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CIRCULAR HSS(SUPPORTIVE SERVICES) 3/77

Department of Health and Social Services
Supportive Services Branch
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14/823/94

(1476)

To: Eastern Health and Social Services Board - for action

Northern, Southern and Western Health and Social Services Boards and the Central Services Agency) For Information

A920/75

20 April 1977

Dear Sir

HEALTH SERVICES DEVELOPMENT
HEPATITIS B SURFACE ANTIGEN

1. This circular deals with the recommendations of the Second Report of the Advisory Group on Testing for the Presence of Hepatitis B Surface Antigen and asks the Board to arrange for the introduction of revised methods for the testing of blood donations and other blood specimens in accordance with its recommendations.

2. In 1970 an Advisory Group was set up to advise the Secretaries of State for Social Services, for Scotland and for Wales on the testing of blood donations and specimens for what was then known as Australia (hepatitis-associated) Antigen and its Antibody. Its first Report was made in 1971 but in 1972 a revised Report, modified in the light of consultation, was issued. This was accepted in Northern Ireland and issued to the former Northern Ireland Hospitals Authority in January 1973 and to the former Northern Ireland General Health Services Board and the local Medical and Dental Committees in May 1973.

3. At that time the Advisory Group recommended, inter alia, that Regional Blood Transfusion Centres should initially use an immunoelectroosmophoretic method of testing but pointed out that knowledge of the subject was accumulating very rapidly and that the recommendations should therefore be regarded as interim and subject to modification at a later date. The Group has recently completed a review of its previous Report in the light of new information which has become available and has, in its Second Report, made several new recommendations while confirming a number of its previous ones.

4. The Second Report has been accepted subject to the reservations in paragraph 7 below, and the Board is accordingly asked to follow the revised procedures recommended in the Report amongst which is the testing of all blood donations for the presence of hepatitis B surface antigen (HB_sAg) by reversed passive haemagglutination in place of counterimmunoelectroophoresis, if this is not already being done (see paragraph 34 of the Report).

5. Other important changes in procedure recommended by the Advisory Group include the following:

(a) While blood donors whose blood is HB_sAg positive must continue to be permanently excluded from the panel and their donations rejected for clinical use, donors whose blood contains hepatitis B surface antibody (anti-HB_s) may be retained on the panel and their donations used clinically; however, the detection of anti-HB_s should be continued to the extent necessary to obtain sufficient plasma for the preparation of human anti-HB_s immunoglobulin (paragraphs 16 and 17).

(b) The practice of permanently excluding from the panel donors with a history of jaundice may be discontinued provided that HB_sAg is not detected by

reversed passive haemagglutination (or a test of equal sensitivity) and that the donor has not suffered from hepatitis or jaundice during the previous 12 months (paragraph 18).

6. The Public Health Laboratory Service Board have accepted the recommendations relating to reference work and the quality control of routine screening tests.

7. Consideration is still being given to the following recommendations of the Advisory Group:

   (a) Paragraph 41, relating to the investigation of hepatitis B surface antigen carriers among medical or paramedical staff.

   (b) Paragraph 50, relating to the differential notification of hepatitis.

   (c) Paragraph 61, relating to the use of the BIOHAZARD sign on laboratory doors.

   The Board is requested not to take any action on these matters for the time being.

AMENDMENTS

8. Circular HSS(Supportive Services)4/76 Personnel. Prescribed and Industrial Diseases - Viral Hepatitis. Sub-paragraphs 7(e) should be added to read as follows:

   7(e) Circular HSS(Supportive Services) 3/77 and the Second Report of the Advisory Group on Testing for the Presence of Hepatitis B Surface Antigen and its Antibody.

9. The Eastern Board is asked to take action as in paragraphs 3 and 4 of this circular. All Boards should draw the attention of all Consultant Pathologists to this Report. Sufficient copies are enclosed for that purpose.

Yours faithfully

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