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DTE 1437

*BSE / CVL*

*A little - you  
may wish to note their  
particular procedure for  
these cases and the doctor's  
involvement.  
D. Austin*

IN CONFIDENCE

J M Scudamore Esq  
Scottish Office Agriculture  
& Fisheries Department  
Pentland House  
47 Robb's Loan  
EDINBURGH  
EH14 1TW

14 March 1993

*Thank you*  
*D. Sheer* *J. M. Scudamore*  
*16/3* *15/3*

Dear Jim

BSE - ATYPICAL LESION DISTRIBUTION (RBSE 92/21367)

This is to confirm our telephone conversation yesterday concerning, in particular, the results of my earlier discussion with Tony Austin on the proposals for clinical studies. I am copying to Kevin Taylor as he wishes to be kept informed on the progress with investigating this case. As Tony Austin and Martin Jeffrey are intimately concerned I am copying to them also.

1. Tony Austin will analyse all the clinical data in our possession concerning BSE suspects in this herd whether BSE positive or negative (and including RBSE 92/21367). He will copy any information on this specific case to Dr Marion Simmons, Experiment Leader of the 'Negative Study' which revealed the case. The full report will be sent to you, Dr Jeffrey, Mr K C Taylor and John Wilesmith via myself. No visits to the farm where the case was identified are contemplated until a further suspect is notified.
2. When a new suspect case is reported from the farm it is proposed:
  - a) The VO will phone Mr Austin proposing he visits the next working day if he places the cow under restriction and subject to any welfare considerations. The VO will then visit the farm and if appropriate place the cow under restriction.
  - b) The VO will attempt to secure the owner's agreement to an in-depth clinical examination the next working day. If this is secured Mr Austin will be informed. The farmer's veterinary surgeon will also be informed of the intention but his attendance is not necessary unless he wishes. The reasons (para c) will be given.

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- c) The farmer will be told that the reason for undertaking this more detailed study is:

- Mr Austin has a research project which is investigating the clinical symptomatology of BSE cases, normal controls and BSE negative cases but which are BSE clinical suspects. This last group is difficult to come by and can only be identified post mortem when brain histology is complete. It can only be done in Scotland where complete brains are collected from all suspects as a full neuropathological brain examination is required. Homebred herds in which a high proportion of suspects are negative are those to target, such as this particular herd. Since it is possible that several BSE suspects may occur on this farm in future it is important that, if these are negative after histology, some opportunity for investigating the clinical biochemistry and serology should be available in order to provide feedback to the farmer via his veterinary surgeon. To achieve this blood samples will be required including serum (for serology), EDTA (for PrP genotyping) and others as determined by Mr Austin. All will be appropriately stored until there is a need to examine them. Mr Austin has agreed to ensure that blood sampling would be conducted within the provisions of the Animal Procedures Act and to provide the special tubes if that is required.

- d) Mr Austin and the VO will visit together the next working morning and hopefully agree on the clinical diagnosis such that slaughter and disposal arrangements can be made for later that day. The VO will deal with all statutory paperwork.
- e) Mr Austin, with the farmer's agreement and subject to animal welfare requirements, will continue his clinical examination over a number of hours (studies on rumination will form part of it). At a pre-arranged time the VO will return and destroy the animal in the normal way.
- f) The VIC will be requested to collect fixed whole brain and frozen brain and spinal cord as identified in para 3c of my letter of 9 March. You have undertaken to discuss this with Dr Karl Linklater. Any technical details that are unclear can be provided by Dr Jeffrey.

We have agreed to have a final discussion when you have had time to read the various documents when we will agree the details for contact arrangements with Mr Austin, the Scottish VIS (re brain samples) and the practitioner. Following that, all can be left to Mr Austin and the VO should a suspect case occur. Obviously you will discuss also with the RVO/DVO.

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If anything is unclear we can discuss. Thank you for your interest and support.

With regards

Yours sincerely

A handwritten signature in black ink, appearing to read 'R Bradley', with a large, sweeping flourish above the name.

R BRADLEY

cc Mr K C Taylor  
Dr B J Shreeve ✓  
Mr M Dawson  
Dr M Jeffrey  
Mr A Austin

93/03.14/1.3