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Date: 11 December 2003

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**FIRST REPORT OF VARIANT CJD CASE WITH POSSIBILITY OF A LINK  
TO BLOOD TRANSFUSION**

**Issue**

1. Further to our oral briefing this afternoon, this submission is to inform you of:
  - A possible first report of variant CJD with possibility of a link to blood transfusion;
  - the actions we are taking to assess this new information and its implications;
  - two forthcoming submissions, that will seek your urgent agreement to:
    - a) any necessary further actions that may be needed to protect the blood supply in relation to the above case, and
    - b) wider management of incidents involving transfusion of blood/blood products and surgery, in which a potential risk of CJD transmission has been identified.
2. You are asked to:
  - agree our holding line (para 3), should information about the possible link to blood transfusion enter the public domain prior to a proper assessment and any agreed decisions

**Publicity**

3. There is a small chance that this specific case of possible transfusion-associated transmission may be reported in the media before an expert assessment can be made of all the relevant information. We propose the following holding line in the event of a media leak:

**The Department is aware of this case and has convened a meeting of experts to look at any implications for blood safety policy.**  
[If pressed: the Government has already implemented a number of precautionary measures to minimise the risk of CJD being transmitted through blood. These include removal of all the white cells from blood prior to transfusion, and importation of plasma from the USA for the preparation of plasma derivatives such as clotting factors].

**Next steps**

4. The UK CMOs are participating in a telephone conference tomorrow to discuss this case with key relevant experts. An *ad hoc* expert advisory group has been convened urgently on 15 December to assess the evidence, including data from animal transfusion experiments, and to

make recommendations on any further precautionary actions that need to be taken to protect the blood supply. Your urgent agreement will be sought to implementation of any measures proposed.

5. Precautionary measures have already been implemented to reduce the risk of possible transmission of vCJD via blood components or plasma derivatives, and to protect the UK blood supply. These are listed in **Annex A**.

#### **Background**

6. The National CJD Surveillance Unit (NCJDSU) identified this case through a collaborative study with the UK Blood Services. A diagnosis of variant CJD is not yet definitive, but is highly probable. The NCJDSU routinely undertakes a detailed investigation of any possible risk factors through detailed discussion with the families of vCJD patients, and examination of medical records. Other possible risk factors may therefore come to light. These investigations are underway in this case, and the information will be available to the expert group on 15 December.

#### **Wider management of healthcare-associated incidents**

7. The UK CMOs established a CJD Incidents Panel in 1998, which advises the NHS on management of healthcare incidents in which patients may have been inadvertently exposed to a possible risk of CJD. The CJD Incidents Panel has developed a framework for assessing risk on a case-by-case basis. A submission will be provided shortly on the Panel's recommendations, including the implications for management of incidents involving blood products and plasma derivatives.

Rowena Jecock

Ext **GRO-C**