



ADVISORY COMMITTEE ON DANGEROUS PATHOGENS

Management and Control of Viral Haemorrhagic Fevers and other Human Infectious Diseases of High Consequence

Issue

Update on progress with the review of ACDP guidance “Management and control of Viral Haemorrhagic Fevers” published in 1996. This paper reports on progress with new draft guidance on management of infection with a Hazard Group 4 VHF or other human infectious disease of high consequence

Background

Members will recall their agreement that future guidance in this area should be goal setting and should seek to offer a wider range of options for the management of patients with known or suspected VHF or other highly infectious disease. In particular, in respect of requirements for the physical containment of patients and other provisions for the protection of staff e.g. personal protective equipment (PPE) and respiratory protective equipment (RPE) at high security infectious disease units.

It was recognised such an approach would align with HSE’s and ACDP’s fundamental risk-based philosophy and would reflect experience and practice in VHF patient management in mainland Europe, North America and elsewhere in the world where, subject to risk assessment, confinement of the patient in a Trexler isolator may not now be considered as the only safe option.

Advancement of this work has proven to be challenging, however significant progress has now been made and a realistic timescale for completion and presentation of new guidance to the Committee identified.

Risk Assessment – Algorithm

Central to such an approach in the UK has been the development of an algorithm – to facilitate systematic and consistent risk assessment, decision-making and selection of appropriate means of patient management and other provisions for the protection of workers and the public.

Building upon members’ previous comments the earlier version of the algorithm has now been clarified and refined. (See Appendix) Fundamental agreement upon this draft has been reached between consultant infectious disease clinicians, their teams

and Dept of Health and HSE officials. The draft also takes account of comments received from HIDSU staff and other relevant Health Service consultees (list them?).

Timescales for Completion of the new guidance

The following timescale for progressing and completing of the work is proposed:

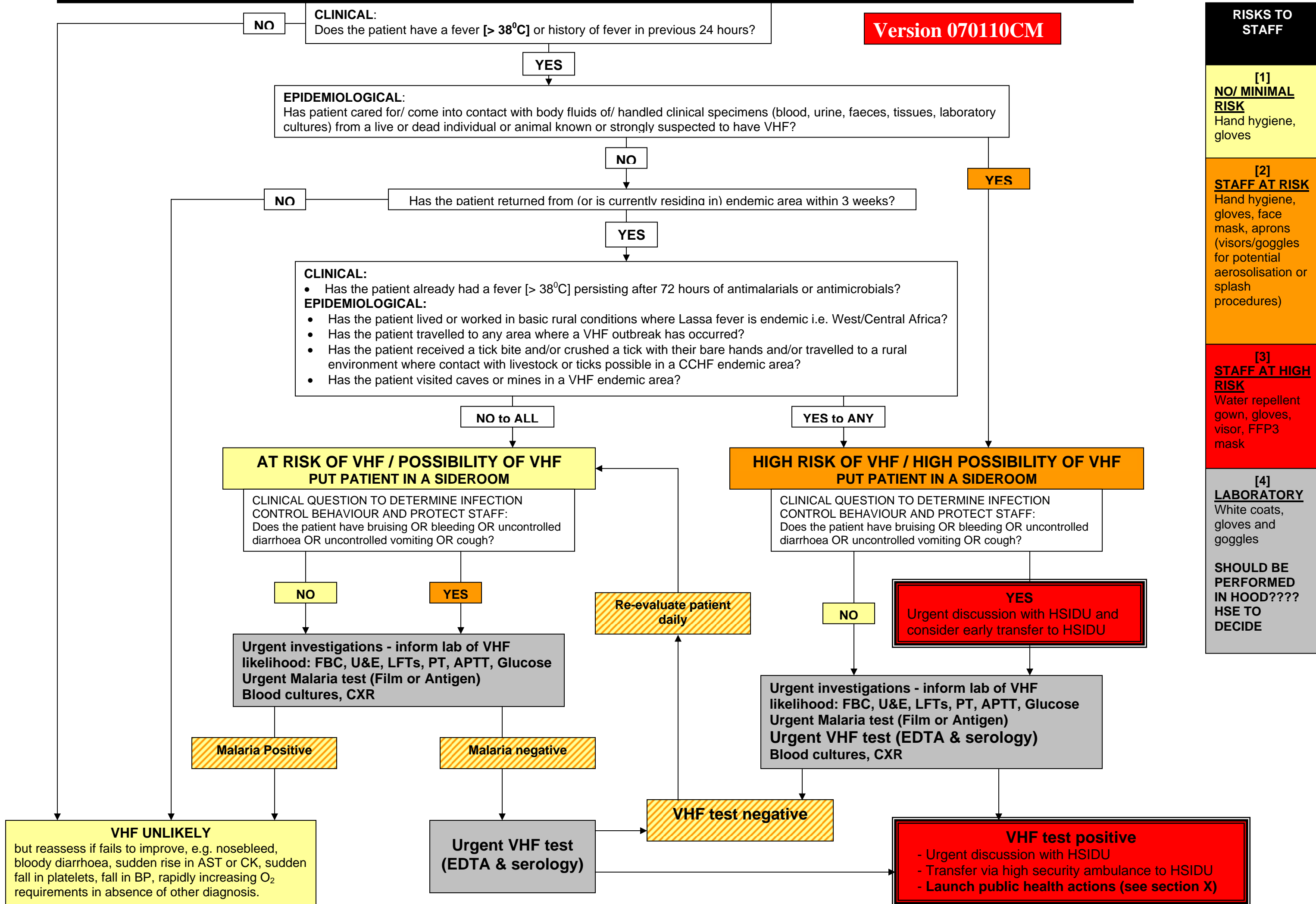
- A detailed plan of the structure and format of the new guidance including a contents page will be drawn up for presentation to members at the meeting in June 2010. The paper will also include a note of the key decisions made and will address in particular the non-Trexler containment options.
- A final draft will be presented to members at the meeting in September 2010.

Action

Members are asked to note progress and agree to the proposed timescale for completion of the new guidance document.

Secretariat

Version 070110CM



RISKS TO STAFF
<p>[1] NO/ MINIMAL RISK Hand hygiene, gloves</p>
<p>[2] STAFF AT RISK Hand hygiene, gloves, face mask, aprons (visors/goggles for potential aerosolisation or splash procedures)</p>
<p>[3] STAFF AT HIGH RISK Water repellent gown, gloves, visor, FFP3 mask</p>
<p>[4] LABORATORY White coats, gloves and goggles</p> <p>SHOULD BE PERFORMED IN HOOD???? HSE TO DECIDE</p>