UK-ACTTD

SUB-COMMITTEE ON LABORATORY ASPECTS

Terms of Reference

To examine and report on blood transfusion microbiology laboratory implications of policies and questions raised at the UK-ACTTD.
To seek advice from outside the ACTTD where appropriate and where specific expertise is required.

Proposed items for attention:

1. 'Confirmation' of reactivity

For: HBsAg, anti-HIV, syphilis, anti-HCV and other agents as they may arise.

Aim: To provide formal guidelines on confirmation of routine mandatory microbiological assays for the UK NBTS. These will be based on ACTTD policies. HBsAg will require re-examination in the light of the increased non-specificity of ELISA testing compared with RIA.

HBsAg: items to consider:

a) Neutralization: which species of antibody?
pre-dilution to avoid 'swamping'?
determination of titre (for dilution).
minimum titre of neutralizing antibody.

b) Value of anti-HBc, anti-HBc IgM, and 'e' testing to assist in confirmation.

c) 'Indeterminate' neutralization results in relation to different test kits. Possibility of HBV variants.

HCV: items to consider: continuing review of the performance of screening and confirmatory assays as they develop. This is likely to be a rapidly evolving field for some time.

2. **Formulation of QC samples and their promulgation.**

e.g. current studies in conjunction with NIBSC on an HBsAg working standard.

Working standards for the other agents (HIV-1/2, syphilis, CMV, malaria) will also be required.

3. <u>Assessment of specific assays for non-mandatory tests</u>

e.g. ELISA for antibodies to malaria.

Preliminary work to assemble a panel of relevant samples has commenced at NLBTC/ABSD/Birmingham/Leeds, with the help of Drs. Chiodini and Voller. The results, when ready, will be presented to the subcommittee.

JB/mm

3 June 1991

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