Mat K — For BLK/5 please BLK/5

GRO-C 28/8

Mr Arthur

FORTHCOMING PAPER IN THE LANCET ON AIDS

Attached is a draft question and answer briefing which may be useful for officials always supposing there is much reaction on the publication of Dr Weiss and Dr Teddor's paper. Any comments are welcomed from those to whom this is copied so that it can be used for any Ministerial briefing which might be necessary.

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22 August 1984

cc Dr Abrams
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PUBLICATION OF A PAPER IN THE LANCET ON THE USE OF A SCREENING TEST FOR AIDS DEVISED BY TEAMS AT THE INSTITUTE OF CANCER RESEARCH AND THE MIDDLESEX HOSPITAL

The Test

Officials have been aware for some weeks that research workers have developed a test which detects antibody in the serum of AIDS patients and others to HTLV III and LAV viruses both of which are believed to be agents involved in the development of AIDS. The test is based on isolates of HTLV III obtained from Dr Gallo's laboratory at the National Institutes of Health, Bethesda, USA who made them available to research workers in the UK on the basis of exchange of material resorted to by such people. The test appears to be sensitive and specific and is possibly more reliable than other tests currently available in the USA and elsewhere. The researches are to be congratulated for their rapid development of this test. Details of the test are available to all with knowledge of these techniques who could also develop similar tests from the information provided in the published paper.

The Results

The results of the test seem to confirm that individuals suffering from AIDS and those who may be developing AIDS itself or a milder form of the disease carry an antibody in their blood. Other groups known to be at high risk for AIDS also show a high percentage of individuals

with the antibody. It is not yet known what this means. It may mean that they have been infected with the agent or have overcome it but still retain evidence of immunity to it. It could mean that they have recently been infected with the agent and have yet to develop resistence to it or on the otherhand they may be incubating it (it is thought probably that the incubation period may be at least 2 years) and will succumb to the disease at some time in the future. However, we have no way of knowing that these patients with antibody, but who are in good health,will necessarily develop the disease. Much further work needs to be done to establish just what the presence of antibody means. [The situation is similar to that of the time when antibody to Australia antigin of Hepatitis was found. In due course it became evident that carriers of the antibody were protected against hepatitis.]

Haemophiliac patients with antibody to HTLV III

The proportion of haemophiliac patients amongst the relatively small number who were tested is high. It must be stressed that at present the significance of this finding is not yet clear. However, in all the studies carried out on groups of patients so far there does seem to be evidence that haemophiliac patients are a group at risk presumably because of the therapy they require with Factor VIII most of which is obtained from human blood. It is well known that the UK is not self-sufficient in the production of Factor VIII concentrate which is required to treat 4,500 patients suffering from the disease. Building

of the plant required to extract it from blood donations given in this country is going ahead and it is expected that self-sufficiency in Factor VIII will be obtained by 1987/88. In the meantime sufferers from haemophilia must be supported with Factor VIII concentrates obtained from abroad. Whilst firms who provide this substance endeavour to ensure that those at risk of AIDS do not donate their blood, until a test is developed that can be used to screen all blood donations no guarantee can be given that some donations may not be free from the AIDS agent.

Is the test going to be used in the UK to ensure our blood donations are free of the risk of causing AIDS

The preliminary reports of the use of the test are very encouraging in that they show that all the blood donors tested did not carry any antibody to AIDS. It is hoped that this test will be extended as we learn more about the meaning of the test to a larger number of donors. It is in a very early stage yet and the reagents necessary to carry out the tests are only in short supply. [Officials have contacted the US Assistant Secretary for Health to obtain his agreement to the use of Dr Gallo's isolate to a scaling up of the production of the test. As this isolate has been licensed to 5 American drug companies there may not be a favourable response to this request. On the other hand there is as yet no evidence of a marketable product from one of these companies in the UK. Work is continuing in the UK to obtain our own isolate of HTLV III from which the test could be developed.]

Is it true that laboratory staff have been exposed to AIDS during the development of this test

It is true that in June an extraction pump which might have been better placed inside a safety cabinet was used during development of the reagent. Because of precautions taken in using this pump it seems unlikely that any AIDS agent was released into the laboratory. Tests on the staff indicate that no one is infected. There is good evidence that the AIDS agent is not transmitted in day to day contact but through contact with blood. No further work has been done on the agent in this laboratory since June although work on the test has carried on. A laboratory has now been provided with increased safety facilities for any further work which needs to be done with the agent.