A.la unach

Tel. No. 55526.

6th December, 1943.

Dear Cappell,

Enclosed is a paper in which risher outlines the objects and suggested procedures of the research he proposed.

With regard to the procedures:-

- (1) Women of forty will have had their families, and their husbands will probably be at home and available. Greater numbers would result if the age were 35 and upwards; would this be practicable?
- (4) If you are agreeable the full the analysis might be done in Cambridge; and we think that, as the greatest difficulty is the collection of samples, it would be a pity not to examine fully all samples from father, mother and children. They would provide admirable family material. If you sent the clots after you had made your tests we could get the necessary cells. This means, of course, a further sample from the mother.
- (6) We think that ante-natal clinic material would be less desirable owing to selection; it is likely to contain an undue proportion of women who have had misfortunes. Women on the ordinary donor panel would seem to be the ones for work with.

Yours sincerely,

[q. L. Taylor] - JHB.

Professor Cappell, Royal Infirmary, Dundee. To enquire whether, as had been supposed, there is any genic selection antagonistic to m, the answers to the following questions would be helpful:

- (a) Do rhrh women produce fewer (or more) surviving children than Rh+ women?
- (b) Is the number of surviving children influenced by type of husband?
- (c) In what proportion are their children Rh+ or Negative?
- List all married women Rh-negative registered donors
  of forty years of age and upwards (35 upwards if there
  are not too many).
- Select control group of Rh-positive married women with the same age-limitation. About equal numbers, e.g. about 150 of each.
- Obtain the numbers of children now living born to each of these groups.
- Blood-samples for all available husbands of Rhnegative group for full Rh analysis, i.e. (apart from exceptions) into five classes,

RIRI, RIRE, Rir, Rer or ReRe, and rr.

5. All available children of the fourth class to be tested for Rh+ or -, for the further discrimination of the husbands of this ambiguous class. (Perhaps 20 families). (P.T.O.) 6. If it appears practicable, and can be done without selective preference for families having a history of miscarriage, erythroblastosis, etc., Rh+ or - test will be desirable for all children, now accessible, of Rh-mothers.