

Mr Macniven

Copy to: Dr McIntyre  
Dr W Forbes

# **SNBTS: SCREENING DONATIONS FOR NON-A, NON-B HEPATITIS**

As you are aware, a PESC request was lodged for SNBTS some time ago, seeking funds for this purpose; we, DHSS and (by and large) the English BTS take the view that the case is inadequate and that instead research is required; SNBTS have published their view in the Lancet for 4 July.

Research proposals were lodged with DHSS and (after much manoeuvring) with our CSO. Our CSO's Biomedical Research Committee heard the case on 25 September and rejected it on scientific grounds. I was present and agree that the grounds are substantial.

I have asked Dr W Forbes at CSO:

- \* to ensure that the Minutes will confirm that the reason for rejection is not that research is superfluous (which is what SNBTS claims is the practical position);
- \* to withhold the announcement of the decision to SNBTS until CSO have put their act together with DHSS Research Management Division. The research proposal is a unified UK proposal, involving 3 English blood transfusion centres and one Scottish centre. DHSS have not reached a decision on their component, but will consider views from the same referees as our CSO. One option open to DHSS would be to take over and "repair" the research proposal, by adding a fourth English centre and adjusting details; and
- \* to let me have, when available, a statement in writing of the reasons for rejection. This will inevitably take some time to prepare, and will mostly be the work of one member of our CSO's Biomedical Research Committee. It will be confidential and will not provide a blue print for a "repair" operation here, because our CSO do not in general undertake such operations unless specifically encouraged by their appropriate Committee (Biomedical Research Committee in this case). The Committee would not encourage unless it was felt that "repair" was feasible.

Meantime our CSO and the Research Management Division at DHSS will be in direct touch about the proposal. I have informally updated my professional opposite number in DHSS (Dr Lader).

In summary:

- \* SNBTS maintain that their general obligations to the recipients of blood and blood products require the screening to start now, despite its recognised drawbacks and its cost; they agree however that the scientific evidence is incomplete;
- \* the Health Departments, along with the English BTS, press for more scientific evidence before any decision to screen, and
- \* the gathering of the evidence, at least in Scotland, is obstructed by the inadequacies of the research proposal. These inadequacies mean that the results of the proposed research could prove quite inconclusive - a serious objection to mounting it.

I would be ready to discuss further, but if there is no hurry to reach a decision on the SNBTS request for the money to screen, would prefer to do so when the written statement of reasons for rejection has arrived, and when our CSO and DHSS have reached a common stance.

**GRO-C**

DR J M FORRESTER  
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Room 25  
SAH