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WORKING PARTY ON AIDS

MOTION by the Chairman of the Working Party on AIDS: that the report of the Working Party be received.

Meeting

4th February 1988. Present: J H Marks (Chairman), M Adler, Sir Douglas Black, W M Dixon, P G R Godwin, R A Keable-Elliott, J Kyle, A W Macara, A W McIntosh, P Mortimer, M J Oldroyd, L Shurman, P Sieghart, M J G Thomas. H W Fell was present for the latter part of the meeting.

MATTERS WHICH ARE THE SUBJECT OF RECOMMENDATION

1. Ethical guidelines in relation to AIDS and medical treatment

The Working Party agreed that medical ethics, which had been laid down over a considerable period of time, were in accord with the law. A general move towards a greater autonomy of the individual had resulted in increased demand by patients for greater information about their illnesses, and their medical treatment. Both current medical ethics and the law reflected this position.

Explicit consent is required for an HIV antibody test. If, in exceptional circumstances, the doctor judges that he should break this rule, he must be prepared to justify his action, in the courts or to the GMC.

Occupational physicians requested, by their employers, to undertake the HIV antibody test upon an employee or potential employee, are advised that the criteria for undertaking any test should be its direct relevance to the employment of an individual. This is particularly important in view of the potential negative social and economic consequences for an employee who is found to be HIV antibody positive.

Confidentiality should be maintained with respect of all patient information, disclosure to other health care professionals should be primarily for the purpose of providing health care to the patient. Breach of confidentiality would require justification as above.

RECOMMENDATION A: That the paper "HIV Infection and AIDS: Guidance for the Medical Profession, including a Legal Opinion " (Document C) be approved as a BMA statement.

2. Prevalence Screening

The Working Party agreed that there was a need to determine the extent of HIV infection within the general population. If strictly anonymous prevalence screening were undertaken, then, firstly, consent to HIV testing would be unnecessary, as it would not be possible to trace a sample back to any particular individual. Secondly, in addition, since such tests were undertaken on cell free serum samples, genotype identification was ruled out.

RECOMMENDATION B: That the Association request the DHSS to support the

introduction of anonymous prevalence screening.

PROGRESS REPORT

3. BMA AIDS Foundation

The Foundation is now fully staffed and operational.

4. Other Matters Considered

Consent to HIV antibody testing.

World Summit of Ministers of Health on programmes for AIDS prevention.

Technical advice to the AIDS Foundation.

J Marks
Chairman

MOTION by the Chairman of Council: That the report of the Working Party on AIDS be approved and the recommendations adopted.