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Dr Metters

From: Dr A Wight

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Copies: Dr McGovern
Mr Lister

OCCUPATIONAL EXPOSURE TO BSE AND CJD

1. Your minute of 6 October refers.
2. The Tyrrell Committee met on 7 October and the significance of the two cases of CJD reported in dairy farmers who had BSE-affected animals on their farms was discussed at some length, as were the implications of a third (or fourth) similar case.
3. The Committee were unable to identify any possible risk factors over and above those that they had already considered, both in general and with particular reference to these two cases, that a dairy farmer might be exposed to. Apparently the practice of tasting the feed does continue but there was no consensus about the value of advising farmers to discontinue this practice. Feed currently in use does not pose a risk because of the ruminant-ruminant feed ban.
4. It was felt that it would be useful to gain as much data as possible from Europe on the incidence of CJD in farmers and other potential occupationally exposed groups, and to publish UK data on comparative incidences in other occupational groups. Comparative occupational analyses might well throw up similar, difficult to explain, findings - for example, the excess incidence in nuns in France. However, these are in part presentational approaches and do not answer the questions of whether:
 - a) farmers are at increased risk; and
 - b) if so, why?

As there are no leads on the answers to these questions at the moment, the Committee felt that they could do no more than reconsider most urgently if, and when, a further case arose.

5. The limited use of statistical analysis and prediction was also commented on as statistics cannot provide a very meaningful indication of biological significance when the numbers concerned are small. The Committee therefore concluded that they could not at present say what a "significant" number of such cases would be.

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6. The final conclusion was that rodent inoculation of the two farmers' brains should be undertaken as a matter of some urgency to determine whether the farmers' illnesses were typical of CJD, or more like BSE. The MRC have agreed to fund this work, and I would endorse the Committee's view that it is essential this gets underway as soon as possible.

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Dr Ailsa Wight
Rm 534B, SKH, Ext. 25357