M'Consider of Layer we should try to expand the study to include M'Consider of the study to include this does not cause too long a delay GRO-C 31.1.91

Rejman avan CC M'Fuller. Date: 29 Jan 1990

Copies: Dr J Metters - Copies.

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Mr K Gill

## POLICY / COMMERCIAL - IN CONFIDENCE

ORTHO - WELLCOME JOINT PROPOSALS FOR VIROLOGICAL SCREENING OF BLOOD SUPPLIES - UKBTS UPDATE

Andrzej / John

## Summary

Informal discussions with Ortho representatives suggest that they are hopeful of getting a price of £2.30 per test for HCV Ab detection kits, based on Regional contracts. Wellcome are not in the field. Strong suggestions of competition are materialising. We should undertake to obtain equivalent evaluation data on products from UBI (a US company), and Organon Teknika (European) with all haste - I seek support for extending the previous study.

Background

I attended the Ortho/Wellcome "Roadshow" on monday 28th, at North London RTC. The proposals are to add Ortho HCV to the range of Wellcome virological tests presently performed in RTCs " with the minimum disruption". Nothing new is being offered.

A range of purchase options is "on offer". This obviously begs the question : Do the RTCs need replacement equipment, and if so do they need it now?

There will be obvious pressure from RTC Directors to take advantage of this "package" if there is a percieved need to replace any capital equipment, even if on a "Reagent-lease ".

The Ortho product under discussion was the "HCV 2". This hasnot been evaluated by us, yet. It claims greater specificity than the previous "First generation" product. Also being discussed was a new format RIBA supplementary product, again claiming greater specificity due to addition of new epitopes (C33-c and C22). The tone of the general discussion appeared to be to play down any progress that Abbott may have made.

A commercially available test panel (Boston Biomedical) appears to be used as "Industry standard" for determining sensitivity. All "clinical" samples referred to were single donors bled on weekly intervals and the game was to detect HCV Ab as soon as possible. This was not achieved before ALT peak was reached, nor were any results correlated with PCR result. RIBA results did suggest a reduction in "false positive" numbers from that obtained with the first generation screen.

Please Lips /CONT.

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Discussion with the head of R&D, Wellcome, suggested that the costs of kit manufacture had been stable for some considerable time, and had, in fact, been greatly reduced by use of recombinant technology. The single most expensive item, by far, was the plastics plate (NUNC, high quality polypropylene) - this at 5 pence per test in contribution.

## Proposed progress

- 1. PD colleagues Eric Evans and Ken Gill have been in touch with competitors, who suggest prices as low as \$ US 2.00 for large volume contracts. These (UBI and AKZO Organon) need evaluating, and the financial background of UBI must be ascertained.
- 2. These should be used now as leverage on Ortho. Abbott are a problem where "Commander" systems have tied-in RTCs, but the "national price" will have to be met by them.
- 3. We need to know the equipment status of the RTCs Harold Gunson should be able to advise. I consider this an irelevance.
- 4. The country can ideally be then split up to give a non-dominant share to each suitable product, all of the rest being bog-standard ELISA format.

I shall update you on any negotiations we anticipate setting up, and will stand by to be updated on progress of submission.

Please respond ASAP to request for extra evaluation funding, with backing of JSM, perhaps.

**GRO-C** 

Mark Fuller PGIC 711 RSQ GRO-C

Andrey - wit this Are, can I also have: - as well as answer to 3 above;

- ) DO PHL/NBTS have into livew of UBI and/or Organia Teknika lats?
- 2) Are they worth evaluating? I think they may be "1st Generation"?
- 3) If yes to (H), can they do it now?
- 4) How soon will we get answers?
- 3) How much will they charge us?
- 6) Do they see any need to "reendude" Unto "HCV-2".?

GRO-C