-box 18.15

Mr Tom Magdonald

copy to Dr Susan Lader, DHSS Mr Calder

B12.1.1

SCREENING OF BLOOD DONATIONS FOR NON-A NON-B HEPATITIS

Professor Cash has pointed out to us, to Mr Donald and to his own Regional Directors that a commercial producer of blood products is being allowed by DHSS to include in their product insert a statement that the product is derived from donations which have been ALT tested. We have confirmed that Professor Cash is correct.

For some time he has sought funds to screen all donations by both ALT testing and another test, as a way to exclude some donations likely to transmit non-A, non-B hepatitis. He has not received funds, for reasons previously explained, and so far as I know, no research is being mounted in Scotland or England into the cost and value of the screening.

The recipients of SNBTS unscreened blood have no choice: they cannot get other blood. But the recipients of blood products do have a choice, usually no doubt made for them by the clinicians treating them. They can have SNBTS products, apparently gratis, made from unscreened donations. Or they can have commercial products, at the cost of their Health Boards, made from partially screened donations: partially, because ALT screening is only one of the two tests proposed together to reduce transmission of non-A, non-B hepatitis.

It is credible that the commercial products, derived from the donations of paid donors, are safer because of ALT testing than they would otherwise be. But it is not clear that a sensible clinician would prefer them to SWBTS products.

The clinicians, however, stimulated perhaps by some of their patients, are likely to press us now to "join the club", and SNBTS are sure to resume similar pressure. The Haemophilia Directors' meeting with SNBTS and us in May will serve as an occasion for pressure, if no earlier occasion is sought.

GRO-C

DR JOHN FORRESTER Room 25

SAH

17 December 1987