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Times July 8, 1972

Tighter safeguards urged for kidney patients

By John Roper
Medical Reporter

Stringent precautions to prevent such tragedies as occurred in Edinburgh in 1970 when 11 patients and staff died of viral hepatitis are recommended by the Government advisory group which has been studying hepatitis and the treatment of chronic kidney failure.

Lord Rosenheim, chairman of the group, says in a foreword to the report, published yesterday, that anxiety about the infection is understandable but there are no grounds for a negative or defeatist attitude.

Among 27 conclusions and recommendations, the group suggests a code of practice to control infection. Viral hepatitis is frequently linked to the curiously named "Australia antigen" and the group says that blood transfusions should be minimized for patients with chronic renal failure and only blood screened as negative for the antigen and its antibody should be used.

Screening of patients and staff to detect evidence of present or past hepatitis should not rely solely on the test for Australia antigen because false negative results were possible.

All patients should be screened before admission and routinely during treatment. Those showing evidence of infectivity should not be admitted to a main unit. Treatment in an isolation unit should be left to the clinical decision of the unit's director.

The group concluded that early discharge to home dialysis will minimize the risk of hepatitis and patients who were reasonably well

should be encouraged to achieve self-treatment in hospital.

Successful kidney transplantation reduced the risk of infection in so far as it eliminated the need for dialysis and shortened patient contact. Unfortunately, most patients had to wait a considerable time for a suitable kidney. A greater supply of suitable donor kidneys was essential.

Present dialysis equipment might not be entirely free from risk of transmitting infection and disposable dialysers should be used for infective patients.

All staff should be screened before beginning work in a main unit and their health should be monitored. As far as possible staff turnover should be minimized. It was undesirable to employ agency nurses.

Lord Rosenheim says that he hopes that all concerned will accept the group's recommendations and modify their practice in accordance with the suggested codes. Such positive action might lead to the prevention of further outbreaks and the alleviation of anxiety.

The Department of Health and Social Security said last night that the recommendations were being examined urgently. Consultations with interested parties would take place without delay but they were bound to be extensive and would take some time.

The department was considering whether an effective and acceptable scheme for increasing the supply of donor kidneys could be devised. *Hepatitis and the treatment of chronic renal failure*, report of advisory group, Department of Health and Social Security.