

**National Blood Transfusion Service**

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Our ref: HHG/LM

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Your ref:

Please ask for:

Date: 19th April, 1984

Dr. E. Harris,
Department of Health and Social Security,
Alexander Fleming House,
Elephant and Castle,
LONDON,
SE1 6BY.

Dear Ed,

I enclose as promised a copy of Dr. Wallington's application to the MRC for the non-specific screening tests on blood donors.

You will recall that these proposals came about following discussions in the AIDS Working Group of the Central Committee for Research and Development in Blood Transfusion. Although Dr. Wallington was nominated to put forward the proposals he will be working closely with other members of the Group in this study.

Various aspects of AIDS in relation to blood transfusion have been considered by the Working Group and it was agreed that the most important contribution we could make was to examine the value of non-specific tests for donor screening. Of these tests anti-Hepatitis core is the one which appears to be most appropriate if it were decided to introduce this as a routine into R.T.C.'s. This test will be performed on the blood of 10,000 donors at two R.T.C.'s (Edware and Bristol) when approximately 500 positive reactors will be found. On the positive blood samples other tests, which have been found to be abnormal in a proportion of patients with AIDS, will be performed viz; α -interferon, β_2 microglobulin immune complexes, TPHA, antibodies to HTLV and immunoglobulin levels. The donors found positive for anti-HBc and an equal number of matched controls will be interviewed sensitively to determine their life style.

I think that it is very important that this study is put into operation since I fear that we may otherwise be forced into anti-HBc screening by events taking place in the U.S.A. We have heard that some of the commercial operators are considering routine anti-HBc screening on their plasmapheresis donors and I attach to this letter a copy of the recent AABB newsbrief in which you will note that Irwin Memorial Blood Bank in San Francisco are to institute anti-HBc screening of donors from 1st May. There is also an article on the report of the Study Group on AIDS where there was divided opinion on the value of anti-HBc screening and there is an interesting comment that pilot studies should be instituted on β_2 microglobulin screening, which will constitute part of our proposed study. Implications for the introduction

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of such screening throughout the Country are considerable; the cost of reagents alone would add £1M to the Transfusion Service revenue and in addition there would be the requirement for additional staff and in some R.T.C.'s additional space.

The proposed study, it must be said, may not identify anyone with AIDS, but it may give an indication that certain persons in high risk groups can be identified in a manner other than self-selection.

I hope you are in agreement with the proposals and that you will agree to elicit help from the Chief Scientist in the form of a letter to the MRC.

With kind regards.

Yours sincerely,

GRO-C

H.H. GUNSON,
Director.

Encs.

c.c. Dr. A. Smithies - D.H.S.S.