



Northern Regional Health Authority

National Blood Transfusion Service

Regional Transfusion Centre

Holland Drive, Barrack Road, Newcastle upon Tyne NE2 4NQ

Telephone 091 2611 711

Our Ref. TO2007/DD

Your Ref.

Mr A Garland
Director of Management Services
Northern Regional Health Authority
Benfield Road
Newcastle upon Tyne NE6 4PY

20 July 1989

Dear Mr Garland

RE: NON-A NON-B HEPATITIS

The problem of Non-A Non-B Hepatitis has been with us for many years. This disease is transmissible by blood but no test has been available to screen out infected blood donors. Most people who have Non-A Non-B Hepatitis, and continue to carry the virus, are asymptomatic although a very small proportion of people go on to get cirrhosis of the liver. The effects of transfusion transmitted Non-A Non-B Hepatitis vary from nil through a minor illness with no jaundice to a moderately severe illness with jaundice, with a small proportion of people going on to become long-term carriers of the virus. It is these people who get long-term carriage of the virus who run the risk of getting cirrhosis of the liver, and possibly even hepatic carcinoma.

There has been a lot of research for many years to try and identify the virus and therefore produce a test for it. It appears from recently published work that a test has now been established which recognises a high proportion of people who have this type of Non-A Non-B Hepatitis. In certain groups it recognises around 80% of those infected.

The test has been applied in studies to blood donors in a number of countries, and in the United States at the New York Blood Center 1.4% of all donors were found to be positive. Interestingly the distribution was not equal and certain sub-groups of donors, particularly some of the Hispanic donors, had an incidence of 8%. Studies in other countries have shown an incidence of around 1% and preliminary (unpublished) data from the UK suggests an incidence of approximately 0.5%.

Now that this test is available I suspect that pressure will mount fairly rapidly for this test to be introduced in this country. Previously I had expected that something as major as this which would have to be introduced in all Transfusion Services in the UK would be funded by the Department. However, Dr Gunson has suggested to me that this will not be the case and that Regions will be expected to fund this new development themselves.

NWC 236

MAIN/ 636

NHBT0000188_008_0001

At the moment the cost of the test is believed to be of the order of £1.50 per sample when one buys the test in bulk. This would immediately add almost £200,000 to our annual bill. On top of this there would be the requirement for one member of staff and in the first year we would also lose about 600 donations. We would therefore have to collect additional donations to make up for this loss and would also have to manage 600 very anxious donors. This would require a considerable amount of individual counselling and eventually arrangements would have to be made for these donors to be seen by a Physician specialising in liver disease. As there is no confirmatory test the final diagnosis of long-term carriage of Non-A Non-B Hepatitis might well depend on a battery of other tests, possibly including liver biopsy. This in itself would have implications for those departments who had to deal with these donors. Finally, there would be the cost of recruiting new donors to make up this loss of donors.

At this stage it is not worthwhile going into a detailed estimate of total costs, but I would expect that the total figure will turn out to be something like £250,000 in the first year. Costs would fall after the first year as the number of infected donors on our panel declined. One could also expect the cost of the test to fall after two or three years, as has happened with the HIV test.

At the moment there is nothing to be done about this but I felt it was worth highlighting this situation, as we do not know at what stage we might be instructed to introduce this new test. At the present time the virus detected by this test has been designated as Hepatitis C virus.

Yours sincerely

H L Lloyd
Director/General Manager

cc Dr L J Donaldson
Mr C H Reed

~~NWC~~ 237

MAIN/ 637

NHBT0000188_008_0002