

NATIONAL DIRECTORATE OF THE NETS

M E M O R A N D U M

To: Regional Transfusion Directors
- England and Wales

From: Dr. H.H. Gunson

Date: 22nd January 1991

Ref: HHG/LB

ANTI-HCV TESTING OF BLOOD DONATIONS

1. The Department of Health have agreed that routine testing of all blood donations for anti-HCV can be put into operation.
2. I have been asked to try and ensure that testing starts simultaneously in RTCs in England and Wales and that it is co-ordinated with commencement of testing in Scotland.
3. Will you please advise me what you consider to be the earliest date that you could commence testing. It would be helpful if I could have this response by Tuesday 29th January.
4. Financial arrangements to cover routine screening and supplementary tests have still to be concluded and I will advise of these at a later date.
5. The U.K. Advisory Committee on Transfusion Transmitted Diseases has met and have put forward proposals for a protocol for carrying out the tests. These will have to be put to the DH at a meeting scheduled for 25th February. When the minutes of our meeting have been agreed by the members I will circulate them for comments.
6. I will inform Ortho and Abbott that routine screening for anti-HCV has been approved and that we will inform them of the starting date in due course.

GRO-C

NATIONAL DIRECTOR

c.c. Prof. J.D. Cash - Scotland

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N.B. This is not intended to be issued to the press but can be used as a brief to answer press queries.

INTRODUCTION OF HCV TESTING

LINE TO TAKE

1. Policy

A DH committee of experts has advised that screening for Hepatitis C antibody should start routinely throughout the U.K. as soon as the evaluation of suitable tests has been completed. It is expected that this will be around 1st September 1991.

2. Funding

Regions in England and Wales are expected to meet the increased blood handling charges from their general allocation. Similar considerations apply in Scotland.

Evaluation Programme

A large scale study has already been completed on the first generation of tests and a significant rate of false positivity has been recorded. Second generation tests, which the manufacturers claim will be more effective, have recently been made available and are currently being evaluated. These studies have underlined the importance of doing supplementary tests to distinguish positive donors from those found falsely to be positive. The names of the manufacturers involved are commercial-in-confidence.

4. Current Situation

All NHS Regions in the UK are following the DH policy except Northern Region where the RTC has recently started routine testing. The National Directorate of the NBTS and the National Medical and Scientific Director of the SNBTS regard this decision as premature but hope to be able to put the action to good advantage by extending testing on a trial basis to other selected RTCs.

It is important that the HCV tests which are chosen for general use are of proven reliability. This is essential to avoid incorrect results which would cause considerable unnecessary anxiety to donors.

5. Importance Of Testing

The new test will improve the safety of the blood supply but it should be noted that Hepatitis C is normally only a mild infection (not like AIDS).

6. Legal Liability

The BTS will continue to make every effort to maintain the high quality of the blood supply. Medical opinion is that only properly evaluated tests should be used so that the donor and the patient can be protected from false results. This procedure is likely to reduce the possibility of legal claims.