

CONFIDENTIALBSE AND

1. You will see from the attached minutes and report that I attended a very interesting and thought provoking meeting with [redacted] and [redacted] from [redacted] about their reaction to BSE. The report itself is an excellent summary and interpretation of the literature on scrapie, BSE and other encephalopathy. [redacted] are in the process of carrying out a risk assessment in petfoods by estimating the possible levels of the agent in different tissues, adjusting these to give infectivity titres on an inter-species and dietary infection basis, and estimating the likely thermal deactivation of the heat process during canning.

2. The result of their assessment will enable them to adjust their source or specification of raw materials, and their heat process if necessary, in order to reduce the risk to what they feel is an acceptable level. They already have a tight control over their raw materials, and any change would be easy for [redacted] to implement.

3. I have thought very hard about whether the Branch should carry out a similar exercise with meat and meat products for human foods. On balance I do not think we should undertake it, but a final decision has not been taken and you may wish to discuss this further. The reason for my reluctance is that I would have to use the same data as [redacted] who has used as his basis, infectivity titres of different organs from sheep and goats with scrapie. The infectivity levels were determined by intercerebral injection into mice. The different organs can be placed in four categories of decreasing infectivity. For the purposes of human and petfoods only two and possibly three categories are important. Category I consists of brain and spinal cord and has the highest titres. Category II contains spleen and lymph nodes with an order of magnitude of titres lower. Category IV contains all the remaining organs, which had levels below the level of detection, and include heart, liver, kidney, skeletal muscle etc. In suggesting infectivity levels for different organs from preclinical and clinical animals for quantitative assessment, [redacted] has had to make intelligent guesses at the fact that even though the assay, which has a interspecies barrier, has not detected the agent, it might still be present in Category IV organs. In fact when all the effects are built in to figures, the infectivity levels are not insignificant in this Category.

4. Thus if one discounts the consumption of Category I organs, the determination of exposure of humans to the agent will therefore rest on consumption of Category IV parts of the carcass. In the case of [redacted] they have a

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heat process which can reduce levels of infectivity. But most human consumption of meat and meat products involves a cooking process which would not give any deactivation at all. Therefore, there would be no way of reducing such a calculated exposure of BSE agent to the public without recommending certain restrictions to Ministers. However, if challenged, the basis of our conclusions would still be intelligent guesswork rather than hard facts and would be difficult to substantiate.

5. I think that close contact should be maintained with to see how his assessment is progressing and what conclusions can be drawn from the exercise. On the other hand, I think that the Ministry should be taking certain steps in the short term to allay public fears and the media interest, which has intensified the past week. These steps should ensure that spinal cord, brains and spleen should not be entering the human food chain either directly or through MRM, and will be given an adequate heat process if sold for animal feed.

6. I have spoken to MLC who have informed me that normal abattoir practice is to scrape out the spinal cord, as best possible, after splitting the bovine carcass. Some of the remaining cord is also removed by water hoses, when washing the carcass. It would seem an easy step to ensure that this practice takes place in all abattoirs dealing with cattle, and that as much of the spinal cord is removed as possible. The heads are not a problem because they should all be sent for rendering. The spleen also should not be used for human foods, but this may not be easy to achieve voluntarily. I am sure any move which cost the abattoirs more money will be resisted, but loss in sales caused by public fears will also hit abattoirs as well.

*M. L. Wolfe*

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*I think we should maintain contact  
as suggested in  
para 5 above. I also think we, on  
the 'food side' should discuss and let  
Health Ministers have a note of any  
further conclusions we come to.*

14

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