
longed with no bleeding phenomenon, Fletcher factor deficiency has to be considered and searched for.

Letter to the Editor

Fletcher Factor Deficiency

To the Editor,

I would like to thank to Dr. Abdullah Kutlar for his case report on Fletcher-factor deficiency, appeared in Turkish Journal of Haematology 2002;9:417-419^[1].

I had a similar case in Frenchay Hospital in Bristol, U.K. in 1978. At that time I was working in Haematology Department in Frenchay Hospital with Dr. Robert D. Eastham. It was a surgery hospital in fact but we had a very good laboratory on hypercoagulability and thrombosis.

The patient was an old man and had gastric carcinoma and was going have an operation. I was involved doing presurgical tests including PT, aPTT, fibrinogen, thrombocyte count, bleeding time. All the tests were normal except prolonged aPTT. The patient had no bleeding problem in the past even in some kind of operations. At end of the study in the laboratory, Fletcher factor deficiency was diagnosed, the patient operated upon with no bleeding^[2]. Meanwhile Flaujeak factor deficiency had been excluded in which patients described in the literature were bruises with minor traumas^[3].

I strongly suggest that when aPTT was found pro-

REFERENCES

1. Üstün C, Jillela A, Hendriks L, Jonah M, Kutlar F, Butgess R, Kutlar A. Prolonged partial thromboplastin time without bleeding history. Turk J Haematol, 2002;19:417-9.
2. Wuepper KD. Prekallikrein deficiency in man. J Exp Med 1973;138:1345-55.
3. Eastham RD, Slade RR (eds). Clinical Haematology. 7th ed. London: Butterworth Heinemann Publication, 1992:147-8.

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