but since most do not, why not provide a modest economic come-on? There is no substitute for that, and no substitute for blood, either.

Mr. Leonard Inskip
Editorial Editor
Minneapolis Tribune

Ref: Blood Donor Editorial
Monday, Sept. 6, 1971

Dear Sir:

We were pleased to read the re-print editorial concerning the possible tax deduction for blood. Our groups are actively supporting the Koch bill. We have written to Congressmen Koch and Frenzel expressing our endorsement and wish more people would do so.

Many readers are not aware of the constant need for blood, as well as the fact that blood can be donated in the name of charitable groups, such as the Hemophilia Foundation. If the bill passes, it will help solve a few of the more pressing problems of Hemophilia sufferers. A hemophiliac family has a constant need for blood, either through out right purchase or donation. The Minnesota Chapter Hemophilia Foundation has an open account at War Memorial Blood Bank where donors may give blood directly to the Foundation. The public is not generally aware of this.

We hope to see the Koch bill pass and more references to the need for blood in the media.

Respectfully submitted,

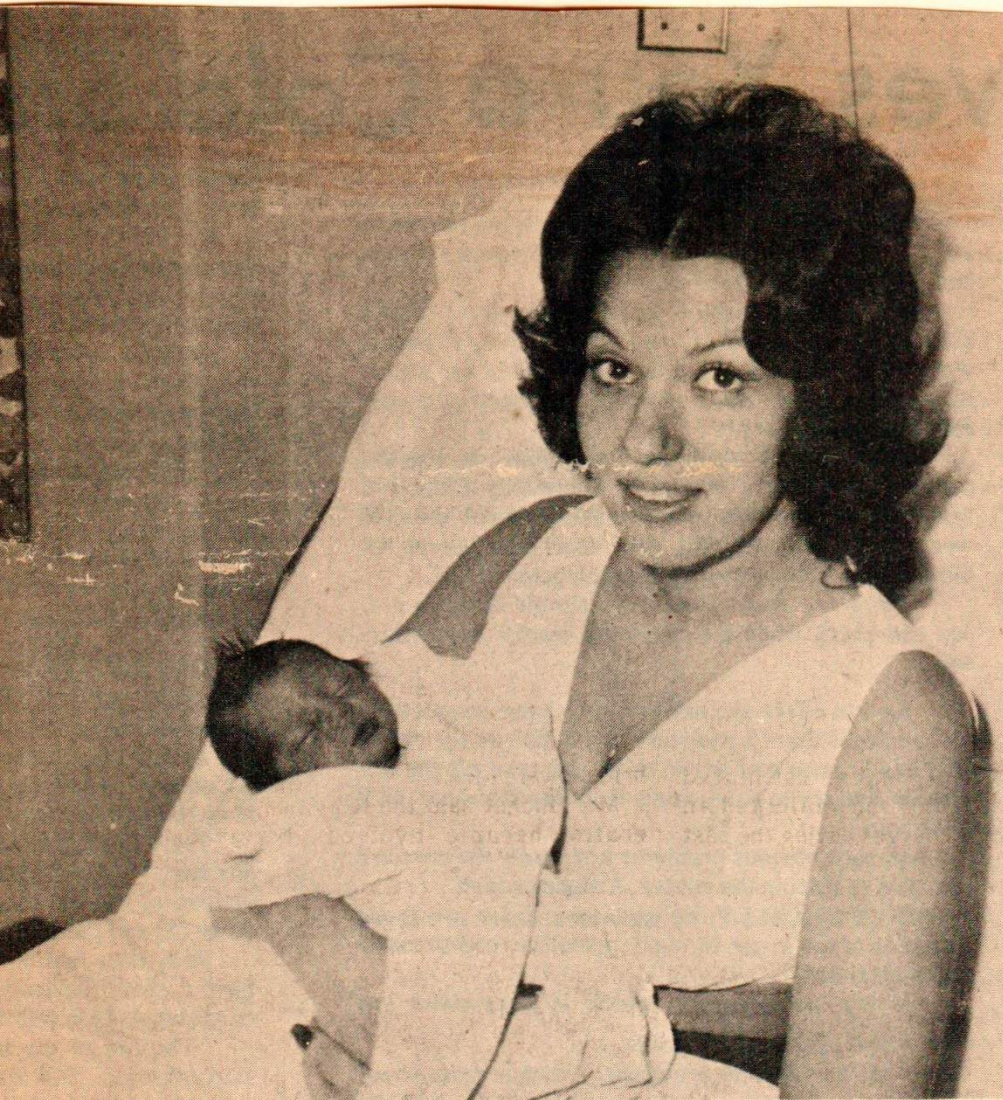
Red Caps for Hemophilia
and
Minnesota Chapter Hemophilia Foundation

For further information call
Mrs. Robert Hendrix 925-1560

introduced legislation that might offer a solution.

His bill would give a \$25 tax reduction for blood donated to a nonprofit collecting organization. "Presently," says Rep. Koch, "only 3 percent of

more often attract people of questionable health. According to Koch, "Today the chances of contracting hepatitis from a transfusion of commercial blood is 10 times that of donated blood."



FIRST BABY OF '72—Gregory Schwartz was the first baby born in the new year at Methodist Hospital in St. Louis Park. Gregory is the son of Mr. and Mrs. Gerald Schwartz, New Hope. He was born at 12:48 a.m. Saturday, and weighed 6 pounds, 10 oz. Gregory came in second in the "first baby" race in the Minneapolis area.

Thurs., Jan. 13, 1972 ST. LOUIS PARK SUN
EDINA SUN

Hemophilia Movie To Be Shown Set for Tuesday

Red Caps for Hemophilia monthly meeting will be held at 8 p.m. Tuesday at the home of Mrs. Robert Hendrix, 5129 William Ave. Following a short business meeting the group will view a new movie on Hemophilia, entitled "Threshold."

Anyone wishing to attend the meeting and view the film may contact Mrs. Herbert Weber, 545-2284 for further details.

Red Caps To Meet Tuesday

The Red Caps for Hemophilia will hold their monthly meeting Tuesday at 8 p.m. at the home of Mrs. James Robichon, 5137 Bedford Ave. S. No program is planned.

A discussion will follow the business meeting on the groups previous and future blood drives for the Minnesota Chapter Hemophilia Foundation. Raising funds and blood is the sole purpose of the Red Caps organization.

A bloodmobile unit will be at Southview Junior High school that afternoon between the hours of 3 and 7:30 p.m. for anyone in Edina wishing to give blood for their family or organization.

Those interested in donating to the Minnesota Chapter Hemophilia Foundation fund are welcome to do so at this time. No previous appointment is necessary, but information on the drive is available by calling Mrs. Robert Hendrix at 925-1560.

Hendrix, 5129 William Ave., Edina. The group review a movie on Hemophilia, entitled "Threshold."

Hemophilia benefit set

A benefit performance of "Butterflies Are Free" at the Old Log Theater for the Minnesota Chapter Hemophilia Foundation will be presented at 7:30

p.m. next Sunday.

Tickets should be purchased from members of the Red Caps for Hemophilia by Monday.

Evening at Old Log to Be Benefit

The Red Caps for Hemophilia will hold their third annual evening at Old Log Theater Jan. 23 at 7:30 p.m. The play will be "Butterflies Are Free," a light hearted comedy.

All profits from this evening will go directly to the Minnesota Chapter Hemophilia Foundation to aid in further research on Hemophilia.

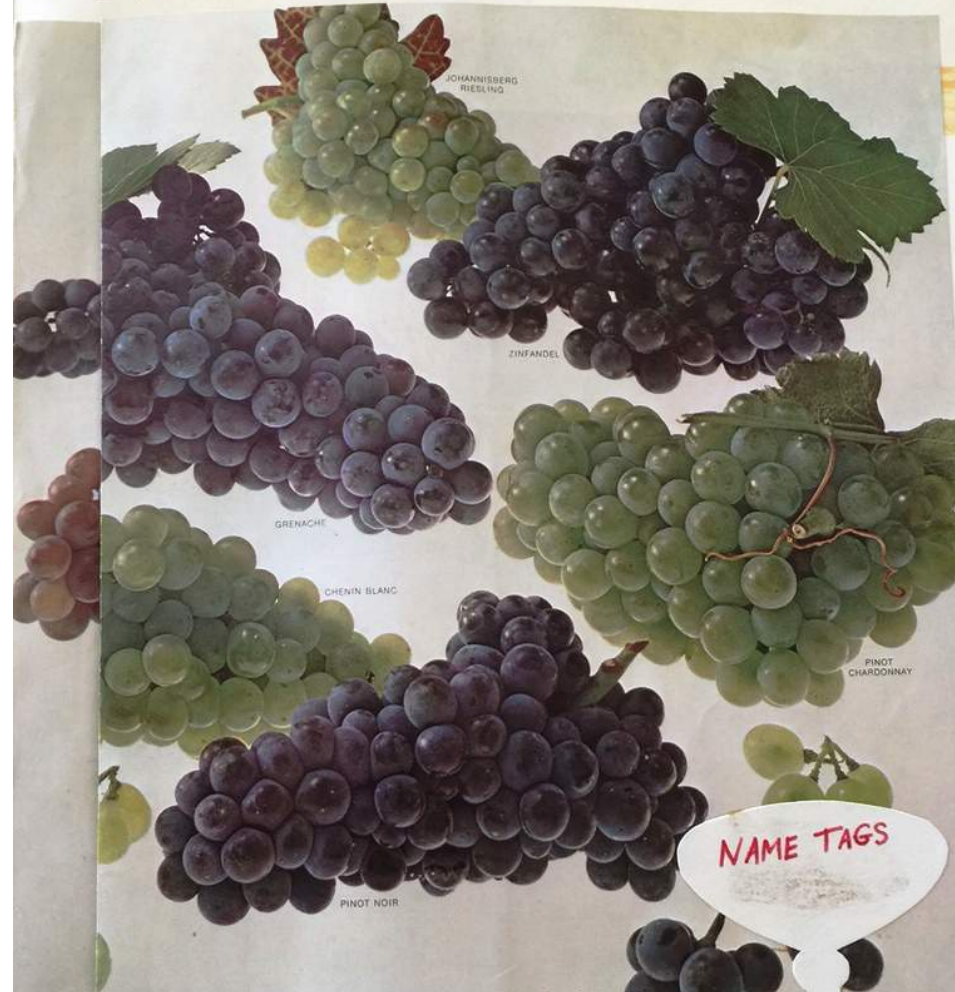
Blood donors are sought in Edina

The Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. James Robichon, 5137 Bedford Av. S., Edina.

The organization, dedicated to raising funds and obtaining blood for the Minnesota Chapter Hemophilia Foundation, will have a blood mobile at Edina South View Junior High Tuesday between 2 and 7:30 p.m., where donors may give blood. No advance appointment is required.

Further information may be obtained by calling Mrs. Robert Hendrix, 925-1560.

WINE TASTING PARTY & MEMBERSHIP DRIVE SPRING 1972 At the home of Joice Smith



NAME TAGS

in our Paicines Mountains vineyards, near San Juan Bautista, where Franciscan monks grew *their* wine over a hundred years ago. It's the cool, Pacific breeze that keeps our grapes growing gently and gracefully, to become *great* wines.

So come. Come meet our children and taste our wine. Come to Almadén.

Almadén Wines

A family of fine wines since 1852.

erved with

dinner!

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Newberg Sauce - add wine and shrimp.
Serve Newberg sauce over finished Sole.

BLOOD DRIVE — NATIONAL GUARD ARMORY

FEB. 27th 1972



Staff Photo by Regene Radniecki

National Guardsmen donate blood to help hemophiliacs

Members of Minneapolis's 151st Artillery Battalion of the National Guard donated 140 pints of blood Sunday for the "Help a hemophiliac, give a pint of blood" campaign sponsored by the Red Caps for Hemophiliacs and

the Minnesota Hemophiliac Society. This was the second year that the National Guard has volunteered to donate for the campaign, with this year's turnout of donors nearly three times last year's.

NATIONAL GUARDSMEN DONATE BLOOD TO HELP HEMOPHILIACS



Members of Minneapolis's 151st Artillery Battalion of the National Guard donated 140 pints of blood for the "Help a hemophiliac, give a pint of blood" campaign sponsored by the Red Caps for Hemophilia and the Minnesota Chapter for Hemophilia. This was the second year that the National Guard had volunteered to donate for the campaign, with the turnout of donors nearly tripling that of the previous year.

RUMMAGE SALES

Ivy Rebekah Lodge 30 — 5 to 9 p.m. Friday; 9 a.m. to 2 p.m. Saturday, 810 S. 10th St.

Mary Circle Minnehaha Lutheran Church — 5 to 9 p.m. Thursday; 9 a.m. to 1 p.m. Friday, 810 S. 10th St.

Zeta Beta Chi — 5 to 9 p.m. Friday; 8 a.m. to 2 p.m. Saturday, 927 Centennial Pl.

Boy Scout Troop 384 — 10 a.m. to 5 p.m. Thursday, Friday and Saturday, 6841 Thomas Av. S., Richfield.

Red Caps for Hemophilia — 9 a.m. to 4 p.m. Thursday and Friday, 601 Drill Lane, Hopkins.

Hobart United Methodist Church — noon to 9 p.m. Thursday; 9 a.m. to 4 p.m. Friday, 100 W. 46th St.

Women's Society of Hamline United Methodist Church — 9 a.m. to 3 p.m. Saturday, church's dining hall, Minnesota State Fair Grounds.

Women's Society of Christian Service, Oakland United Methodist Church — 9 a.m. to 8 p.m. Friday and Saturday, 4035 Lyndale Av. S.

Lutheran Church of the Good Shepherd — 6:30 to 9 p.m. today; 9 a.m. to 1 p.m. tomorrow, 810 S. 10th St. and 927 Centennial Pl.

I.O.G.T. Good Templars Center — 6 to 9 p.m. Thursday; 9 a.m. to 2 p.m. Friday, 927 Centennial Pl.

Women's American Ort Pipers Chapter — 5 to 9 p.m. Saturday; 9 a.m. to 5 p.m. Sunday; 9 a.m. to noon Monday, 810 S. 10th St.

Lutheran Church of the Ascension — 9 a.m. to 4 p.m. Friday; 9 a.m. to noon Saturday, County Rd. 11 and Cliff Rd., Burnsville.

Ladies Auxiliary of Unity Hospital — 9 a.m. to 4:30 p.m. Thursday, 6120 NE 34th St., Fridley.

Resurrection Catholic Church — 9 a.m. to 5 p.m. and 7 to 9 p.m. tomorrow and Thursday, 55th St. and 12th Av. S.

Russian Orthodox Church — 9 a.m. to 6 p.m. Saturday; 1 to 6 p.m. Sunday, 2210 Franklin Av. SE.

Bloomington Mineral Club progressive sale — 9 a.m. to 5 p.m. Thursday and Friday; 9 a.m. to 3 p.m. Saturday, 10740 Sheridan Av. S., Bloomington; 8255 Nicollet Av., Bloomington; 13620 Inverness Rd., Minnetonka and 18305 20th Av. N., Plymouth.

Thurs., Sept. 14, 1972 ST. LOUIS PARK SUN

EDINA SUN

HOPKINS SUN MINNETONKA-EDEN PRAIRIE SUN

Page 25

Hemophilia Auxiliary To Meet

Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. Robert Wernick, 601 Drillane Road, Hopkins.

Mrs. Elizabeth Kallberg, president of the Minnesota Chapter of the National Hemophilia Foundation, will be guest speaker. The meeting is open to anyone

interested in helping the Hemophilia Foundation. Mrs. Arvid Prickett (478-6530) will provide any additional information.

Hemophilia benefit

Red Caps for Hemophilia is sponsoring a benefit luncheon and fashion show at 11:30 a.m. April 3 at L'Hotel Sofitel. Reservations can be made with Penny Cutter, 122 Boarshead Rd., Minnetonka.

wrong address

Correction

Reservations for the benefit luncheon and fashion show to be held April 3 by Red Caps for Hemophilia should be made with Penny Cutter, 5101 Boarshead Rd., Minnetonka, phone 474-3170. Her address was incorrectly reported in the Minneapolis Tribune last Sunday.

Minneapolis Tribune
Sun., Mar. 14, 1976

3E

Fashions featured at Red Cap lunch

A benefit luncheon and fashion show, sponsored by Red Caps for Hemophilia, will be at 11:30 a.m. Saturday, April 3, at L'Hotel Sofitel. Red Caps is a full-time volunteer organization raising funds for hemophilia.

Daytons will present a show featuring fashions for the entire family "From 6 to 76".

Luncheon chairman is Mary Ellen McGlone, Minnetonka. Reservations may be made with Penny Cutter, 474-3170, or Sharon Robichon, 929-7375.

Fashions featured at Red Cap lunch

A benefit luncheon and fashion show, sponsored by Red Caps for Hemophilia, will be at 11:30 a.m. Saturday, April 3, at L'Hotel Sofitel. Red Caps is a full-time volunteer organization raising funds for hemophilia.

Daytons will present a show featuring fashions for the entire family "From 6 to 76".

Luncheon chairman is Mary Ellen McGlone, Minnetonka.

Red Caps meet Nov. 20

The November meeting of the Red Caps for Hemophilia will be held Nov. 20 at the home of Diane Lehman, 5024 Bedford Ave. S., Edina. The business meeting will begin promptly at 8 p.m. You are cordially invited to attend.

Christmas seals will be distributed to buy at \$1.00 for a book of 100 stamps to help raise funds for Hemophilia. Anyone interested in buying or selling the Hemophilia stamps should contact Diane Lehman, 925-1142.

Hemophilia group to meet

The Red Caps for Hemophilia will meet at 8 p.m. Tuesday at the home of Mrs. Robert Wernick, 601 Drillane Rd., Hopkins.

Members of the Minnesota

Chapter Hemophilia Foundation will be present to answer questions.

Red Caps For Hemophilia

Red Caps for Hemophilia will meet at 8 p.m. Tuesday in the home of Mrs. Nina Wernick, 601 Drillane Road, Hopkins.

Those wishing to attend the meeting should call Mrs. Wernick at 935-1234.

Presented on of this ticket constitutes admission to all other ticket holders without compensation.

ADMIT ONE FREE

Twin Cities TODAY
KSTP-TV 5

3415 UNIVERSITY AVENUE
PARKING LOT AND THEATER ENTRANCE IN REAR OF BUILDING. NO ONE UNDER 18 ADMITTED.
PLEASE ARRIVE BY 11:10 A.M.
SHOW TIME 11:30 - 12:20 P.M.

6 to 76

the first annual benefit luncheon for the
minnesota chapter of the hemophilia foundation
april 3 saturday 11:30 am social hour
6.50 tax deductible

a fashion show and luncheon at l'hotel sofitel
fashions by dayton's / red caps for hemophilia

PROGRAM

OPENING GREETING

Mary Ellen McGlone

MISTRESS OF CEREMONIES

Nancy Nelson, Channel 11 Metromedia Television

SPECIAL GUEST SPEAKER

Dr. Lawrence J. Singher

MUSIC BY

Toby Carlson

SPECIAL GUESTS

Lawrence J. Singher, M. D.
Pediatric Hematologist-Oncology
Chief Medical Advisor to
Minnesota Chapter of the National Hemophilia Foundation

Vicki Knutson, President
Minnesota Chapter of the National Hemophilia Foundation

Stephen Gregg, Associate Administrator
Fairview Hospitals

FASHION SHOW

Dayton's

AWARDING OF RAFFLE PRIZES

AWARDING OF DOOR PRIZES

MENU

MELON BALLS IN SHERRY WINE

BALLOTINE OF CHICKEN FORESTIERE
STUFFED BREAST OF CHICKEN
MUSHROOMS & TOMATO SAUCE

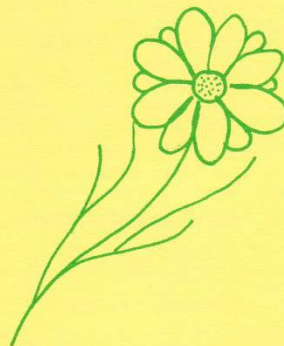
RICE PILAF

VEGETABLE GARNI

FRENCH BREAD

MOUSSE au CHOCOLAT

COFFEE - TEA



FROM President: Minnesota Chapter, National Hemophilia Foundation

May I extend a personal welcome to everyone attending this first annual luncheon/fashion show from the members of the Minnesota Chapter of the National Hemophilia Foundation.

The dedicated efforts and the unfailing monetary support of the Red Caps is greatly appreciated by our organization.

Hemophilia, also known as "bleeder's disease", is caused by a deficiency of specific factors in blood plasma which causes the blood to clot. It is one of the most excruciatingly painful, as well as one of the most expensive afflictions known to mankind. Although hemophilia is inherited, and found primarily in males, nearly half of its victims have no previous family history of the disease. This means no family is exempt. When hemophilia does strike, the hemophiliac must live his entire life in terms of his affliction, facing repeated hospital trips, countless transfusions, and permanent disability.

The funds we have received from the Red Caps over the past years have helped keep the Minnesota Chapter financially solvent, enabling us to continue our efforts. We sincerely thank you all for coming and for giving us the support we so desperately need.

Chibby Knudson

FROM President, Red Caps for Hemophilia

Welcome to our first benefit luncheon/fashion show for Hemophilia! Red Caps for Hemophilia (a small all-volunteer organization) is the primary source of income for the Minnesota Chapter of the National Hemophilia Foundation.

In the past we have done many smaller projects to raise funds; such as garage sales, selling of Christmas cards, recycling programs, etc. One of our goals is to be able to fund a full-time physical therapist for the Minnesota Chapter; physical therapy is a very essential part in the care of a Hemophiliac. We realized that by channeling our efforts into one major on-going project, such as this luncheon, we could have a more consistent cash flow to enable us to reach this goal.

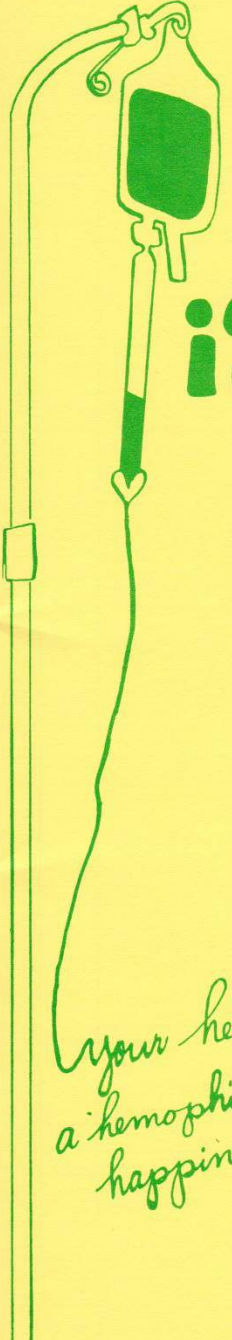
In order to do this we must rely on community support. This would include financial assistance from businesses and volunteers to participate in our projects. If you are interested in more information about our group and on what you can do, please contact Phyllis Hendrix at 925-1560.

I would like to take this opportunity to thank all those who assisted in making this, our first major endeavor, a reality.

Sincerely,

Kathee Middlebrooks

Kathee Middlebrooks



HAPPINESS is SHARING a PINT or a PENNY

*Your help is
a hemophiliac's
happiness!*

BLOOD TRANSFUSIONS, THE ONLY KNOWN TREATMENT FOR HEMOPHILIA, ARE NEEDED THE YEAR ROUND BY HEMOPHILIACS TO STOP BLEEDING, EASE PAIN & PREVENT CRIPPLING!

FOR MORE INFORMATION ON HOW YOU CAN HELP CALL -

ELIZABETH KALLBERG
831-5130

WILL YOU HELP ?

Red Caps for Hemophilia meet every third Tuesday from September through May. Annual dues are \$6.00. If you are interested in doing some very worthwhile volunteer work, fill in the following, tear out this page of the booklet and either drop it in the designated box on the way out today or mail to:

Mrs. Phyllis Hendrix
5129 William Avenue
Edina, Minnesota 55436

NAME: _____

ADDRESS: _____

PHONE: _____

SPECIAL INTERESTS: _____

RED CAPS FOR HEMOPHILIA OFFICERS

PRESIDENT. Kathee Middlebrooks
VICE PRESIDENT Nina Wernick
SECRETARY. Lelia Horejs
TREASURER. Sharon Robichon

LUNCHEON CHAIRPERSON Mary Ellen McGlone

COMMITTEES

ADVERTISING AND DOOR PRIZE COMMITTEE

Phyllis Hendrix and Sharon Robichon

ART AND GRAPHICS

Penny Saiki

PRINTED PROGRAM

Sharon Robichon

TICKETS AND RESERVATIONS

Penny Cutter

INVITATIONS AND RAFFLE TICKETS

Ann Bahn

PUBLICITY

Mary Ellen McGlone

TABLE DECORATIONS

Ann Stich

A GRATEFUL THANK YOU TO

OUR CASH DONORS:

Bunge Corporation
William and Adele Bond
Graham G. and Mary Elaine Smith
Schuler Shoes
Peterson Shoes

DONATED SERVICES:

Program Printing - Armour Pharmaceutical Co.
Raffle Tickets - Napco Industries
Envelopes - Triangle Printing
Music - Toby Carlson
Graphics - Penny Saiki
Program Layout and Graphics - Joseph Blair

WE GRATEFULLY ACKNOWLEDGE THE ADVERTISERS WITHIN OUR PROGRAM
WHO HELPED MAKE THIS FIRST ANNUAL LUNCHEON FASHION SHOW POSSIBLE

photos by
Howard
Nyquist

PEOPLE

photos by
O. 'Sonny'
Hanson



Top row, Nina Wernick, St. Louis Park; Judy Walseth, North St. Paul; Ann Jensen, Minnetonka; Scott Pierson, Edina; Jan Werner Leach, Bloomington; Carolyn Bisson, Edina; (front row) Katie White, Apple Valley; Chrissy Glover, Minnetonka; Jeff Kallberg, Bloomington; Aileen Furlong, Edina; Steve Gilbertson, Burnsville.



Mary Ellen McGlone, Nina Wernick, Penny Cutter, all from Minnetonka.



Mary Singher, Dr. Lawrence Singher, Phyllis Hendricks, all from Edina.



Nancy and Jim Thompson, Burnsville.



Nancy Nystrom, Edina; Steve Gregg, Wayzata.

at a benefit-luncheon fashion show . . .

The Redcaps were out in full force at L'hotel Sofitel Saturday — and it had nothing to do with pullman trains. Red Caps for Hemophilia is a unique organization of volunteers organized one year ago in Minnesota to raise funds for the National Hemophilia Foundation.

As part of the Benefit Luncheon Saturday there was a fashion show provided by Dayton's. The Red Caps group had a red-letter day, as the only full-time organization in the country dedicated to combatting hemophilia.



Jeff Kallberg, Bloomington. Jeff was a model for the show and is a hemophiliac.



John Palumbo, Alton, MN; Carolyn Bisson, Edina; Models.



John Palumbo, Alton, MN; Dee Roberts, vice president Fairview Auxiliary, Edina; Steve Gregg, asst. adm. director, Fairview Hospitals, Wayzata; Sam McGlone, Minnetonka; volunteer models for show.



Jeff Kallberg, Bloomington; Aileen Furlong, Edina; Steve Gilbertson, Burnsville; Katie White, Apple Valley.



Aurora Stack, Marilyn Boelke, Jeanne Eibner, all from Apple Valley.



Bonnie Maypack, Osceola; Cathy Kleven, Plymouth.



Sharon Robichon, committee member for luncheon - fashion show, Edina; Sandy Lee, Plymouth.



Barbara Lamb, Edina; Eileen Clark, Edina; Iui Furlong, Edina.



Ron Brokken, member of Fairview Hospital board of directors, Richfield; Grace Kobalik, Richfield.



Dr. Alan Bensman, Carol Bensman, Minnetonka.

Scenes at the hemophilia benefit

It was a delightful lunch party and the fashions were casual and believable at the first annual benefit staged by Hemophilia Foundation Saturday at the Sofitel.

Daytons furnished the clothes and many of the models came from the ranks of Red Caps — a small all volunteer organization whose efforts are the primary source of funds for the foundation.

Vickey Knudson, is president of the Minnesota Chapter of the National Hemophilia Foundation. Kathee Middlebrooks is president of Red Caps. Mary Ellen McGlone was luncheon chairperson.

Volunteers are needed. Anyone interested contact Phyllis Hendrix, 5129 William Ave., Edina 55436.



Moppet models are Jeff Kallberg, Bloomington (left); Aileen Furlong, Edina; Steve Gilbertson, Burnsville and Katie White, Apple Valley.



Marcia Letourneau, Bloomington, one of the models.



John Palumbo, Alton, MN; Dee Roberts, vice president Fairview Auxiliary, Edina; Steve Gregg, asst. adm. director, Fairview Hospitals, Wayzata; Sam McGlone, Minnetonka; volunteer models for show.



*John Palumbo, Alton, MN;
Carolyn Bisson, Edina; Models.*



*Mary Ellen McGlone, Nina Wernick, Penny Cutter, all from
Minnetonka.*



Top row, Nina Wernick, St. Louis Park; Judy Walseth, North St. Paul; Ann Jensen, Minnetonka; Scott Pierson, Edina; Jan Werner Leach, Bloomington; Carolyn Bisson, Edina; (front row) Katie White, Apple Valley; Chrissy Glover, Minnetonka; Jeff Kallberg, Bloomington; Aileen Furlong, Edina; Steve Gilbertson, Burnsville.



Jeff Kallberg, Bloomington; Aileen Furlong, Edina; Steve Gilbertson, Burnsville; Katie White, Apple Valley.



Jeff Kallberg, Bloomington. Jeff was a model for the show and is a hemophiliac.



Nancy Nystrom, Edina; Steve Gregg, Wayzata.



Barbara Lamb, Edina; Eileen Clark, Edina; Itti Furlong, Edina.



Aurora Stack, Marilyn Boelke, Jeanne Eibner, all from Apple Valley.



*Bonnie Maypack, Osceola; Cathy Kleven,
Plymouth.*



*Ron Brekken, member of Fairview Hospital
board of directors, Richfield; Grace
Kobalik, Richfield.*



Mary Singher, Dr. Lawrence Singher, Phyllis Hendricks, all from Edina.



Nancy and Jim Thompson, Burnsville.



*Dr. Alan Bensman, Carol Bensman,
Minnetonka.*



*Sharon Robichom, committee member for
luncheon - fashion show, Edina; Sandy
Lee, Plymouth.*

Eddie Schwartz



TOURISM UP FRONT...Greater Minneapolis Tourism Conference on Friday, April 2 at Sheraton-Ritz hotel starts at 8:30 a.m. and cleverly themed "Memo to Minneapolis—Company's Coming!"...There's a great rundown of speakers and panelists including our own Skyway News columnist Pat Lindquist (Power's) and Robert J. Sullivan of the San Francisco Convention & Visitors Bureau...Joan Behles, tourism director, sez \$10 registration includes conference, luncheon, coffee and tourism packet...A good "buy"!

PLUG FOR RED CAPS...In this case it's the first annual benefit luncheon for Minn. Chapter of the Hemophilia Foundation, Saturday, April 3 at L'hotel Sofitel with fashions from Dayton's...The "Red Caps for Hemophilia" deserve support because one of our favorites, Nancy Nelson, (WTCN-TV), will MC the festivities.

SIGN...As reported by Harry Lee, Nankin Cafe, who spotted this table card in a California cafe while enroute to Hong Kong: "Our spoons, knives, forks, napkins, plates and ashtrays are not medicine...Please don't take them after meals!"

PLANS FOR POWERS...Wonderful to hear that Powers is just about ready to revamp its long-time Loop store...Special aside to Edward Anderson, president: "Please leave that wonderful book department as is...It's my favorite Loop corner!"

LAST LINE (Thanks to WCCO's Howard Viken)... "Shoveling snow can cause a heart attack...Tell your wife to be careful!"

Thurs., Aug. 13, 1973 — SUN — Page 15

meetings

THE RED CAPS for Hemophilia will hold its first business meeting of the year Tuesday, Sept. 18, at 8 p.m., at 5129 William Ave., Edina.

Following the business

meeting, Mrs. William Kallberg, President of the Hemophilia Foundation Minnesota Chapter, will present a film entitled "Threshold."

Final arrangements will

be made for the annual fall garage sale scheduled Sept. 20 and 21.

Anyone wishing to attend the meeting is welcome, and may contact Mrs. Hendrix, 925-1560.



Medard Kaisershot



Bob Newman



Rep. Mary Forsythe



Bill Gilbertson





Rip Hudson

Items of Interest

From Newspapers and Magazines

Dec 12, 1970
TIME Magazine

The high cost of being a hemophiliac.

Say you make \$22,000 a year. Enough, you'd think, to take care of your son who's a hemophiliac.

You know there's something you can give him to control his bleeding. Something called a clotting factor.

A daily injection of this clotting factor is all it would take for your son to live—and bleed—like a normal person.

It's almost more than you dared to hope for. It's as simple as a diabetic giving himself insulin.

The only trouble is, it would cost you the \$22,000 a year you make to give it to your son.

What do you do?

What do the parents of other hemophiliacs do?

How many people even make \$22,000 a year to begin with?

We're in a terrible position. After twenty years of research, we've finally got the control for hemophilia.

But what good is having the control for a disease if you can't get it to all the people who need it?

What we have to do now is find a way to produce the clotting factor so every hemophiliac can afford it.

So far, we can only get it to a few people.

A hundred-thousand other hemophiliacs are just waiting.

We need your money to get it to them.

We're so close, yet so far.

National Hemophilia Foundation

25 West 39th Street, New York, New York 10018

Hypnosis--a lever for therapy

It can help bleeders, smokers, fat people

By **GORDON SLOVUT**
Minneapolis Star Staff Writer

Dr. Milton Abramson, a Minneapolis physician, told how he uses hypnotism to help hemophiliacs (bleeders) relax and control pain and fat women lose weight.

Dr. Herbert Spiegel, a Columbia University psychiatrist and one of the nation's leaders in the medical use of hypnotism, told how a girl suffering from hysterical paralysis put herself into a trance at the sight of him, got out of her wheel chair and walked across the stage to him—cutting short a demonstration he planned to do before an audience of Atlanta, Ga., physicians.

Dr. Leo Alexander, a Boston psychiatrist and also one of the leaders in the field, said his "batting average" has been about 40 percent in the use of hypnotism as part of the treatment of alcoholics.

They were three of the lecturers at a three-day session for physicians, dentists and clinical psychologists on hypnotism which ended today in the Pick-Nicollet Hotel.

About 100 health professionals paid \$125 each to learn how to use hypnosis in their practice, largely for diagnostic or relaxation purposes, and how to teach

their patients to use self-hypnosis to alleviate anxiety, increase their concentrative powers and ease pain.

Dr. Abramson emphasized that he is very cautious in patient selection. He never accepts one who has been under psychiatric care without first consulting with the psychiatrist, he said.

He has taught about a dozen victims of hemophilia, an inherited tendency to bleed easily, how to use hypnosis to relieve the anxiety brought on by the disorder. It seems to have reduced the number of blood transfusions some of them need, he said.

He uses a form of hypnosis with obesity patients, in large groups, to help "motivate" them to eat properly, he said. He reinforces their desire to be healthy and attractive, he explained.

Dr. Spiegel used the girl with hysterical paralysis as an example of how an "aura" makes it very simple for a therapist to induce hypnosis. In her case, he said, she had been told by a minister that God wanted her to go for the treatment, and she was ready to go into a trance at the sight of whomever God wanted to help her.

He and others at Columbia have been using a one-shot, 45-minute session to

help people stop smoking. They teach the smokers how to go into a brief trance-like state and tell themselves three things — that smoking poisons their bodies, that they cannot live without their bodies and "to the extent you want to live you owe yourself this respect and protection."

Dr. Spiegel said the Columbia group only gets smokers who have failed at other means, but a follow-up of 1,000 cases showed that 30 percent were still off cigarettes an average of 18 months later. He said he and his cohorts are looking for ways to pick out which ones might need more than one session.

Dr. Alexander, who doesn't always use hypnosis, said that before the current drug epidemic he was only successful in treating one out of 50 drug addicts. His current success rate — measured by six months of abstinence — is up to 60 percent, he said.

He said he thinks his improved success rate is based on a change in the type of people entering the drug scene. He sus-

pects the new drug users have "greater ego strength" than the older ones and are more responsive to psychotherapy.

All three emphasized that hypnosis is not really a treatment, but only a "lever" which makes it possible for a therapist to sometimes get at a problem quicker than he otherwise would.

The use of hypnosis as an anesthetic was demonstrated by a Canadian dentist, Dr. David M. Kovitz, who plunged needles into the back of the hand of his hypnotized wife, Muriel, and one of the physicians who volunteered to be a subject.

Dr. Kovitz stressed that the patients — he called them subjects — always can come out of the trance when they want to. That could be one of the hazards, he said, if a surgeon were to depend wholly on hypnosis as an anesthetic.

The course was arranged by the University of Minnesota office of postgraduate medical education and the American Society of Clinical Hypnosis.

MAY 7, 1971



Dr. Walter C. Alvarez

Hemophiliacs have more hope since 1940

One of the most distressing diseases a person can have is hemophilia. Sufferers from hemophilia are practically always boys, although a girl can carry the tendency to the disease, which means that she herself does not develop the symptoms but is capable of passing the disease on to a child of hers when she has one.

Hemo in Greek means blood, and philia means to like—a strange name for a disease in which a lad keeps getting repeated spells in which he nearly bleeds to death. This happens, because his blood lacks a Factor VIII which has to do with the clotting of the blood.

Normally when a person gets a cut or a scratch, the

blood immediately starts to clot, stopping the bleeding and making a scab over the wound. Without previous preparation a hemophiliac boy can die from a tonsillectomy or any small operation. If he gets a small bump on his knee, the knee can fill up with blood and cause him much pain. The blood can spill into the muscles and even into the brain.

Unusual bleeding after circumcision may indicate that a baby boy has the disease, and the doctor may suspect the disease when the normal bumps and scratches that come to an active youngster fail to heal properly.

Queen Victoria had a number of grandsons and great-grandsons, many of whom inherited from her

a tendency to bleed. Until 1940, if a hemophiliac began hemorrhaging, there was little that could be done to save him. Then a big advance was made when blood specialists learned how to separate plasma from the blood, and the giving of plasma helped more hemophiliacs survive to adulthood.

Another major step forward was made recently, thanks to Dr. Judith Pool of Stanford. Factor VIII, the anti-hemophilic factor (AHF), now can be greatly concentrated by freezing the blood. The liquid part of the blood comes out as ice and leaves behind the antihemophilic part that the boy needs if his life is to be saved.

The hemophiliac boy should carry a small vial of his Factor VIII and a hypodermic needle and syringe with him at all times; if he should accidentally get cut or bruised, he can give himself the concentrated injection, much as the diabetic gives himself insulin.

One place that is specializing in the problems of hemophiliacs is the Los

Angeles Orthopedic Hospital's Regional Hemophilia Center, the largest such clinic in the country. There they teach boys aged 12 or over how to give themselves an injection of the concentrated antihemophilic factor; with younger children,

they teach the parents how to do it.

Those wishing more information can write Dr. Walter Platz, at the Hemophilia Foundation of Southern California, 139 South Beverly Dr., Beverly Hills, California 90212.



Minneapolis Tribune Photo by Earl Seubert

Blood Donor Honored

Theodore Forsythe, left, 314 15th Av. SE., was honored Tuesday by the Minneapolis War Memorial Blood Bank, 2304 Park Av., for being its first donor of 10 gallons of blood. Michael Tucker, 17, 1021 Morgan Av. N., a hemophiliac who last year received the clotting factor of 1,085 pints of blood, presented Forsythe with a plaque prepared by the American Association of Blood Banks. Forsythe has donated a total of 91 pints of blood to various institutions since 1939, and much of it has been used for transfusions for hemophiliacs.

Ecology Seen as Challenge of Future

"The gene code has been cracked. It is conceivable that in the very near future we will literally have genetic surgery to remove defective genes — those, for example, which cause diabetes and hemophilia. These things are all on the horizon in modern biology. We are already doing it with bacterial cells and will be doing it with human cells in my lifetime if progress is as rapid as I expect it will be."

The speaker was relaxing over his second cup of coffee in my living room. Was he a science-fiction writer about to produce something more spectacular than "Brave New World"? No, he was Dr. Richard Caldecott, dean of the College of Biological Sciences, University of Minnesota. As he talked, I realized that my 45-year-old guest has one of the more brilliant and well-organized minds I had encountered.

During dinner, Caldecott had explained that the university is made up of many colleges and that the deans of these colleges are responsible directly to the president's office. Minnesota was the first state to establish a College of Biological Sciences in 1965 and is the only state which has brought all of the biological departments under one central administration. Botany, zoology, biochemistry, genetics, cellular biology, ecology, behavioral biology and the Museum of Natural History are now all centered in the College of Biological Sciences under Dean Caldecott.

Here each year various phases of biology are taught to 10,000 undergraduate students and 200 graduates who are working on advanced degrees. Teaching and research is carried out by 75 personnel with Ph.D. degrees.

Taking the biology professors and specialists from their various departments and combining them into one unified organization has not been accomplished without creating some trauma. Caldecott believes his biggest challenge has been to bring these people together and to make them understand and appreciate each other.



Caldecott

"The challenge," he said, "is to have the ecologist, the natural historian and the evolutionist working in concert with a molecular physicist who has moved into biology. The key is to get the best possible intellects at each level. Then they understand and appreciate each other."

Caldecott believes that for the next several decades the area of most concern to man and his well-being on this planet will be ecology. The first ecology department in the United States has been established at the University of Minnesota.

Caldecott is proud of his department of ecology. He calls ecology one of the thrusts of the future and believes no university can afford to be without it. He predicts it will become one of the strongest science departments at the university because it relates science to man's two major problems — pollution and population explosion. He is also convinced that the difficult biology problems of the future must be solved by groups of highly specialized scientists working together as a team.

"But," he said, "ecology deals with populations of organisms and how they relate to their environment and we must also work at the other end of the scale. We must go down and look at the molecules which individual organisms are made of, the way cells develop and unite to form organs and ultimately the whole organism. We must look to the future and see where the most important advances of mankind will take place."

"Just as we must have a bump of excellence in ecology, we must have a second bump of excellence in molecular development and cellular biology because this has very profound medical implications in terms of birth defects and the overcoming of genetic defects which people inherit. And so I am trying to build a college that has two big bumps of excellence which are at opposite poles — one dealing with organisms and how they relate and the other with the molecules and each step in building an organism."

One of the objectives of the College of Biological Sciences is to give the generally educated student an appreciation of biology and of life processes without which he cannot understand the great advances about to be made in the field of biology, in medicine and in natural history. He said, "Just as we are now leaving the era of physics, we are entering the era of biology."

"The general feeling of the public right now is that a biologist is a sort of weird cookie who is out in the field with a bug net and horn-rimmed glasses catching butterflies or that he is a guy opposed to bounties and fouling up game management."

"Until very recently, biologists did deal largely with the classifying of plants and animals. Now the biologist is using all the knowledge we have in physics and chemistry to understand the function of the biological system. The modern biologist must have a sophistication in physics and chemistry before he can solve biological problems."

"Biologists are much more respected than they once were because we have had some important breakthroughs such as polio vaccine. Great medical advancements have been made possible through achievements in basic biology, and breaking the genetic code has unlimited possibilities."

I see breaking of the genetic code as having frightening as well as unlimited possibilities. Carried to the ultimate, man could eliminate his own genetic defects. Theoretically, he could make any plant or animal into just what he wanted and remake the human species. Ponder those possibilities. A peace-loving man who thrives on smog and polluted water might be fine. But suppose some

A new science: fetal medicine

There is a new type of medical skill which has to do with the study of the fetus in the mother's womb. Study and treatment of an infant begins during his pre-natal life.

A woman with a marked Rh tendency, who during pregnancy develops a change in her blood that is likely to kill her infant before birth or soon after birth, can have the severity of her disease estimated early in her pregnancy by measuring the amount of bilirubin, a bile pigment in the amniotic fluid, which is the fluid that surrounds the fetus in the womb.

With this measurement, the physician can find out if the infant is in great danger; if so, a large amount of the harmful type of blood is then removed from the mother and helpful transfusions are given to the infant in the womb. In the report that I read, five such women, as a result of this method, were able to give birth to live infants, and four of these infants survived. They Probably would not have survived without the new treatment.

There are several other diseases in which the new science of fetal medicine is helpful. If a woman has

a tendency to have boys with the terrible bleeding disease, hemophilia, in which the blood does not clot properly so that any little cut or severe bump can cause the boy nearly to bleed to death, an expert can find out during pregnancy whether the

child is a boy or a girl.

If it is a girl, the mother does not have to worry, because girls rarely get the disease; but if it is a boy, she must worry, and she may choose not to carry the fetus to term, but to have an abortion instead.

700 Donors Save Youth With Cut Lip

By LEWIS COPE

Minneapolis Tribune
Staff Writer

Michael Tucker, 17, came to the hospital with a cut lip on July 23.

During the 2½ weeks since then he has received transfusions of a blood component that required more than 700 blood donations.

Michael is a hemophiliac — a victim of the hereditary bleeders disease.

A small cut, like that on his lip, can be perilous. Without medical aid he could have bled to death.

In fact, doctors said, medical aid might not have been able to save him four years ago.

Concentrated A H F (anti-hemophilic factor) was developed in 1966. Thanks to this, Michael is now recovering at Hennepin County General Hospital.

Dr. Herbert Polesky,

medical director of the Minneapolis War Memorial Blood Bank, explained:

"A hemophiliac during a bleeding episode such as in this case doesn't actually need a lot of blood. What he needs is AHF — the component that his own blood lacks but is necessary for clotting to stop bleeding.

"So we extract the AHF from donated blood and give it to hemophiliacs during bleeding crises."

While AHF concentrate is now routinely used in such cases, Michael has needed "an unusually large amount," Dr. Polesky said.

At first doctors gave Michael about a pint of the AHF concentrate each day, a normal amount. But that wasn't enough.

So for the past 10 days he has been given about two pints a day — "an unusually large amount," although not a medical record, Dr. Polesky said.

And it has done its job. Doctors are now getting ready to wean him from the concentrate. His lip is healing well.

Dr. Polesky explained what is involved:

The two pints that Michael has been getting daily is the amount of AHF concentrate found in 60 pints of regular whole blood.

Since a normal blood donation to the blood bank is about a pint, that means Michael has been relying on 60 blood donations a day — 600 during the past 10 days alone.

The AHF factor has been separated out from all this donated blood. The red cells and other blood components that he hasn't needed have been used to help other patients with other types of problems.

Before a way of separating AHF concentrate

out of whole blood was developed in 1966, Michael would have had to receive many, many plasma transfusions.

"To have given him the same amount of needed AHF that way would have required giving him more plasma each day than his total blood volume," Dr. Polesky said.

"And that simply could not have been done," the doctor added.

In fact, less plasma than that would have seriously taxed Michael's heart and could have caused swelling in the brain.

It was Dr. Judith Pool of Stanford University who discovered how to get the AHF concentrate out of whole blood. The Minneapolis blood bank started using her procedure in December of 1966, becoming one of the first to do so.

The process works this way:

First the blood is spun in a centrifuge to separate the half that is called plasma. This is the watery part of blood, minus both red and white cells.

Then the plasma is frozen at minus 120 degrees.

Then it is thawed. And when the plasma thaws from that super-cold temperature, the AHF concentrate separates out on its own.

The process is called cryo-precipitation, meaning cold separation.

Dr. Polesky cited the case of Michael, son of Mrs. Brenda Bratten, 1021 Morgan Av. N., as illustrating "our almost constant need for more blood donations."

The doctor noted that his bank currently is supplying AHF concentrate not only to Michael but also to three other hospitalized hemophiliacs.

'U' doctors develop new method to aid certain hemophiliacs

By Lewis Cope
Staff Writer

University of Minnesota doctors announced Wednesday that they have developed a new method of treating patients with a particularly perplexing type of hemophilia — the bleeder's disease.

The blood-separation technique already has meant "the difference between life and death" for a 20-year-old St. Paul college student by making it possible for him to undergo critical brain surgery in time, Dr. Roger Edson

said.

Dr. Edson estimated that somewhere between 1,000 and 5,000 Americans suffer from the particularly tough-to-treat type of hemophilia involved. He said they all stood to benefit from the new treatment, even for major internal bleeding problems not connected with surgery.

Spontaneous internal bleeding can be a problem for hemophiliacs. In all there are an estimated 20,000 Americans with hemophilia, meaning their blood lacks a clotting factor needed to stop bleeding once it starts.

Most, however, have been greatly helped by the availability, starting about six years ago, of concentrated clotting factor taken from normal persons' donated blood. This Anti-Hemophiliac Factor (AHF) can be given by needle.

But the 20-year-old St. Paul student and up to 5,000 other hemophiliacs in the nation have not been able to use the AHF for a strange reason: Their bodies have developed antibodies against it.

Antibodies, circulating in the bloodstream, normally

fight germs. Their job is to detect foreign invaders in the body and attack them. In this case, however, antibodies mistakenly identified any infused AHF as a foreign enemy and kill it. So AHF can offer these patients little or no help.

Here is how the new technique was used:

The St. Paul youth, whose name was not disclosed, had developed bleeding in the brain and needed immediate neurosurgery. But without clotting factor in his blood, he could not survive the scalpel.

He was hooked up to a

Celltrifuge machine used to separate the various components in blood. There are only 10 such machines in the nation and they usually are used to help certain cancer patients.

"It's an old fashioned milk separator, modernized," Dr. B. J. Kennedy explained. While the milk separator spins milk to separate out the cream, the \$27,000 Celltrifuge spins blood to separate out the various components of the blood.

As the youth's blood ran through the machine, all of the blood plasma (the

watery part) was removed and all of the rest (red and white blood cells) was returned to his body.

Antibodies are in the plasma, so this meant all of the youth's antibodies were removed. He was given replacement plasma — from normal donors who did not have any antibodies against AHF.

Then he was safely given injections of AHF. He now had, temporarily, plenty of clotting factor in his body.

The machine treatment took two hours. He was then rushed to surgery, where a neurosurgeon, Dr.

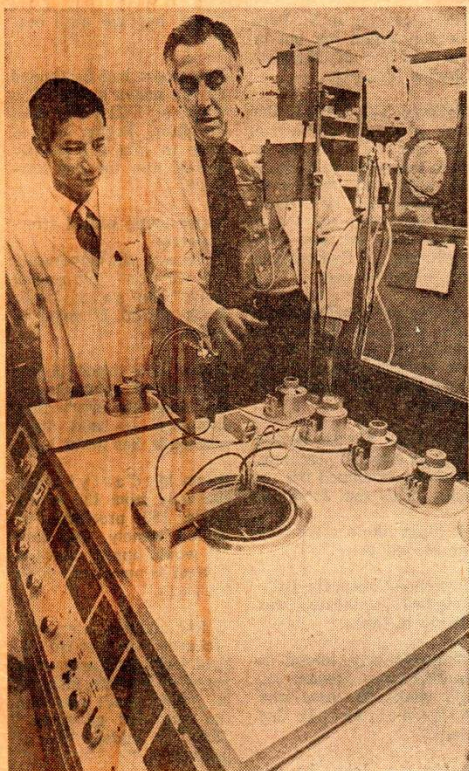
Shelly Chou, was able to operate and stop the bleeding in his brain.

He remained in the hospital for six weeks and now is home doing fine, the doctors reported.

Antibodies against AHF have since reformed in his body, however, and he would have to go through another blood-separation session on the machine before he could receive AHF in some future bleeding crisis.

If there had been time be-

Blood
Continued on page 9B



Staff Photo by Kent Kobersteen

Drs. Shelly Chou, left, and B. J. Kennedy with the Celltrifuge machine used in the operation.



Dr. Roger Edson

Blood

Continued from page 1B

fore surgery, the doctors said, they might have been able to exchange all of the blood in the youth's body with donated whole blood. But this would have taken more than 12 hours, and he never could have survived this long, they said.

Dr. Edson said he expects the new technique will come into use for helping many hemophiliacs with the antibody problems, even when there might be time for whole-blood transfusions. He said hemophiliacs particularly often have adverse reactions to whole-blood transfusions, and the new technique would get around this.

Dr. Edson is an associate professor of laboratory medicine, Dr. Kennedy is a professor of medicine and Dr. Chou is a professor of medicine. Dr. Jeffrey McCullough, director of the blood bank, and Dr. Ignacio Fortuny, associate professor of medicine, also were involved in developing the new technique.

Cancer device saves life of 'bleeder'

By GORDON SLOVUT
Minneapolis Star Staff Writer

University of Minnesota medical scientists said today they used a cell separator machine — bought as a cancer-treatment device — to save the life of a hemophiliac (bleeder)

who needed delicate neurosurgery.

They said the patient, a man in his early 20s who lived in Minnesota, had two major problems:

A life-threatening blood clot in the covering of his brain.

Natural resistance to anti-hemophiliac Factor VIII—the chemical doctors use to make a bleeder's blood clot during surgery or after injury. He produced antibodies which quickly destroyed any of the chemical given him.

That meant, the doctors said, that the brain operation couldn't be performed safely without some new technique.

Dr. Shelley Chou, acting chief of neurosurgery who, with Dr. James Ausman, ultimately performed the successful operation, explained: "In that area (where the operation was to be performed) neurosurgeons prefer to have no bleeding at all" because of potential damage to the brain or nerves.

Dr. B. J. Kennedy, cancer expert and professor of medicine, and his staff decided to use the cell separator machine to remove the plasma from the hemophiliac's blood. The antibodies, which destroy the Factor VIII, are in the plasma. Kennedy's team discarded the plasma, and replaced it with normal plasma.

than two hours, 80 percent of the patient's antibodies to Factor VIII were gone from his blood. He was given large quantities of the clotting chemical and wheeled into a neurosurgery operating room where Chou and Ausman removed the clot.

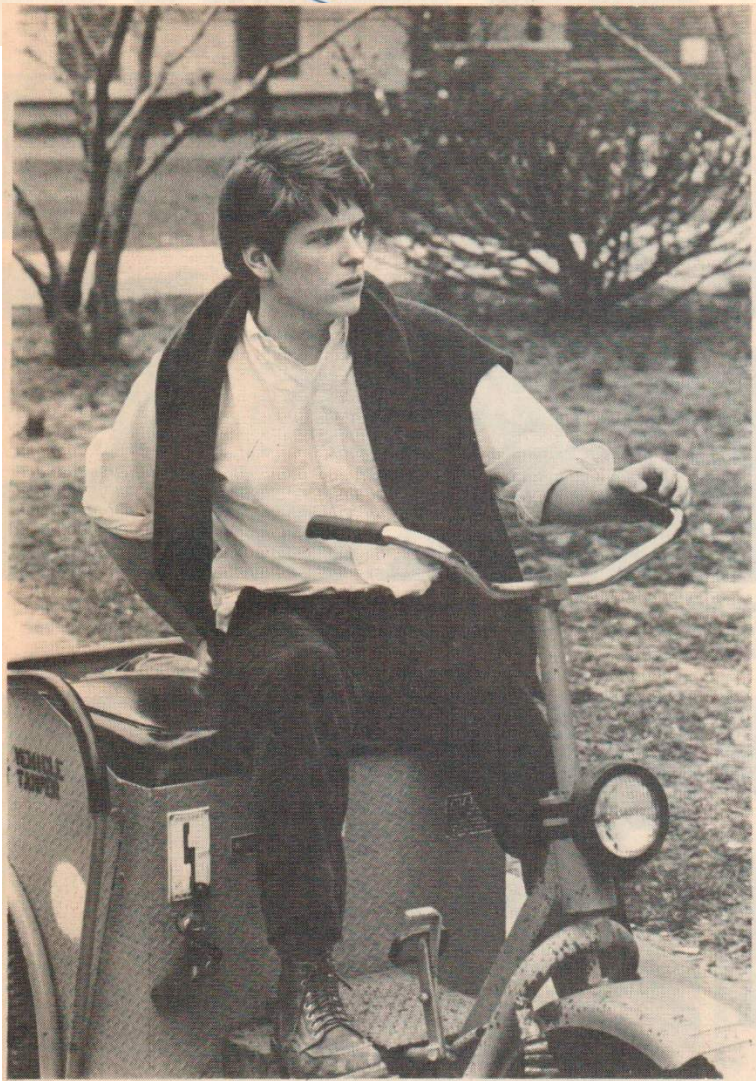
The patient, who underwent surgery earlier this

year, was in good health six weeks after the operation.

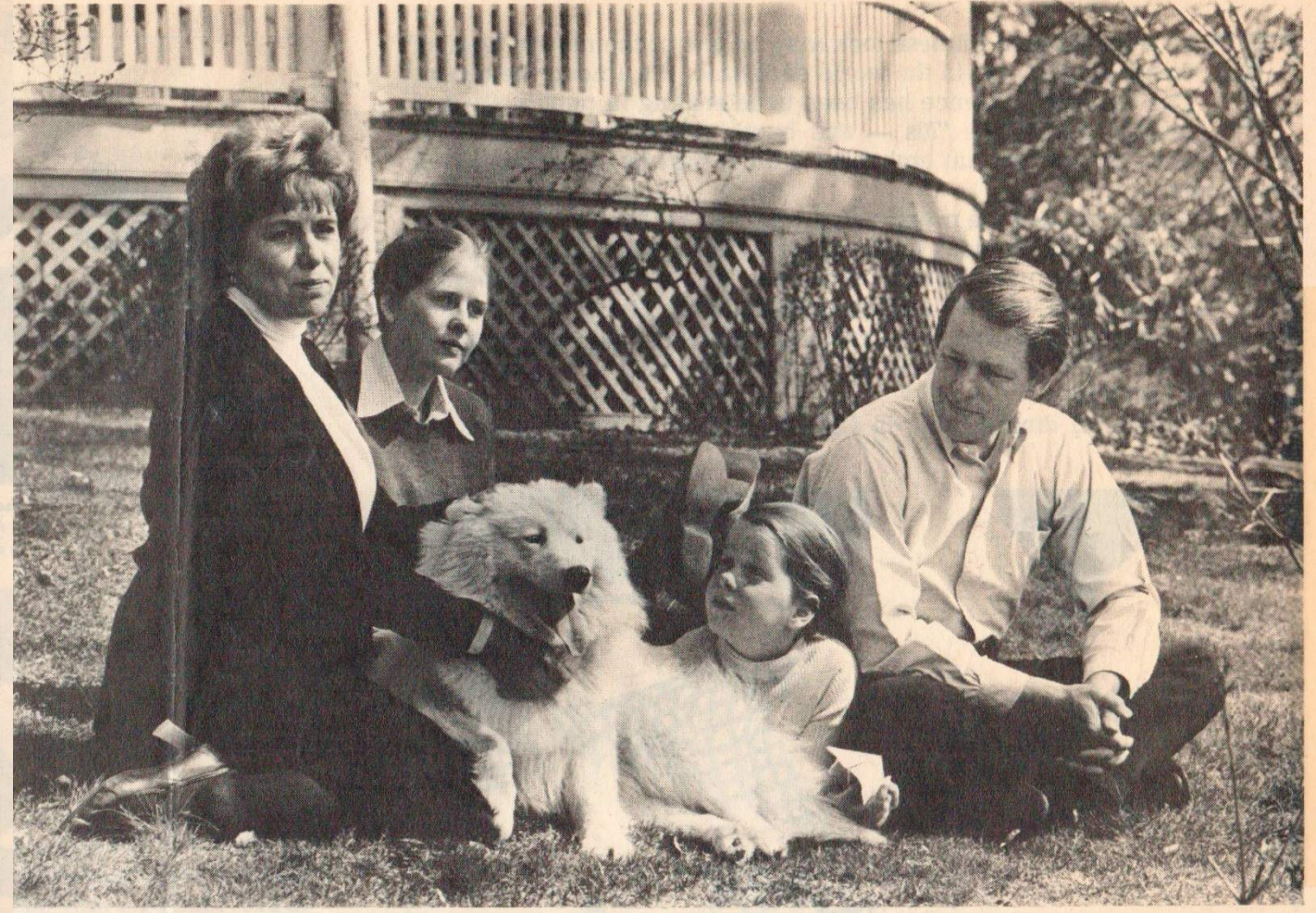
Hemophilia is an inherited disease, passed from mother to son, in which there is a deficiency in the clotting chemicals. The rejection of so-called Factor VIII is relatively rare among hemophiliacs.



A journey with the Massies—



Bobby Massie at Princeton



The Massies at Sunnybank: Suzanne, Susie, Elizabeth and Bob

Photos by Peter Zachary Simins

NEW YORK — The blood of two boys binds the stories of their families: the Romanovs of Russia with Robert and Suzanne Massie.

Split by half a century, divided by two continents, the same curse links them: the hemophilia of their sons.

It was the hemophilia of his own son, Bobby, that led Massie to write "Nicholas and Alexandra." He set the royal couple's struggle with the Tsarevitch's disease against the vortex of a revolution, showing how it brought Rasputin — the bizarre healer from Siberia — to his secret vigils at Tsarkoe Seloe, Livadia, Spala and St. Petersburg.

Nicholas and Alexandra had sought a holy man to exorcise the curse, and found, instead, the mad Rasputin. The Massies' recourse has been writing.

In "Journey," their new autobiography, the Massies tell the story of their son's illness. Their voices alternate the chapters, telling how they have kept Bobby alive — fighting for his blood, struggling against the stony bureaucracy of the pharmaceutical industry and insurance companies and even against the benefits of society groups concerned with "chic" diseases. The two voices of "Journey" make this a family chorus: the emotional, almost litanical, questioning of the mother blends with the language of the father as he explores the scientific side — the language of blood chemistry and plasma, the mechanism of AHF (anti-hemophilic factor).

"Journey" is the parents' story, but the central figure is the son.

Bobby Massie is a freshman at Princeton University, where he is studying Russian, French and economics. Only two things set him apart from any other freshman: outside his room there is a bright orange cart; because of the bleeding of his left knee, Bobby must carefully allot his walking and depends on the cart to get

him around the campus. The second sign — the frosty white bottles of plasma that sit inside the homely refrigerator of his book-filled room. These — by providing his blood with the AHF protein that it lacks — keep him alive. Bobby has been giving himself transfusions every other day since 1970; each transfusion costs \$100.

"I remember discussing the idea of a book about 2½ years ago," says Bobby, who seems older, more articulate, than 18. "We've had an unusual life, with twists and turns — and I hope it will give courage to people who didn't know that life can have such twists."

Why did he urge his parents to write it? "All my life I've had to deal with the stereotypes of people who are ill," says Bobby. "I guess there are really two instincts — one to hide, the other to expose yourself. I wanted them to write it — at the same time, I almost wished someone else would do it."

"What I wanted to show was that I do have these unusual circumstances. What my parents have taught me is to take something that would normally have excluded me and not only conquer it, but almost make it an advantage — that is, something secondary, not the center of life."

What are the "unusual circumstances" that he must deal with? "Constant decision-making," he says. "Am I able to swim today? And how much? If I walk to class, can I walk to the gym too? I have to balance these things."

"I also have to control the effect of the environment on me," he continues. "If I become tense, I have a tendency to bleed, and I must tell myself that whatever it is that's making me tense is just not worth bleeding for."

This summer Bobby will continue his work as an intern with Sen. Henry Jackson, in Washington. Like his mother and father, he has been active in hemophilia research and in crusading for the reform of the blood industry. Last summer, he researched a 60-page report on the pharmaceutical industry. "I certainly feel that the industry should be under some sort of federal supervision," he says. "I'm hesitant to say that the prices are artificially high, but every doctor I've talked to seems to think that AHF could be made for a considerably lower price."

Does he think "Journey" will change his friends' attitudes toward him? "It may be a bit awesome to people who don't know me," he says. "But if they're just curious — well, I can put up with that."

There is much of Bobby Massie in the book: His chapter ends the story; entries from his diaries, up to the age of 14, were used throughout by his parents. This does not seem to bother him. "I guess it was then that I was most isolated," he explains. "My father had just started to write 'Nicholas and Alexandra' when I was 8. I do remember being excluded, but I always thought there was something wrong with people who wanted to exclude me. So I read a lot — useful things and junk, too." He smiles. "And I was very curious about Alexis (the son of Nicholas and Alexandra) and always asked my father about him — what he did, what he liked."

At this point, his roommate, Steve Channock, enters — a tall, gangly music major who is on the swim team. As they walk to lunch, Bobby talks about the attitude toward hemophilia in Paris, where the Massies lived for four years, versus the attitude here. "There are insoluble problems, insoluble personal problems. In

**Bobby Massie is
a hemophiliac...
but instead of
hiding, he urged
his parents to
write a book
about his
illness, a book
they hope will
encourage and
enlighten others**

the U.S. people tend to look for reasons for things. In Europe, there is a heightened sense of the irrational. The importance of the book is that it talks about a problem that is insoluble. It's just part of life.

"Look," he says. "It's a test. If you pass it and you come through, then you're glad you did it. The only thing that is pathetic is to learn nothing

"I think the key transition was never to hide it. I was never afraid of being re-

I'd like to dispel fear."

Putting the book together was done in styles as different as that of the authors' writing. Suzanne commuted to a New York office three days a week for seven months. "On Tuesdays, Wednesdays, and Thursdays I would go there and lock myself up; on Saturday and Sunday, we would exchange materials. Bob can work at home — I can't. Somehow I think a mother is always too conscious of the sounds of the home."

"We always work together — always," she continues. "He helps me put structure in my work, and I think I help him let go a little."

"Sue remembered everything," says Bob, later, strolling on the back lawn. "I think it shows. Her part is more from the heart, really the emotional part. Mine, in a way, is the scientific part. I had to reconstruct everything from old doctor's bills, letters..." What about the title? "That's Sue's — you've got to ask her about that..."

"I didn't want anything too pathetic, too schmaltzy," says Suzanne. "I like simple titles. I chose 'Journey' because it implied an unfinished thing. I think that books should fill the title — not the other way around."

Close friends say that it was a "very difficult" book for the Massies to write — more difficult than the "intellectual exercise" of "Nicholas and Alexandra. Was it?

"I think I would say emotionally punishing," says Bob.

"If this has taught me one thing," says Suzanne, "it's that there is much in life

hide it. I was never afraid of being rejected, since my family and my friends were always behind me, particularly my family. Well, you should really talk to them."

Robert and Suzanne Massie live in a rambling white house, surrounded by immense maples and elms, that overlooks the Hudson in Irvington, N.Y.

"My Russian friends always tell me this house has soul," says Suzanne of Sunnybank, their home. There is something Chekovian about the silence of the woods around it, the eclecticism of the rooms and their colors. Bulging cabinets, lined with books, are everywhere; the piano at the entrance is piled with photographs, mail, children's drawings. "Our cat population is multiplying," says Bob, who still has boyish good looks and a gentle sense of humor. Suzanne is dressed in her version of a Russian outfit: white overblouse, passementerie belt and black skirt.

Sitting in the deep red library with its Russian memorabilia — interrupted occasionally by their daughters, Susie and Elizabeth, and their dog, Dushka — the Massies talk about their "Journey."

"I had never wanted to tell this kind of story before," admits Bob. "So I wrote 'Nicholas and Alexandra' instead." How, then, did "Journey" come about? "There came a point when it seemed the right thing to do. Bobby was leaving. That was the key moment, when a child leaves home. He urged us to write it; we didn't want to inflict it on him before."

"We came back from Europe and found that, as far as health problems go, the United States was still far behind," he continues. "The book is intended to help people face a permanent catastrophic illness — it's meant to help them psychologically, true. But it's also intended to spur some action on health insurance. We have to pay \$10,000 to \$15,000 for a permanent catastrophe. I feel it's wrong for one of the richest countries in the world to ignore its sick children; that's why we wanted to tell one story, our story."

"There are thousands of children who cannot afford to pay," says Suzanne. "But I really don't think, Bob, that we meant this as a tirade."

"No, of course not," he answers, "but I certainly didn't write this as a memoir either. I hope that people will act."

"Obviously we didn't set out to make this just an ego exercise," says Suzanne, who is adamant about the emotional — almost spiritual — side of the book. "I felt it was very important to show the feeling of being excluded. I have seen so many children and women sitting, waiting in those hospitals and doctors' offices."

"I hope that people will be encouraged to identify with us. I wanted to make sure that it's clear, too, that Bobby's problem is relative. I realized that, relatively, we were very lucky."

"The most wonderful thing would be to accomplish something," she continues. "The real success would be opening a few people's eyes so that some will reach out and understand how wrong it is, this excluding of the chronically ill. There are 9 million handicapped children in the U.S."

U DOCTORS HAIL 'VASTLY UPDATED CREAM SEPARATOR'

Machine Saves Life of Hemophiliac Surgical Patient

By ROGER BERGERSON
Staff Writer

The life of a 20-year-old St. Paul man suffering from a complication of acute hemophilia was saved during recent weeks by a machine described Wednesday by University of Minnesota doctors as a "vastly updated cream separator."

Dr. B. J. Kennedy told a press conference in Uni-

versity Hospitals that a "logical spinoff" of cancer research in other areas allowed the saving of the life of the patient in need of brain surgery who a few years ago would have died because of insufficient technology.

Suffering from the disease of "easy bleeders," the man in question possessed blood deficient in the protein which causes

clotting, Kennedy said.

But in addition, the doctor said, it was a condition producing antibodies making it impossible to "flush" the body with normal blood cells as is usually done prior to surgery.

When a brain hemorrhage was suffered by the patient, therefore, Kennedy said, use was made of a "cell separator," pre-

viously employed in the transfusion of white blood cells of leukemia victims to protect them from infection during chemical treatment.

The body's normal defense mechanism against disease thus was bypassed; the antibodies which otherwise would have destroyed the material designed to help the patient's blood clot prop-

erly were rapidly reduced.

"Six years ago, any hemophiliac with intracranial hemorrhage would die," he stated flatly.

In the case of the St. Paul man, Dr. Shelly Chou, a member of the neurosurgical team that labored through the night in this instance, told the

press conference that the ordinary practice of transfusing whole blood would not have saved the patient's life.

"It was absolutely necessary not only to prevent bleeding during surgery but also the postoperative period of 10 to 12 days," he said.

The patient returned home more than a week ago.

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May 1987
Elaine Bostinger Dr. Herb Polesky

①



① Jerry Harmon, CEO -
Memorial Blood centers
of MN receiving appreciation
plaque from Elizabeth Klein,
HFMD Exec. Dir. 11/93



② Elizabeth Klein, Rosemary Kaisershot

③



④



③④ Harold and Sari Naiditch
participating in a panel
presentation (about living
with HIV/AIDS) at a local
MN Dept. of Ed. Conference. 11/93

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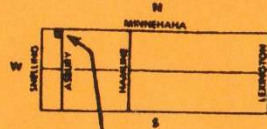
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BASSOON



A FREE WILL OFFERING WILL BENEFIT THE MINNESOTA HEMOPHILIA FOUNDATIONS'S PROJECT
FOR WOMEN ASSOCIATED WITH HEMOPHILIACS AND PROBLEMS OF BLEEDS AND CONTAMINATED
BLOOD: A LONG-RANGE PROJECT OF ZONTA ST. PAUL



LOCATION:



KNOX PRESBYTERIAN CHURCH
1536 W. MINNEHAHA AVENUE
ST. PAUL, MINNESOTA 55104