

To: 1. CDO
2. Jacky Buchan APS/PS(PH)

From: Martin Hall PH6.2B
Date: 11 June 2003
Cc: Rachel Dickson PS/CMO
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PUBLICATION OF DH DENTAL CJD RISK ASSESSMENT

Issue

1. PS(PH) agreed on 22 January that the draft assessment (Annex II) of the risk of transmission of CJD via instruments used in dentistry should be submitted to SEAC for scrutiny prior to placing it in the public domain. The risk assessment has now taken account of SEAC's views that were conveyed in a letter from the chairman, Professor Peter Smith (attached at Annex I). The Committee's recommendation that the conclusions of a particular study be included in the risk assessment has also been followed.
2. Whilst acknowledging the very large areas of uncertainty, the assessment concludes that current knowledge does not indicate any significant risk to the public from dentistry.
3. SEAC and the ACDP/SEAC TSE Joint Working Group have both considered the risk assessment. They expressed their satisfaction with the document and concurred with the conclusions reached.

Recommendation

4. PS(PH) is asked to agree that:

the risk assessment is published on the DH/CJD website with a link to the SEAC website.

Timing

5. As soon as possible, in view of the uncertainty surrounding the possibility of transmission of infectivity via dental instruments, concerns that this assessment largely allays.

Martin Hall
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Rowena Jecock
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22nd May 2002

Dear Dr Jecock

SEAC VIEW OF DENTAL RISK ASSESSMENT

Thank you for providing the above risk assessment for the Committee's consideration. The Committee appreciates the complex and speculative nature of the issues considered by the Expert Group and welcomes the paper, which may be used as the basis for practical advice with which to provide dental practitioners.

Members recognised that the risk assessment provides a well founded estimate of the potential risk of vCJD transmission through the reuse of dental instruments. Members also acknowledge the very large areas of uncertainty regarding critical parameters used in the risk estimation procedures and subsequent risk assessment; these include the issues of instrument decontamination and potential for infectivity in dental pulp.

Members recommend that a published study by Bartz et al (2003)¹ reporting the potential infectivity of tongue and tongue abrasion be included in the risk assessment. In addition to this, member's comments have been forwarded directly to Dr Peter Bennett at the Department of Health's Economics and operational research division.

I note that the assessment refers to existing SEAC advice (29th September 2000) for surgical instruments which states that potential risks can be further reduced by the introduction of more single-use instruments, where appropriate, especially of difficult to clean items.

Acting as Chair on the behalf of SEAC, the Committee endorses the conclusions of the risk assessment and supports it's publication.

Sincerely,
Professor Peter Smith
CHAIR

¹ Bartz JC, Kincaid AE, Bessen RA. Rapid prion neuroinvasion following tongue infection. J Virol. 2003 Jan;77(1):583-91.