

PE1408/A

NHS Highland Letter of 12 December 2011

Thank you for the opportunity to respond to the Scottish Parliament Public Petition PE1408 -Vitamin B12 deficiency / Pernicious Anaemia.

In relation to the action points raised in the summary,

- We would agree that Doctors (and medical students) require education on the symptoms of B12 deficiency. As B12 is required for the production of DNA which is found in all cells of the body, deficiency may indeed cause a multi-system disorder producing a potential wide range of symptoms.
- We accept that the diagnosis of B12 deficiency is not foolproof at the present time. The Active-B12 Test (Axis-Shield Diagnostics) is clearly an interesting diagnostic test and ideally should be the subject of a Health Technology Appraisal. This will help to establish the frequency of false positive and negative results of this specific assay compared with existing tests.
- Whilst we cannot support an 'automatic trial' of B12 injections in patients with no laboratory evidence of B12 deficiency, better diagnostic techniques would allow treatment to be targeted appropriately.
- We would accept that B12 deficiency is often accompanied by other auto-immune disorders and haematinic deficiencies and it seems logical to ensure that cognisance of this is taken into account in newly diagnosed patients.
- We note that the Pernicious Anaemia Society is currently undertaking a research trial to assess the ideal dosage and frequency of B12 replacement therapy. The results of this study are eagerly awaited and will inform us on how best to treat patients with B12 deficiency.