ADVISORY COMMITTEE ON DANGEROUS PATHOGENS

ANNUAL REPORT 2009

CONTENTS

1. INTRODUCTION

The Advisory Committee on Dangerous Pathogens (ACDP) is a non-statutory advisory non-Departmental Public Body. The Committee comprises a Chairman and 14 members. The membership is tripartite, with scientific experts, employer and employee representatives.

The work of the ACDP cuts across a number of Government Departments, and thus the Committee is supported by a Secretariat with representatives from the Health and Safety Executive (HSE), the Health Protection Agency (HPA) on behalf of the Department of Health (DH) and the Department for Environment, Food and Rural Affairs (Defra).

In 2009 the ACDP held three main meetings (the 91st on the 10th February, the 92nd on the 8-9th June and the 93rd on the 10th October). Agenda, papers and a summary of these meetings are available at:
http://www.hse.gov.uk/aboutus/meetings/acdp/index.htm

A number of the ACDP Working Groups met throughout the year including:

- The Transmissible Spongiform Encephalopathy Working Group (TSE WG);
- The Drafting Group for revision of the ACDP guidance on blood-borne viruses;
- The Containment Working Group

A summary of these Working Groups can be found under Item 6 of this report.

2. TERMS OF REFERENCE

The Advisory Committee on Dangerous Pathogens' terms of reference are:

> "To advise the Health and Safety Executive, and Ministers for the Department of Health and the Department for Environment, Food and Rural Affairs, and their counterparts under devolution in Scotland, Wales and Northern Ireland, as required, on all aspects of hazards and risks to workers and others from exposure to pathogens."

3. DANGEROUS PATHOGENS

3.1 Background

The remit of ACDP is to provide advice to workers and others on risks from exposure to dangerous pathogens (also known as biological agents and infectious agents). Workers and others can be exposed to a range of dangerous pathogens in the workplace and through workplace activities.

Certain bacteria, fungi, viruses, internal parasites and infectious proteins (known as prions) are all defined as dangerous pathogens. Dangerous pathogens may be used intentionally at work, for example in a microbiology laboratory, but exposure can also occur that is incidental to the purpose of the work, for example when healthcare workers are exposed to infectious patients, or farmers are exposed to diseases carried by their stock. Exposure to dangerous pathogens in the workplace could lead to the development of infectious disease, disease caused by the toxins produced by the dangerous pathogen, or an allergic reaction.

3.2 Legislation

Dangerous pathogens include infectious agents that cause diseases transmissible between animals and man (zoonoses). Such agents are controlled under human health (DH/HPA remit), health and safety (HSE remit), and animal health legislation (Defra remit). The primary purpose of the latter legislation is to prevent the introduction and spread of animal diseases that affect farmed livestock and poultry.

One of ACDP's roles is to advise on worker health and safety, and much of its advice supports health and safety legislation on the control of exposure to hazardous substances such as dangerous pathogens. Health and safety legislation (principally the Control of Substances Hazardous to Health [CoSHH] Regulations 2002 (as amended)) requires employers to assess the risks from dangerous pathogens in their workplace and to prevent or control exposure. Further information can be obtained from the HSE website: http://www.hse.gov.uk/biosafety/index.htm

Defra seeks to control imports of animal pathogens and carriers from third countries under the Importation of Animal Pathogens Order 1980, and animal pathogens causing serious, predominantly exotic, diseases of farmed livestock and poultry under the Specified Animal Pathogens Order 1998 by means of licensing regimes. Further information can be obtained from Defra's website: http://www.defra.gov.uk/

There are various pieces of legislation covering public health; further information on these can be obtained from the DH website: http://www.dh.gov.uk/Home/fs/en

3.3 Role of the ACDP

The work of ACDP can be broadly divided into two areas:

- Production of guidance relating to safety at work and protection of public health;
- Provision of advice to Government on the formulation and implementation of policy and legislation, relating to specific pathogen risk issues and their impact

ACDP makes a significant contribution to the assessment of risks to employees and the general public from infectious agents, and to ensuring that

appropriate controls are in place. It has produced several guidance documents that give practical advice on the application of health and safety measures for a range of occupational groups and on a range of public health issues. These can be found at:
http://www.advisorybodies.doh.gov.uk/acdp/publications.htm

4. MEMBERSHIP IN 2009

4.1 Membership of the Advisory Committee on Dangerous Pathogens (ACDP)

Independent member	Expert/Employer/ Employee representative/Lay Member	Employer
Professor George Griffin (Chair)	Expert in clinical and research microbiology and infectious diseases	St George's Hospital Medical School,
Professor Colin Howard	Expert in veterinary microbiology/parasitology	The Royal Veterinary College
Dr Judith Hilton	Expert in risk assessment and management	Food Standards Agency
Professor Will Irving	Expert in clinical virology	University of Nottingham
Ms Karen Jones	Lay Member	Air Support International, Crawley
Dr John Keddie	Employer representative	GlaxoSmithKline
Mr John McLuckie	Employee Representative	Belfast City Hospital
Professor Dominic James Mellor	Expert in veterinary microbiology, epidemiology and/or population medicine	University of Glasgow
Dr Phil Minor	Expert in research virology	National Institute of Biological Standards and Control
Mrs Judith Potter	Employee Representative	Royal Devon and Exeter NHS Foundation Trust
Dr Andrew Rycroft	Expert in veterinary microbiology	The Royal Veterinary College
Professor Armine Sefton	Expert in medical microbiology	Bart's and The London
Mr Gordon Sutehall	Expert in laboratory health and safety	Addenbrooke's Hospital
Professor Richard Tedder	Expert in Clinical Virology	Health Protection Agency
Dr Peter Wilson	Employer representative	St Andrew's Hospital

Assessors and observers	Representing
Dr Bob Adak	Health Protection Agency
Dr David Brown	Health Protection Agency, Centre for Infections
Dr Ian Brown	Veterinary Laboratories Agency
Professor Brian Duerden	Department of Health, Inspector of Microbiology
Professor Don Jeffries	Chairman of the ACDP TSE Working Group
Mrs Ruth Lysons	Department for Environment Food and Rural Affairs

Mr John Newbold	Health and Safety Executive
Dr Andrew Paterson	Department for Environment Food and Rural Affairs
Dr Roland Salmon	National Public Health Service for Wales
Ms Tracy Sartin	Cabinet Office
Dr Delia Scan	Department of Health, Social Services and Public Safety, Northern Ireland
Ms Maggie Tomlinson	Department of Health
Dr Graeme Walker	Health and Safety Executive
Dr Malcolm McWhirter	Scottish Executive

Secretariat	**Representing**
Miss Jessica Dean (from October 2009)	Department for Environment Food and Rural Affairs
Miss Amanda Furlonger (from October 2009)	Department for Environment Food and Rural Affairs
Miss Papia Khanom (until October 2009)	Department for Environment Food and Rural Affairs
Mr Graham Lott (until October 2009)	Department for Environment Food and Rural Affairs
Miss Charlotte Mirrielies	Health Protection Agency
Dr Justine Robilliard (until October 2009)	Department for Environment Food and Rural Affairs
Ms Diane Tsavalos (until June 2009)	Health and Safety Executive
Mr Lee Wilson (from October 2009)	Health and Safety Executive

Three new Members joined the Committee in 2009, Dr Judith Hilton, from the Food Standards Agency (FSA), Professor, the Honourable Richard Tedder, from the Centre for Infections at the Health Protection Agency (HPA) and Professor Dominic Mellor of the Institute of Comparative Medicine at the University of Glasgow

There were a number of changes to the Secretariat during 2009. Ms Amanda Furlonger and Dr Justine Robilliard and subsequently Miss Jessica Dean replaced Miss Papia Khanom and Mr Graham Lott as Defra Secretariat and Mr Lee Wilson replaced Ms Diane Tsavalos as HSE Secretariat.

Miss Charlotte Mirrielies stepped down after three years as Department of Health Secretariat. Miss Mirrielies had formed an integral part of the Secretariat, and had made significant contributions to the work of the committee.

4.2 Membership of the ACDP TSE Working Group

Independent member	Employer
Professor Don Jefferies (Chair)	University of London
Mr Ray Bradley	Private BSE Consultant
Dr Adam Fraise	Queen Elizabeth Hospital, Birmingham
Professor Colin Howard	Royal veterinary College
Professor James Ironside	University of Edinburgh
Professor Jean Manson	Neuropathogenesis Unit, Roslin Institute
Dr Phil Minor	National Institute of Biological Standards and Control
Dr Michael Painter	Public Health Consultant (retired)
Dr Geoff Ridgway	Consultant Microbiologist (retired)
Dr Roland Salmon	National Public Health Service for Wales
Mr Ron Spellman	Unison
Dr Tim Wyatt	Mater Hospital Trust, Northern Ireland

Officials and Observers	Representing
Mr Peter Bennett	Department of Health, Statistical Unit
Mr Patrick Burke	Department for Environment Food and Rural Affairs
Dr Michael Rogers	Secretariat to the Advisory Committee on the Safety of Blood, Tissues and Organs
Dr Andrew Riley	Scottish Executive
Dr Nicky Connor	CJD Incidents Panel Secretariat
Dr Darren Cutts	Food Standards Agency (retired mid-2007)
Dr Irene Hill	Food Standards Agency
Mr Allan Hidderley	Medicines and Healthcare Products Regulatory Agency
Mr Mark Noterman	Department of Health, CJD Policy
Mr David Pryer	Chair of CJD Incidents Panel
Dr Peter Grimley	Spongiform Encephalopathy Advisory Committee Secretariat, Defra
Mr Nigel Tomlinson	Department of Health, Estates and Facilities

Secretariat	Representing
Miss Charlotte Mirrielees/ Miss Julia Granerod	Health Protection Agency

There were some changes to the TSE Working Group in 2009. These were:

- Prof Ian McConnell left the TSE Working Group in December 2009
- Dr Adam Fraise joined the TSE Working Group in November 2009
- Miss Julia Granerod replaced Miss Charlotte Mirrielees as Scientific Secretariat in December 2009
- Mr Craig Kirby changed to a papers-only observer in 2009
- Dr Mike Paton and Mr John Pride (HSE observers) left the TSE Working Group in 2009
- Dr Elaine Gadd left the TSE Working Group in 2009.

4.3 Membership of the Containment Working Group

Independent member	Employer
Professor George Griffin (Chair)	St George's, University of London
Professor Malcolm Bennett	Liverpool University
Dr David Brown	Health Protection Agency
Dr Gary Burns	Astra Zeneca
Dr Tim Doel	Merial Animal Health
Dr Trevor Drew	Veterinary Laboratory Agency
Dr Uwe Mueller-Doblies	Institute for Animal Health
Dr Michael Skinner	Imperial College, London
Mr Gordon Sutehall	Health Protection Agency

Secretariat	Representing
Ms Julia Crouch	Health and Safety Executive
Mrs Ruth Lysons	Department for Environment Food and Rural Affairs
Ms Lorraine Medcalf	Health and Safety executive
Miss Charlotte Mirrielies	Health Protection Agency
Mr John Newbold	Health and Safety Executive
Ms Maggie Tomlinson	Health Protection Agency

4.4 Membership of the Drafting Group for Revision of the ACDP guidance on blood-borne viruses

Independent member	Employer
Professor Will Irving (Chair)	University of Nottingham
Dr Alan Beswick	Health and Safety Laboratory
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Mr Jonathon Gawn	Health and Safety Executive
Mr John Newbold	Health and Safety Executive
Dr Michael Painter	Public Health Physician (retired)
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5. Key issues discussed by ACDP in 2009

In 2009 the ACDP held three main meetings: the 91st on the 10th February, the 92nd on the 8-9th June and the 93rd on the 10th October.

Members discussed the progress of ACDP Working Groups under the Secretariat Report at each meeting. ACDP Working Group reports for 2009 are in section 6 of this document.

5.1 91st Meeting – 10th February 2009.

At the 91st meeting, members discussed:

Revision of the ACDP guidance on blood-borne viruses (BBV)

A considerable number of comments on the draft guidance were received from a very constructive public consultation, which was held in 2008, closing in November. It was hoped that the final draft would be available for sign off by the committee at this meeting, however, there were some outstanding issues to take into consideration and instead, the final draft of the guidance will be presented at a later meeting.

Working group to draft guidance on non-circulating strains of influenza virus

The committee agreed to form a small working group to update the current ACDP document "Advice on working with influenza viruses", available here: http://www.hse.gov.uk/biosafety/diseases/acdpflu.pdf. The Working Group would include at least one member with experience of animal viruses, a member of the Scientific Advisory Committee on Genetic Modification to cover GM issues and a virologist from the National Institute for Biological Standards and Control (NIBSC).

Q fever vaccination – feedback from the Joint Committee on Vaccination and Immunisation (JCVI)

JCVI discussed immunisation of humans against Q fever at its meeting in October 2008. The Chairman of JCVI provided ACDP with the background paper prepared for the Committee for this item, and a letter to the ACDP Chairman detailing the outcome of their discussions. The background paper outlined the effective vaccines available against the Q fever organism, *Coxiella burnetii*, and the current strategy in Australia for use of the whole cell vaccine Q-vax.

JCVI were asked to consider two possibilities for vaccination in the UK – for use in an outbreak situation, and as an occupational control measure. The Committee did not feel that vaccination was likely to be of benefit in the outbreak situation and that more detail was needed on the burden of the disease in occupational at risk groups. JCVI would be considering this again

at their June meeting, once they have received data from the HPA on the burden of disease. Their final decision will be reported back to ACDP following this meeting.

Poliovirus facilities containment plan

The W HO Poliovirus eradication programme requires all potential sources of wild poliovirus, including laboratory sources, to be destroyed or safely contained. As a result the JCVI and ACDP set up a joint Working Party to take this work forward in the UK in 2000. The Working Party meets at least once a year to review progress.

In 2008, the Department of Health commissioned work to review activities in the UK against the WHO global action plan for laboratory containment of wild polioviruses and to make recommendations on future action required. This report has now been completed and was presented to members. HSE are conducting an audit of laboratories in the UK, which have stocks of wild polioviruses, and this is expected to be completed by the end of March 2009. A report on the findings will be prepared.

Publication of the Griffin Review

An Independent Review of the Highest Level Microbiological Containment Facilities in the UK, led by Professor George Griffin, reported in October 2008.

5.2 92nd Meeting – 8/9th June 2009.

At the 92nd meeting Members discussed**:**

Additional guidance on *Neisseria meningitidis*

ACDP approved the additional guidance produced by HSE for laboratory workers working with *Neisseria meningitidis*, which was included in the Secretariat report. The guidance will be published on the ACDP website.

West Nile virus - draft proposal for serology study

A virologist from the Virus Reference Department at the HPA Centre for Infections, seconded from the European Centre for Disease Control, has been identified to draft a proposal for a wider serology study. Progress on this work will be presented at a future ACDP meeting.

Seasonal influenza vaccination of poultry workers

The current findings from the 2008/2009 seasonal influenza immunisation programme for poultry workers in England which ran from 1 September 2008 to 31 March 2009 were presented to members. The uptake rate for 2008/9

was reported to be 14.5%. Although this is viewed as disappointingly low, it does represent an increase of 1.5% from the previous year.

The uptake rate was based on a response from 135 out of 152 Primary Care Trusts (PCTs) who identified 28,202 poultry workers. It was also noted that the uptake varied considerably by Region, and was similar to the uptake rate for seasonal influenza vaccination of Healthcare workers, which is usually around 17%.

In Northern Ireland, the total number of poultry workers vaccinated for seasonal flu during 2008/09 was reported to be 173. It was reported that there had been a lot of difficulty in Northern Ireland in calculating a denominator i.e. the total number of poultry workers eligible for vaccination, and thus it was difficult to interpret the uptake figures with respect to the eligible population.

Update on SAPO classification of Highly Pathogenic Porcine Reproductive and Respiratory Syndrome Virus (HP PRRS)

Defra updated the committee on progress to classify the Highly Pathogenic Porcine Reproductive and Respiratory Syndrome virus (HP-PRRS), which is not currently classified under SAPO. At the last ACDP meeting, Members had been unable to formally classify the virus and requested additional scientific information which Defra agreed to provide. The additional information comprises;

- Creation of a disease profile to allow for easier comparison to other agents. This profile is in the final stages of validation.
- Production of an impact assessment to examine the impact of an incursion of HP-PRRS on the UK pig population.
- Creation of a side-by-side comparison of HP-PRRS to other porcine pathogens (Aujeszky's Disease, Classical Swine Fever and African Swine Fever) currently categorised under SAPO

Working Group to write Guidance on non-circulating strains of human influenza virus of known pandemic potential

The Secretariat reported that despite a number of attempts to organise a meeting in the first half of 2009 there had been no convenient date for all members. It was therefore proposed that, following discussions at this meeting, HSE and the Secretariat would draft an update to the Guidance and circulate it to the proposed Working Group members for comment.

Risk to public health from non H5/7 Avian Influenza subtypes ACDP/92/P10

There had been two outbreaks of low pathogenicity H6 avian influenza in turkey premises in February 2009 in the east of England. The HPA's protocol

for responding to outbreaks of avian influenza from low pathogenicity non H5/H7 serotypes was followed in managing the public health risks. There had been discussion at the time of the outbreak as to whether any additional precautions were needed, given that H6 strains of influenza were amongst those considered by WHO to be of pandemic potential, on the basis of research results. However, in view of the risk assessment done, it was determined that no additional measures were needed to those already implemented to protect public health.

Members also considered the need to review the HPA protocol in relation to such non H5/H7 low pathogenic strains in the light of the inclusion of H6 strains on the WHO list of strains with pandemic potential. It was agreed that there was no need to change the current HPA protocol for responding to outbreaks of avian influenza.

ACDP 2008 annual report

The Secretariat presented the ACDP annual report 2008 which had been drafted to include membership of the committee and all Working Groups, and a summary of key issues discussed throughout the year. Members approved the document and the report was published on the ACDP website hosted by HSE.

5.3 93rd Meeting – 13th October 2009

At the 93rd meeting Members discussed**:**

Advice on working with A/H1N1 pandemic influenza virus

As a result of the confirmation in August 2009 that novel A/H1N1 pandemic influenza virus was widely circulating in the UK, with sustained levels of transmission, HSE published a statement on their website confirming that all laboratory based work with the virus, including handling, concentration and propagation, could take place at Containment Level 2, subject to a suitable and sufficient risk assessment, with use of an Microbiological Safety Cabinet (MSC) until inactivation of the virus.

A/H1N1 pandemic influenza virus in pigs in Northern Ireland
A/H1N1 pandemic influenza in pigs – Worker protection

Defra reported that the circulating A/H1N1 pandemic influenza virus circulating in the human population was confirmed as having been found in three pig herds in Northern Ireland during September and October. These are the first confirmed reports in pigs in the UK; worldwide, a number of pig herds have also been infected. It was considered that due to the current human flu

pandemic, these findings were not unexpected, and would not pose any increased risk to the general public. Defra and the devolved administrations are collaborating closely with the pig industry to develop of a Code of Practice for pig keepers to reduce the risk of infection in pig herds, and minimise spread should a herd become infected.

Members also considered the need for additional advice to pig workers. Current guidance on zoonotic risk protection is available from the HSE website however inn view of the current situation it was agreed that more specific advice may be required. Defra and HSE agreed to set up a meeting with representatives of the pig industry to consider protective measures for pig workers and report back the findings to ACDP.

Vaccination of pig workers was discussed by members taking into account the recent change in circulation of A/H1N1. With the wide circulation in the human population, and with sustained levels of transmission, it was concluded that pig workers were at greater risk of infection from contact in the community than contact with pigs at work. Vaccination was not therefore proposed at this time, particularly as those at risk from flu would be captured as part of the risk groups in the community for both A/H1N1 and seasonal flu vaccine.

Update on SAPO classification of Highly Pathogenic Porcine Reproductive and Respiratory Syndrome Virus (HP-PRRSv)

Defra reported an ongoing consultation exercise to consider adding Porcine Reproductive and Respiratory Syndrome virus Genotype 2 (PRRSv2) as a Category 3 organism to SAPO 2008 by means of an Amendment Order. Defra informed Members that they were not aware of anyone currently wishing to work with this virus in the UK, and asked members to bring the consultation to the attention of relevant colleagues.

Needlestick injuries and the use of safe devices

Members discussed the use of ‘safe devices’ to prevent needlestick injuries in Healthcare, HSE agreed to consider how the application of CoSHH, in particular the hierarchy of control and risk assessment would affect the use of such systems within the healthcare sector.. It was agreed that the secretariat would report back at the next meeting.

Members were also informed that the use of “safe devices” had also been discussed at the Advisory Group on Hepatitis, and it had been reported at that meeting that there are inconsistencies with how safe devices are used in the NHS.

Polio

A full update regarding the national inventory and audit of laboratories holding poliovirus was included in the Secretariat Report. The HSE final report will be placed before the UK Working Group meeting in November for consideration. It was reported that 48 laboratories in the UK are still holding polio or materials, which may contain the virus. Each of these laboratories would be visited as part of the audit programme and where possible encouraged to dispose of their virus stocks or material.

Positive Pressure Ventilation Lobby (PPVL) isolation room design

The research findings on the performance of 'Positive Pressure Ventilated Lobby' patient isolation facilities had been sent out for a second expert peer review exercise. The initial exercise did not provide sufficient opinions on the aerodynamic analysis undertaken. Information on the subsequent analysis is to be presented to Members at a future meeting.

ACDP review 2010

The Secretariat informed Members that a 'light touch' review of ACDP, its Working Groups and subgroups will be reviewed in 2010.

Progress update on the Single Regulatory Framework for animal and human pathogens

An update on the development of the single regulatory framework for animal and human pathogens was provided to members. Details of individual work streams within the project and their progress were included in detail. A number of focus groups involving key stakeholders are planned for the autumn of 2009 to help disseminate information to laboratory sectors, review emerging issues and provide feedback to the HSE project team. A legislative reform order (LRO) is required to amend the Health & safety at Work etc Act 1974 to provide HSE with the vires to regulate contained use aspects of animal health. A public consultation on the LRO is planned to run from January to mid-April 2010.

HSE introduced the final draft of the ACDP Biosafety Guidance, which had been drafted by HSE and the ACDP Containment Working Group. This new guidance will support the single regulatory framework and become the first ACDP publication available to dutyholders who wish to work with human or animal pathogens under the new regulations. The guidance will provide practical advice on risk assessment and selection of containment measures for working with human and animal pathogens in contained use settings. . This guidance will be included within the public consultation package, together with the new regulations, is planned for early 2010 and will run for 3 months.

HSE are currently developing the new 'Approved List 2011', which will brigade together human and animal pathogens from current (ACDP 2004 and SAPO 2008) lists into one document using the newly defined combined hazard

groups. The categorisation of biological agents in this document will be an Approved List made under Section 15 of the Health and Safety at Work etc Act 1974. The CU2011 Regulations, by referring to this list, imposes requirements, which are legally binding**.** The list will be formally reviewed by ACDP at a meeting later in the year

Revision of ACDP guidance following the implementation of the new Contained Use Regulations 2010

Members considered the consequences of the new single regulatory framework on existing ACDP guidance. The removal of schedule 3 of COSHH and replacement with a new set of regulations specifically aimed at contained use would, render a considerable amount of existing occupationally related ACDP guidance outdated.
Members were asked to consider which of the existing guidance was likely to need revision and to identify which were no longer needed.

6. ACDP WORKING GROUPS

6.1 Transmissible Spongiform Encephalopathy Working Group (TSE WG)

The TSE WG was reconfigured in 2004 with the following terms of reference:

> *"To provide practical, scientifically based advice on the management of risks from transmissible spongiform encephalopathies (TSEs), in order to limit or reduce the risks of human exposure to or transmission of TSEs in healthcare and other occupational settings. To provide advice to ACDP, SEAC and Government Departments, as requested, and to handle issues referred to those bodies, taking into account the work of other relevant bodies."*

The TSE WG met twice in 2009 on the 12th March and 17th September.

At each meeting, members received an update on the numbers and epidemiology of both CJD and BSE cases and a progress report on current research. Members also received feedback from the ACDP, and related committees such as the CJD Incidents Panel, the Spongiform Encephalopathy Advisory Committee, the Advisory Committee on the Safety of Blood, Tissues and Organs and the Engineering and Science Advisory Committee on the decontamination of surgical instruments, including prion removal.

The following key issues were considered by the TSE Working Group in 2009:

Assessment to be carried out before surgery and/or endoscopy to identify patients with, or at risk of, CJD or vCJD (Annex J)

Revisions to Annex J were discussed at both the March and September meetings of the TSE Working Group. These revisions included:

1) The addition of a new question to identify those who have received transfusions from 80 or more donors;
2) Possible revision of the recommendation that those who received human-derived dura mater between 1980 and August 1992 are at increased risk of vCJD.

[It has since been decided that those who received human-derived dura mater between 1980 and August 1992 are no longer at increased risk of vCJD. This decision was based on there having been no cases of iatrogenic CJD, associated with dura mater grafting, which could be identified as due to the variant form, and also information provided by the manufacturers about the countries of origin of the clinical material.

Annex J has since been updated at:

http://www.dh.gov.uk/ab/ACDP/TSEguidance/index.htm]

Ophthalmology (Annex L)

An Ophthalmology subgroup was convened in November 2007 to provide practical guidance on risk reduction and management of CJD transmission with respect to ophthalmic practice.

The resulting guidance was submitted to the ACDP TSE Working Group for ratification. A number of issues regarding the ophthalmology guidance were discussed and resolved at the March meeting of the TSE Working Group. These included:

Clarification of anterior versus posterior surgery
Scleral buckling surgery
Ocular tissue transplantation
Allogeneic sclera
Decontamination protocol for diagnostic equipment in eye units

The guidance was published in September 2009 at:
http://www.dh.gov.uk/ab/ACDP/TSEguidance/index.htm

Part 4

At the September meeting of the TSE Working Group it was agreed that the Part 4 of the Working Group guidance on infection control of CJD and related disorders in the healthcare setting was in need of revision in several areas. The input of Members was required specifically on the following issues:

Low risk procedures on symptomatic CJD/vCJD patients

Surface decontamination

Clinical waste disposal

Use of surgical instruments exclusively on the same patient and Annex E

[Part 4 has since been published at:
http://www.dh.gov.uk/ab/ACDP/TSEguidance/index.htm]

Decontamination and waste disposal (Annex C)

To move forward with the proposed update to Annex C of the Working Group guidance it was agreed that, instead of updating Annex C as it currently stands, much of the information would be moved into Parts 3 and 4 of the guidance which contain advice on working with TSEs in laboratory and healthcare environments. It was agreed that Annex C would be reduced to a more technical document, for example outlining the effective/ineffective chemicals and processes for decontamination, and the relevant legislation and guidance.

Annex C was published in November 2009 at:

http://www.dh.gov.uk/ab/ACDP/TSEguidance/index.htm

Article on the Working Group guidance in the Bulletin of the Royal College of Pathologists

To raise the profile of its guidance with the members of the Royal College of Pathologists, the Working Group wrote a one page article in the Bulletin of the Royal College of Pathologists. The article was published in the July 2009 issue.

Urology alert

Most transrectal prostatic biopsies are undertaken by means of single use needle devices guided by an adjacent ultrasound probe. However, some transrectal prostatic biopsies are undertaken by means of single use needles passed through the internal lumens of reusable ultrasound probes. There is therefore a potential risk of vCJD cross-infection occurring during prostatic biopsy if this type of reusable equipment is employed for this procedure on patients at risk of vCJD, because there is no decontamination method that reliably eliminates or destroys abnormal prion protein.

An alert was produced for urological surgeons raising this issue for patients who are at increased risk of vCJD and outlining various management options if the equipment to do a transrectal prostatic biopsy by means of a single use needle guided by an adjacent ultrasound probe is not available. This alert was approved by the Working Group and was subsequently issued by the MHRA.

House of Lords Science and Technology Committee on "Setting funding priorities for scientific and technological research"

The House of Lords Science and Technology Committee undertook an inquiry into the setting of research funding priorities within Government and other bodies responsible for the allocation of public funds for science and technology research and had invited evidence for this inquiry. The Working Group considered the opportunity this presented to raise some issues facing the TSE research community, particularly the declining funding for TSE research and the number of important unanswered questions that remain about these diseases. Thus, a joint response was drafted and submitted from the Working Group, SEAC, the CJD Incidents Panel and ESAC-Pr.

Annex H

In April 2009 the Association of Anatomical Pathology Technologists (AAPT) wrote to the Working Group with regards to Annex H (After death). Both the letter and the revised Annex H document contained detailed comments on the Annex, and suggestions for new wording and a new approach. The Working Group considered the response from the AAPT on Annex H of the guidance and welcomed many of the comments made.

[Annex H has since been revised to incorporate comments from the AAPT and is due to be published shortly.]

6.2 Containment Working Group

As part of the development and implementation of the single regulatory framework, the Callaghan Review recommended the development of clear technical guidance covering contained use of both wild-type human and animal pathogens and GMMs, incorporating a common set of containment measures aimed at ensuring adequate control of those pathogens. .The purpose of the working group was to produce clear technical guidance, which defines:

- New combined hazard groups for all pathogens within scope
- A common set of containment measures covering laboratory, animal work, GM plants and e.g. large scale
- Risk based approach to selection of appropriate control measures for safely containing risks from work with human & animal pathogens.
- Appropriate use of derogation within legal requirements to support a risk based approach
- Provide flexibility in selection of laboratory control measures for all pathogens
- Activity classification
- Notification requirements

The working group met five times during the year, January, March, May July and October and made considerable progress in drafting the new biosafety guidelines and Approved list. The draft has been seen by both the main

committees of ACDP and SACGM and will form part of the public consultation package for the new regulations.

6.3 Drafting Group for revision of the ACDP guidance on blood-borne viruses

A considerable number of comments on the draft guidance were received from a very constructive consultation, which had been held in 2008, closing in November. An amended draft was presented to the committee at the 92nd meeting and Members were informed of the changes that had been made to the document, particularly in relation to occupational health. Subject to legal clarifications on Part 2 and final editing of the guidance text, the final document would go forward for publication in mid 2010.

Secretariat
February 2011