

**SCOPING PAPER FOR PROJECT TO REASSESS RISK OF SECONDARY  
TRANSMISSION OF vCJD VIA SURGICAL INSTRUMENTS  
14 August 2003**

**AIM**

The aim of this project is two-fold:

- **To inform a revised assessment of the risk of vCJD transmission associated with acute surgical procedures in NHS hospitals in England.**
1. A first risk assessment was completed by EOR in early 2001, and was informed in part by a 'snapshot' (but nevertheless, detailed) survey of surgical instrument decontamination and reprocessing practices in the NHS acute and primary care sectors, and in private hospitals.
  2. Since then, a comparative assessment of NHS acute sterile supplies departments, targeted investment to improve decontamination /instrument reprocessing, and follow-up visits by NHS Estates audit teams have been undertaken. However, none of this work was 'CJD-specific'. We now intend to conduct an operational review of decontamination/reprocessing practices in a sample of NHS acute hospitals
  3. New data is now emerging from the DH-funded research programmes on basic prion biology, inactivation, and instrument decontamination, which will also be used to revise the risk assessment.

**To date, options for reducing vCJD transmission risk have been based on relatively crude approaches – removal of the hazard (ie single-use instruments) or general improvements in decontamination practices (worthy for good general infection control against conventional agents but, given current technology, probably of limited effectiveness against prion contamination of instrument surfaces). Our second aim therefore, is:**

- **To gather limited additional baseline data from the operational review, with a view to identifying possible options that might specifically target vCJD transmission risk.**
4. Whilst developing such options is not within the scope of this project, we consider that the additional baseline data combined with our improving knowledge of prion biology should enable us to begin to work in this area.

**OBJECTIVES**

This project has three key objectives:

- To enable an assessment of the degree of improvement in surgical instrument reprocessing practices in about 40 NHS acute hospitals in England since they were initially surveyed in 1999/2000.
- To begin to gather specific data on practices that, as a result of scientific knowledge gained since the first survey was conducted, may impact on factors specific to the risk of CJD transmission via surgical or other instrumentation.
- To gather field data on residual protein present on a broadly comparative sample of instruments collected from each of the hospital sites visited, in order to test the

assumptions made in the EOR Risk Assessment for Transmission of vCJD via Surgical Instruments (February 2001).<sup>1</sup>

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<sup>1</sup> It will also allow us to validate the experimental data subsequently obtained, which supports these assumptions (quoted in the EOR document: 'Relating Improvements in Decontamination to the Risks of Transmitting vCJD via Surgery', October 2002)