

RESTRICTED - POLICY

HEPATITIS C - LOOK BACK

OPENING STATEMENT

(Dr Metters)

1 Britain enjoys ^{one} some of the safest blood services in the world. This is achieved by constant improvement and monitoring of research to identify ways of reducing the possibility of infection between donors and transfusion recipients.

2 Since September 1991 all blood donations have been routinely tested for the presence of antibodies to Hepatitis C virus. Prior to that date a very small number of people who received blood from transfusions in the UK could have been infected with the Hepatitis C virus.

3 Hepatitis C can cause inflammation of the liver, usually after a very long interval after initial infection. In many infected people the virus will persist without causing symptoms for many years. However their blood will remain infectious for other people. In some people in the long term the inflammation may progress to more serious liver damage including cirrhosis.

4 Until recently it was considered that look back to identify recipients of blood transfusion who were at risk of Hepatitis C would be technically very difficult; and as there was no effective treatment, to inform people they were at risk, when there was nothing that could be done about it, would increase distress without any benefit. *incidence low in UK - thought to be a relatively mild infection*

5 The position has changed on both counts. There is now some confidence that many, but not all, recipients of blood infected with Hepatitis C can be identified and Interferon Alpha has been licensed for the treatment of chronic Hepatitis C. This may be of help to some people.

6 The Advisory Committee on the Microbiological Safety of Blood and Tissue for Transplantation, which is the expert group which advises the Secretaries of State of the four territorial Health Departments on all matters affecting blood safety, recently recommended that a look back exercise should be undertaken.

7 "Look back" is a process of identifying patients who were recipients of blood transfusions prior to September 1991 who may have been infected by Hepatitis C by donors who have since been shown to be Hepatitis C positive. Such patients would be counselled, tested and if found to be infected advised of the appropriate treatment.



8 Ministers have accepted the recommendation and instructed me, as chairman of the MSBT, to set up, without delay, an ad hoc working party to draw up guidance on the procedures to be followed for undertaking this look back, for counselling those who are found to be at risk and of the treatment options available. The ad hoc group will consider any other actions which might be appropriate.

9 The Working Party has already been set up with membership drawn from the MSBT and other experts. It will include representatives of all territorial Health Departments and hold its first meeting next week. It is not possible to say how long it will take but the preparation of guidance and the look back exercise itself will be given the highest priority.

10 The numbers of people who may be affected is small. Regional Blood Transfusion Directors have estimated that in England some 3000 people alive today may have become infected in this way.

11 For any individual patient who has received a blood transfusion before September 1991 the risk is very small and it is unlikely that they would need treatment. So there is no need for those who received blood transfusions to take any immediate action. I therefore strongly recommend that those who may have had a transfusion before September 1991 should wait until the exercise has been completed before taking any other action. Those who have not had such treatment are in no risk of having been infected in this way.

12 We are taking a number of actions to provide reassurance to the public. Firstly, we have set up a freephone helpline to provide advice to anyone in the country who is concerned. This will be available immediately on 0800 716 197.

13 Secondly, advice is being sent to-day to all GPs and relevant hospital consultants to inform them of the look back exercise and to assist them in advising patients who may have questions about it. This will be followed shortly by guidance prepared by the ad hoc Working Party on how the process will be carried out and on the counselling of those at risk.

14 It is important to keep this matter in perspective in terms of the numbers at risk, the severity of the disease and the fact that any symptoms may take 20 years or more to develop.

15 We all have a responsibility, not only to do all we can for those who have been inadvertently infected, but of ensuring that the public at large is not unnecessarily alarmed. The British Blood Service is of inestimable value to the Nation and we need to do all we can to support it.

Italy, Japan, Spain

Dr Robinson or I will be happy to take any questions.

*Voluntary nature
Bl donor since 1985 asked not to donate if they've ever
used IV drugs
healthiest & safest & voluntary blood donor community*

*- 18yr follow up
in USA - no diff
in mortality bet.
me. & controls.*