RESTRICTED - MEDICAL

CMO

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FIRST POSSIBLE CASE OF BLOOD TRANSFUSION-ASSOCIATED TRANSMISSION OF VARIANT CJD

Issue

1. I have today been contacted by Professor Bob Will of the National CJD Surveillance Unit, to inform me of the recent death of a patient, who received a blood transfusion in 1996 from a donor who went on to develop vCJD. The patient who has recently died was reported to have brain pathology representative of sporadic CJD, but preliminary review by Professor Ironside suggests that this is a case of variant CJD.

2. This may represent the first case of transfusion-associated variant CJD.

Background

3. The NCJDSU, in conjunction with the UK Blood Services, runs a research study funded by DH (the Transfusion Medicine Epidemiology Review), the main purpose of which is to investigate whether there is any evidence of transmission of CJD or vCJD via blood transfusions.

4. Until yesterday, none of the 39 individuals traced through the study have appeared in the NCJDSU register as having any form of CJD.

5. The NCJDSU was yesterday notified of a transfusion recipient, aged 69, whose cause of death was certified as dementia and prostatic cancer. Separately, they have received a referral from the clinician who had received a post-mortem neuropathology report on this case, indicating a pathology that resembled sporadic CJD. Brain samples were sent for review to Professor Ironside who today examined H/E sections and confirmed a preliminary diagnosis of variant CJD. Further information on immunostained sections should be available tomorrow. The NCJDSU will also urgently initiate further investigations, including genetic analysis and prion protein sub-typing. The relatives of the transfusion recipient are to be interviewed (provisionally on Thursday) and copies of the clinical notes are being sent.

<u>Donation history</u>

6. The patient received his transfusion of packed red cells in 1996, about three years before the donor developed clinical symptoms of vCJD (and prior to the

introduction of leucodepletion in 1999). The National Blood Service has been alerted. Only one other recipient of this donor's blood has been identified, who died shortly after transfusion. Neither the NCJDSU nor the NBS intend to make any information public at the present time, although they hope to prepare a scientific report in due course.

Clinical history

7. The patient's clinical history is not entirely typical of variant CJD, although further details are being sought. Variant CJD has tended to be a disease of young people (median age at death is 29 years). Only two patients over 55 have to date been identified with vCJD, one aged 62 years and the other 74 years at death.

Action

8. We have asked EOR to estimate the probability of a case of vCJD occurring by chance, taking into account the age characteristics of the population, in the absence of transfusion-associated risk.

9. We will update you as further information becomes available. Should vCJD be confirmed, we will incorporate this information into the planned submission to Ministers on the CJD Incident Panel framework for management of incidents, which you have requested from Dr Harper.

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