

From the Chief Medical Officer
Dr Henrietta Campbell CB

URGENT COMMUNICATION

HSS(MD)8/2004

To: All General Practitioners (for cascade to non-principals working in your practice)
Medical Directors of HSS Trusts for cascade to all consultants:
Directors of Public Health in HSS Boards
Directors of Nursing in HSS Boards
Directors of Nursing in HSS Trusts
Chief Executive, Northern Ireland Blood Transfusion Service
Community Pharmacists

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Your Ref:
Our Ref:
Date: 19 March 2004

Dear Colleague

Protecting the blood supply from variant CJD: deferral of donors who have received a blood transfusion

People who have received a blood transfusion in the UK since 1980 will no longer be able to donate blood. This additional donor selection criterion will be implemented by all four of the UK Blood Services, including the Northern Ireland Blood Transfusion Service (NIBTS) on 5th April 2004.

This is a further precautionary measure against the possible risk of variant Creutzfeldt-Jakob Disease (vCJD) being transmitted by blood and blood components. It comes in the light of the first possible transmission of vCJD by blood transfusion which was reported in December 2003.

It must be stressed that this is an entirely precautionary measure. Since 1997 the NIBTS has put in place a number of other measures against the possible risk of transmission of vCJD. This additional measure will further reduce the risk of a potential onward cycle of transmission through transfusion.

Donors, indeed anyone who has been transfused, should not be alarmed by this measure. This is only a precautionary step in the continuing drive to make blood transfusion even safer. The benefit of receiving a blood transfusion when needed far outweighs the possibility of contracting vCJD.

Background

Creutzfeldt-Jakob Disease (CJD) is one of a group of diseases called Transmissible Spongiform Encephalopathies. The cause is an abnormal "infectious protein" known as a prion. All of these diseases have a very long incubation period, cause severe and irreversible damage to the central nervous system and there are, so far, no treatments.

Sporadic CJD, which was first described in the early 1920s, occurs throughout the world and affects one person per million per year with an average age of onset of 65 years. There is also a very rare inherited form of the disease. The UK Blood Services already have criteria for excluding blood and tissue donors who are, or who could be at an increased risk for these types of CJD.

Variant CJD

A different form of CJD, called variant CJD (vCJD) was first identified in 1996. Unlike sporadic CJD, vCJD affects younger people (a median age of 29, range 14-74 years old). Clinical presentation is also different. The clinical, epidemiological, neuropathological and experimental data all point to vCJD being caused by the same strain of prion as Bovine Spongiform Encephalopathy (BSE or mad cow disease) which is different from the strain of prion seen in sporadic CJD.

As of 1st March 2004 there have been 146 definite and probable cases of vCJD in the UK, 1 case each in the Irish Republic, Italy, USA, Canada and Hong Kong and six cases in France. The eventual number of individuals within the UK population likely to develop vCJD remains uncertain; current estimates range from current numbers up to 540. It is therefore not known what number of current or past blood, or tissue donors, may develop vCJD in the future.

Action taken to date to protect the blood supply

In view of the uncertainty as to whether vCJD could be transmitted by blood or blood products, the NIBTS and other UK Blood Services have taken a number of precautionary measures:

- Withdrawal and recall of any blood components, plasma derivatives or tissues obtained from any individual who later develops vCJD.
- Importation of plasma from the US for fractionation to manufacture plasma derivatives.
- Leucodepletion (removal of white blood cells) of all blood components.
- Importation of fresh frozen plasma from the United States for patients born on or after 1st January 1996.
- Promotion of appropriate use of blood and tissues, and alternatives throughout the Health Service.

Information for donors and the general public

The risk of not having a blood transfusion when needed far outweighs any possible risk of contracting vCJD through a transfusion.

It is important to put this risk into context. To date there has been only one possible case of vCJD being transmitted by blood, yet the UK Blood Services issue around 3 million units of blood every year.

The Northern Ireland Blood Transfusion Service can offer further information and advice to blood donors on 0500 534669.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'Henrietta Campbell', written in a cursive style.

HENRIETTA CAMPBELL (DR))
Chief Medical Officer

This letter is available at www.dhsspsni.gov.uk and also on the DHSSPS Extranet which can be accessed directly at <http://extranet.dhsspsni.gov.uk> or by going through the HPSS Web at <http://www.n-i.nhs.uk> and clicking on DHSSPS.