MR. B. BRENNA

(Health)

NOT FOR PUBLICATION

<u>Chairman</u>: Members:

Observers:

ACDP/81/M1

MINUTES OF THE INAUGURAL MEETING OF THE ADVISORY COMMITTEE ON DANGEROUS PATHOGENS (ACDP) ON WEDNESDAY 3 JUNE 1981 AT THE DEPARTMENT OF HEALTH AND SOCIAL SECURITY, HANNIBAL HOUSE, LONDON SE1 COMMENCING 10.30

1. PRESENT:

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Rt. Hon.	Dr Gerard	Vaughan	MP	Minister	of	State
Dr D A J	Tyrrell					
Mr F J Ba	aker					
Mr A J Ba	arrow				•	
Dr R T D	Emond					
Dr R J Fa	allon					
Prof. K 1	3 Fraser					
Dr A J Ro	owland					
Dr D I H	Simpson					
Dr C E Wi	•					
Prof. P V						
	liams Smith	۱ _				
Mrs L Cla						
Dr R R Da						
Ms S McKe						
Dr R Ower						
Dr P Mugg						
	Whitehead					
Prof. H]	. winner					
Mr M Chap	man		MAF	F		
Mr J R Si	mmons		MAF	F		
Dr M C Wi			MOD			
Mr R A De	vid		HSE	/EMAS		
Dr D O Ha	ines			/EMAS		
Mr W E O			HSE	/EMAS		
Dr R Nour				/HMFI		
Dr R M Ol			DHS			
Mr R E Tr	•		DHS	S		
Dr R H Ra	•	•	DHS			
Mr W A Wa			DHS			
Miss L Gr	egory		DHS	S.		
Mr E J Mo	rris		HSE	/EMAS		
Dr D L H	Robinson		DHS			
M- D D C-	ninoc		UCP	/EMAS		
Mr B D Sq	ur Les		nop	/ Lunio		

Joint Secretaries: Minutes Secretary:

2. APOLOGIES FOR ABSENCE:

Apologies for absence were received from Mr M C Bryant, Prof. J A Scott and Dr R F Sellars.

ITEM 1 : OPENING STATEMENT BY THE MINISTER OF STATE:

3. Following introduction by the Chairman, <u>Dr Vaughan</u> welcomed those present and thanked Dr Tyrrell for accepting the Chairmanship of the Committee. Commenting that the Committee had been established by the Health and Safety Commission and the Health and Agriculture Ministers, he drew attention to the wide range of interests involved, as reflected in the terms of reference, and the composition of the Committee, which comprised not only medical and scientific experts but also employer and employee representatives.

4. He commended DPAG for its valuable work concerning Category A pathogens but emphasised that the ACDP would have to deal in addition with a broad rang of other pathogens. The Agenda of the first meeting indicated the important work to be undertaken which would require the most careful consideration and the best possible scientific advice and which would have important implications for employers, employees and the public interest. He had no doubts that the Committee were well equipped for the task and would await the results of their work with interest.

Dr Vaughan then asked Dr Tyrrell to open the meeting.

ITEM 2 : STATEMENT BY THE CHAIRMAN:

5. Thanking Dr Vaughan for his opening address, <u>Dr Tyrrell</u> also welcomed those present and explained how the Committee had developed and how he saw the way ahead. He considered the Committee would need to look at the work of Godber, DPAG, Howie, the US and the World Health Organisation, with a view to forming standards which took account of international practice.

6. He considered that, although the main role of the Committee was an advisory one, this advice could be enforced where necessary by HSE. The advice must therefore be logical and realistic.

7. The Committee needed to represent a wide range of interests and was therefore relatively large. Its size might create difficulties when discussing some scientific and technical matters in detail but it was essential that everyone had ample opportunity to contribute and all opinions would be valued.

8. Commenting on the size of the Committee, <u>the Minister</u> said this had been consciously formed; in looking at the membership it had been the intention not to represent factions but to provide a comprehensive body of expertise. Whilst keen to take the Committee's advice, Departments would of course, need to look at the practical implementations.

ITEM 3 : TERMS OF REFERENCE AND PROCEDURES: (ACDP/81/P1)

9. In introducing this paper, the joint Secretary (Mr Morris) summarised the Committee's functions and responsibilities drawing particular attention to the important differences between DPAG and ACDP and the need to set up Working Groups to undertake the detailed preliminary work on certain matters.

10. <u>Ms McKechnie</u> expressed concern that the Terms of Reference of the Committee were very broad also that the Agenda included such matters as Item 6 (Classification of hepatitis B virus Category B2) which she considered should more properly be dealt with by the Health Services Industry Advisory Committee; matters such as Item 6 could directly influence occupational safety standards in a particular industry and therefore, in her view, should not be considered at that practical level by the ACDP.

11. <u>The Minister</u> hoped that all committee Members would work together but if the Terms of Reference were unacceptable to her then she might wish to reconsider her position.

12. <u>Dr Owen</u> said that the TUC welcomed the opportunity to participate in the work of this Committee in the same way as it participated in other Committees whose remit covered microbiological problems: for example the Health and Safety Commission and several of its Committees, perhaps especially the Health Services Industry Advisory Committee and (soon) the Education Industry Advisory Committee; the Genetic Manipulation Advisory Group under DES is also relevant. As on those Committees, the TUC representatives would be consulting within the Trade Union Organisation, including with professional colleagues, on matters which might affect members of the affiliated unions. The TUC nominees did not sit as individuals or representatives of particular trade unions but as representatives of the General Council of the TUC.

13. A general discussion followed on the paper ACDP/81/P1 concerning the terms of reference and procedures. The term 'Dangerous Pathogens' in the title of the Committee was considered and the Minister acknowledged the Chairman's comment that, should it be found that this term impeded the work of the Committee, consideration could then perhaps be given to an amendment.

14. It was agreed that confidentiality of the committee proceedings should normally present no difficulties and that a procedure similar to that used by GMAG where members declared their interests might usefully be applied on 'Commercial in Confidence' issues.

15. The Minister then left the meeting.

ITEM 4 : CLASSIFICATION OF PATHOGENS (ACDP/81/P2)

16. In his presentation the joint Secretary (Mr Morris) commented that the paper provided the background indicating the need for a review of the classification of pathogens according to their risk and for related containment requirements. A Working Group would seem appropriate to carry out the preliminary detailed work and to prepare a paper on the subject for the consideration of the main Committee.

17. <u>The Chairman</u> said that classification was the major task coming before the Committee and considered the reference to the US and WHO categorisations to be particularly important.

18. In the ensuing discussion various points were raised which it was felt could be taken into account by the Working Group in their assessment viz.

a. Epidemiology of occupationally acquired diseases, and not only of natural diseases, should be considered when assessing risks.

b. The committee was only concerned with human pathogens.

c. Classification should be developed totake account of international developments, in an ascending order of hazards, possibly adopting WHO guidelines.

d. The system suggested in the US document where hazards were related not only to pathogenicity but also to the type of work undertaken should be considered.

e. The pathogens to be considered should initially be those listed in the Godber and Howie publications with the probability of a more comprehensive list in due course.

f. It might be possible to quantify risks using a similar system to that employed by GMAG where factors such as Access, Expression and Damage could be suitably amended.

19. <u>The Chairman</u> proposed that a Working Group should be set up to consider classification, comprising:-

Professor Wildy Chairman Dr Simpson Dr Fallon Dr Williams Smith Dr Whitehead Dr Owen Mr Baker

Dr Nourish HSE and Mr Chapman MAFF to attend as Observers.

(19). <u>This was agreed by the Committee</u>. <u>Dr Williams Smith</u> asked to withdraw his name from the Group but emphasised he would be pleased to help all he could. <u>Dr Owen</u> asked if he could confirm whether he or another TUC representative would attend the Working Group. Whilst it was accepted that any Committee Member could attend the Working Group meeting or that outsiders could be co-opted on to a Group, Professor Wildy stressed that the meeting should not be too large as this could hinder the primary function of drafting a paper for the later consideration of the main Committee.

20. The Working Group were asked to prepare a preliminary paper on classification for consideration by the main Committee at the next ACDP meeting on 14 October 1981. Professor Wildy asked Members to assist the Working Group by sending their ideas to him.

ITEM 5 : CLASSIFICATION OF SIMIAN HERPES B VIRUS (ACDP/81/P3)

21. The joint secretary, <u>Dr Robinson</u> in his introduction to the paper, commented that the main risks occurred only when infected animals were handled. The infection was 'dead end' and maintaining Category A status for all work levels might delay treatment to an infected person by requiring transfer to a high security infectious disease unit rather than admission to the nearest hospital. The MRC Simian Virus Committee had referred these views to DPAG requesting that Category A status be maintained only where work involved animals.

22. In discussion, some reservations were held on making a quick decision at this time and preference was expressed for awaiting the outcome of the classification study by the Working Group. It was pointed out, however, that DPAG had already made the decision to accept Category A pathogen requirements only for animal work with this virus and that ACDP should accept this ruling on an interim basis.

23. It was noted that only one laboratory, at present, handled the virus at both laboratory and experimental animal levels and that HSE had already completed an inspection of that laboratory.

24. <u>The Chairman</u> suggested that the DPAG recommendation should simply be endorsed, noting that it was already implemented at the one laboratory at present using this virus, and <u>the Committee agreed</u>. The Committee also agreed that this could also apply, on an interim basis, to other laboratories that wished to work with Simian Herpes B virus in the future and until ACDP had completed its review on the categorisation of pathogens.

ITEM 6 : CONSIDERATION OF CLASSIFICATION OF HEPATITIS B VIRUS CATEGORY B2 SPECIMENS (ACDP/81/P4)

25. Introducing the paper, <u>the joint Secretary</u> (Dr Robinson) said that arising from the Howie Code of Practice, a joint Working Party of a number of professional organisations prepared a case to regrade Hepatitis B virus specimens from Category B2 to C. Following consultation, opposition was received from some of the unions representing staff interests. DHSS and HSE had now put this to the Committee for advice, suggesting that it might best be considered initially by a small Working Group.

26. <u>Ms McKechnie</u> pointed out that Category B was the Howie assessment of risk, B2 referred only to a class of specimens. ACDP was not the proper committee to consider working conditions in particular industries and she considered the matter should be referred to the Health Services Industry Advisory Committee. She commented that the ASTMS paper had been prepared not for the ACDP but for a DHSS Working Group and as ACDP had no new evidence the matter should not be considered at the meeting.

27. <u>The Chairman</u> asked for views and reminded the Committee that their advice had been requested by the end of the year.

28. It was noted that the Howie Committee had expected that the Code of Practice would need to be reviewed; the containment requirements for specimens had been based on the risk of infection by the aerosol route but this had not been proved for Hepatitis B virus. The Committee had been asked to consider this matter separately from classification in general to determine the level of containment required before the final implementation date of the Howie Code in April 1982. Some laboratories had already purchased equipment to comply with the Howie recommendations.

29. The Chairman concluded that it was not possible to make an immediate decision on this matter; more data should be obtained on epidemiology, on infectivity via the respiratory route and on the possibility of vaccination and this should be presented to the next meeting of the Committee. This was agreed.

ITEM 7 : DATES AND TIMES OF FUTURE MEETINGS

30. It was agreed that meetings should be held on:

Wednesday 14 October 1981 and Wednesday 9 December 1981

time and venue to be advised.

ITEM 8 : ANY OTHER BUSINESS

31. The question was raised whether it would be the intention of the Committee to produce codes of practice for handling pathogenic materials in laboratories. The Committee was informed that it had always been intended that ACDP would be advising the HSC and HSE on codes of practice and that this was specifically stated in the ACDP's terms of reference.

32. The meeting closed at 15.55.