Nomination of WFH Task Forces – Haemophilia Action Group

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The discussions in the involvement of the Workshops have led to the recommendations reported elsewhere in this issue. They have evolved into Task Forces. The constitution of the Federation confers upon the World Federation of Hemophilia executives' responsibility for the establishment of committees; therefore, the executive has authorized the creation of the Task Forces' committees. This development has evolved over 2 years of dedicated activity and involves the distinguished individuals who have presided over the Workshops.

We first met in Woodstock, England, thereafter a meeting was in London, then one in Bonn, two were in Tel Aviv and Milan, again one was in Bonn, and then Professor George and Dr. Inwood came again to Bonn. Then we all met in Boston; this was followed by a meeting in Montreal during the Congress of the International Society of Haematology and Blood Transfusion. Then Amsterdam, one night on the Rhine River, and finally 3 days and nights in Bonn. There were long nights of intensive study and discussion. The structure is a Haemophilia Action Group with two chairpersons on Comprehensive Care (Task Force I Committee) ; two chairpersons on Resources and Supportive Services (Task Force II Committee); two chairpersons on National Haemophilia Organizations (Task Force III Committee).

I wish to reiterate that each of the new Task Forces function within and complement existing structures. The Task Force members are Prof. Ronald George, Prof. Klaus Schimpf, Dr. Franz Etzel, Dr. Antony Britten, Dr. Martin Inwood, Prof. Hans Egli, Prof. Peter Levine, Dr. Hans-Hermann Brackmann, and myself. Because of our and their involvement and experience gained over a year's work, the Federation executive have asked these individuals to chair their respective Task Forces evolving from the Workshops. We have created a coordinating committee, called the Haemophilia Action Group, chaired by Dr. Inwood and Prof. Egli. Their priority will be to provide terms of reference, who will do the work, who will be recruited from the broadest possible geographical representation. In San José, Costa Rica, the site of the next congress in July 1981, and in Stockholm, Sweden, 1983, the concept that has been discussed here of parity of the socio-medical sector and the

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involvement of haemophiliacs will be inherently part of these congresses.

I must reiterate that this new format in no way diminishes the scientific component. It remains a totally vital and important part of our congresses. We have added a new format, a new dimension to find ways, and means to complement the vast knowledge and expertise being provided by the scien-

tific sessions and the physicians around the world. Thus, we have created this new structure to serve the haemophiliac and the national member organizations.