

DEPARTMENT OF HEALTH & SOCIAL SECURITY

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Professor A L Bloom Department of Haematology University Hospital of Wales Heath Park Cardiff CF4 4XN

Dear anthum

Thank you for your letter of 31 May in which you express your concern about the need for rapid introduction of HTLV III antibody screening test for blood donors. It is accepted policy that the screening of blood donations should be introduced as soon as possible. However, it is clear from the evidence available that the performance of diagnostic kits licensed by the FDA is variable. It seems prudent therefore that before any large scale introduction of them into the Blood Transfusion Service they should be properly evaluated in the UK. The need for such an evaluation has been discussed at meetings of the EAGA and apart from discussion of the range of tests against which the kits should be evaluated there has been general support from the members.

Whilst the introduction of an unevaluated test into the Blood Transfusion Service and simply discarding any blood which gives a positive reaction is superficially attractive we are not persuaded that this is the right course. Be believe that it could lead to grave difficulties because of the large number of false positives. We consider that the introduction of the test to the BTS and to STD clinics should be on a national basis with appropriate facilities for counselling. If the test was initially only available in the BTS a lot of at risk individuals could attend donor sessions with the object of getting their blood tested. We want to avoid this.

I enclose a copy of the press statement reporting Mr Clarke's reply to a Parliamentary Question on the introduction of screening tests for HTLV III antibody in the Blood Transfusion Service and the Chief Medical Officer's statement which amplifies the background to the Ministers decisions.

Yours sincerely,

GRO-C

E L Harris

Deputy Chief Medical Officer

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