## Falconer S (Sandra)

From: Sent: Keel A (Aileen)

To:

19 May 2004 14:09 Stock RG (Bob); Christie P (Peter) Dr

Cc:

Falconer S (Sandra); PS/CMO

Subject:

FW: vCJD plasma products patient notification - current position

Importance:

High







Plasma products Annex B Issues to Annex A plasma memo 19.05.04.... be resolved ... products memo 1.

I had a chat to Rowena Jecock at DH this morning about the handling of all of this. She very much shares our views that a much more coherent approach is needed than the HPA seem to want to take. The tone of this e-mail doesn't fill me with any confidence that that will happen, particularly if CMO(E) and David Harper are being quoted correctly. Peter-do you think there would be any mileage in speaking to Ailsa Wight? I'd be happy to do so if you thought it would help, as you're off at present. As ever the agenda seems to be controlled by the haemophilia community, when we all 'now (?apart from the HPA) that it goes much wider and there are other issues/clinical groups not being taken into consideration.

Aileen.

Original Message
From: CDSC - Connor, Nicky [mailto:Nicky.Connor GRO-C
Sent: 19 May 2004 13:53
To: 'ailsa.wight' GRO-C
Cc: CDSC - Oakley, Katie; CDSC - Janecek, Helen; CDSC - Molesworth, Anna; CDSC - Bone, Angie
CDSC - Gill, Noel; Manchester - Painter, Michael; CDSC - Evans, Barry; CDSC - Nicoll, Angus;
'carole.fry GRO-C ; 'richard.gutowski GRO-C } Rowena Jecock (E-mail); Macrae B
(Barbara); Christie P (Peter) Dr; Glenda Mock (E-mail); Mike Simmons (E-mail); Keel A (Aileen); Do
Jeffries (E-mail); DOH - Troop, Pat
Subject: vCJD plasma products patient notification - current position
Importance: High
**************************************
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### Dear Ailsa.

I would like to update you on our progress in preparing to inform patients exposed to plasma products manufactured from donations from people with vCJD. I discussed this with Rowena Jecock yesterday, as we are working towards a suggested launch date of 21 June. Rowena asked me to write to you to explain the current position, as she was concerned about the possible implications of this notification. She felt that there may be a need for DH clearance of the 'umbrella approach' of the haemophilia paitents (see enclosed paper). The message from David Harper and CMO so far has been clear - that this work should progress as quickly as possible, and that there were no further departmental decisions to be made, other than comments on the timing/press handling.

I would like to clarify whether this is still the case, or whether further decisions need to be taken.

Last week we held a training meeting with haemophilia patients, nurses and doctors to prepare for this notification. This followed on from an previous training day with primary immunodeficiency patients, nurses and doctors. Obviously, interest and news of this process will spread as the information cascades

through these groups.

I am going on annual leave, and today is my last day at work until June 8th. I would be grateful if you would contact Noel Gill who is progressing this work while I am away, thank you Nicky Connor

<<Plasma products memo 19.05.04.doc>> <<Annex B Issues to be resolved 19.05.04.doc>> <<Annex A plasma products memo 19.05.04.doc>>

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NG44/5/1

## Falconer S (Sandra)

From: Sent: Stock RG (Bob) 07 May 2004 10:19 Falconer S (Sandra)

To: Subject:

FW: CJD Incidents

Importance:

Low

CJD Incidents

# Bob Stock

----Original Message----From: Keel A (Aileen) ant: 05 May 2004 14:33 To: Christie P (Peter) Dr Cc: Stock RG (Bob)

Subject: FW: CJD Incidents

### Peter,

The attached paper was drafted by Marc Turner and tabled at our routine meeting with SNBTS this morning. I know you have been part of at least some of the discussions. Clearly the highly precautionary approach taken by the sub-group creates significant handling/presentational problems, not least because the traceability of many of the products is highly doubtful. I understand that the paper is going to the IP on Monday 10th May. Do you have any feel for how it will be handled thereafter by DH? Will it go to Ministers at that point? Marc said that a lack of clarity over the HPA's locus in Scotland emerged at the last meeting! Do you agree with Marc's suggestion on setting up a group with SCIEH to take this forward? If so are Martin and Tim sighted on this? Sorry to pose so many questions, but grateful for your views and an opportunity to discuss.

Aileen.

Original Message	
From: Marc Turner [mailto:Marc.Turner]	GRO-C
Sent: 05 May 2004 13:32	
To: Keel A (Aileen)	
Subject: Fwd: CJD Incidents	
************	***********
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Aileen - here are the documents as discussed this morning. Le me know if you need further input. Marc.

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Falconer S (Sandra)

Christie P (Peter) Dr From: Sent: 06 May 2004 19:46 To: Keel A (Aileen)

PS/CMO; Donnelly P (Peter) Professor; Stock RG (Bob); Falconer S (Sandra) Cc:

RE: CJD Incidents Panel: Blood Products Subject:

Aileen,

Agreed, it would be very unhelpful to have a piecemeal or uncoordinated response to this. I'll do what I can at the Incidents Panel meeting on Monday, and I'll get a briefing to you Tuesday morning from Dover House

### Peter

Dr Pater Circshe. Serve Medical Officer Cooks Tealing Rosen 2N302 Sept. of Electronics and partnersh St A strewn course, as gent itsied, folioborgh CIII oDG Tabl GRO-C peter,christie GRO-C

----Original Message----

From: Grinton A (Anne) On Behalf Of Keel A (Aileen)

06 May 2004 17:30 Sent: Christie P (Peter) Dr To:

Çc: PS/CMO; Donnelly P (Peter) Professor; Stock RG (Bob); Falconer S (Sandra)

Subject: CJD Incidents Panel: Blood Products

#### Peter

We discussed yesterday the implications of the CJD Incident Panel Technical Sub-Group pronouncements on blood products, which is going to the Incident Panel on Monday. We agreed that there is going to be a major handling and presentational problem for us here, given the wide range of patient groups which fall into the contactable category. Amongst these of course are all haemophiliacs who received UK plasma derived products from 1980 onwards.

I had a call from Adam Bryson this morning feeding back from the discussion in a meeting of the Coagulation Factor Working Party held yesterday afternoon. He was alarmed that the Haemophilia Directors (in not atypical fashion) were going to set the hare running by writing out to all haemophiliacs indicating that they are "at risk". I have had a conversation with Christopher Ludlam this afternoon about this and explained that, while we fully appreciate their desire to put in place the necessary public health measures in relation to their patients, this was part of a much wider picture, which would require careful handling if we are to avoid enormous public alarm. There is a meeting of the UK HCDO Advisory Group on Monday, in which no doubt of all this will be discussed, and I asked that my views be fed in. There is also apparently a meeting of UK HCDO with haemophilia nurses and the Haemophilia Society on 12 May. Christopher was confident that no letter would issue in the next week or two, but that is not a guarantee that the timetable of putting all this in the public domain is not going to be hijacked by the haemophilia agenda. I said to Christopher that I would brief him on Tuesday afternoon once I have heard from you about the discussions in the Incident Panel on Monday. My feeling is that we will need to get a Ministerial submission up fairly quickly after that meeting, so that Ministers are sighted on this, even if we don't have a fully worked out communication plan.

Aileen

Dr Aileen Keel Deputy Chief Medical Officer

XGRO-C