

HCV.

To: Dr Doyle HCD-SCS

From: Karen Marsden FPA FPS2
Date: 22 September 1995
Copy: Dr Rejman CA OPU2
Mr Pudlo CA OPU2
Mrs Phillips HCD SCS(A)
Mr Anderson EOR
Mr Paley FPA FPS2

HEPATITIS C (HCV) - SIZE OF THE PROBLEM

1. Thank you for copying to me your minutes of 20 September about work in hand to identify the prevalence of HCV in the population and estimate the likely numbers coming forward for treatment.
2. I would like to re-iterate the point made by Mrs Phillips in her background note of 22 August about resource issues. The only mechanism for addressing any resource issues which arise from this work is through PES. We have put forward a pressure in this year's Survey for treatment of HCV, but only in connection with the lookback exercise and those patients infected as a result of blood transfusions prior to September 1991. Haemophilia sufferers, because it was assessed that many, but not all, will have either already received treatment for HCV in the course of their routine contacts with haemophilia centres, or a decision will have been taken to defer treatment for the present, and the wider population were not included when calculating the pressure.
3. The work you have put in hand will be very useful in supporting a pressure in a future Survey (PES'96 is now the earliest opportunity for putting forward a bid) but it is important that this work remains in-house. We must ensure that no indication is given to anyone outside the organisation that this work is underway or that we endorse a particular treatment, as to do so would rule out the option to raise this as a pressure with the Treasury. It would be taken, in line with the agreed Survey convention, as a commitment to a policy change and therefore deemed that we are able to meet implementation costs from within existing resources.
4. I hope this is helpful.

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To: Mrs C Phillips HCD-SCS(A)2

From: Mrs J McIntyre NUR PS

Date: 22 September 1995

Copies: see attached list

HEPATITIS C: ISSUES FOR THE NHSE

1. Your minute of 7 September refers.
2. I agree with your proposal for an in-house meeting with all interested parties.
3. One issue you have not mentioned is that of occupation acquired Hepatitis C, a risk which has been quantified in the U.S particularly in surgeons and midwives. There is some debate about post-exposure treatment with Alpha interferon though at a conference I attended yesterday a specialist said it was not likely to be effective.
4. I am sure you are aware that many IVDUs are occasional or 'recreational' injectors, lead stable lives but still may put themselves at risk.
5. Happy to discuss.

Ms J McIntyre
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cc

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