Sheep develops vCJD after receiving blood from another sheep

Is blood from people infected with variant Creutzfeldt–Jakob disease (vCJD, or bovine spongiform encephalopathy [BSE]) infectious? The final answer won’t be known for several years, but a British study (Lancet 2000;356:955-9) provides “convincing evidence” that it may be. In this study, blood from a sheep that had been fed 5 g of BSE-affected cattle brain was transfused into another sheep. At the time, the sheep that provided the blood was symptom free. The sheep that received its blood subsequently began exhibiting clinical signs of and pathological changes associated with BSE. Before this, there was only “hypothetical” evidence that vCJD was transmissible via transfusions (CMAJ 1998;159[6]:669-70).

“Although this result was in only one animal, it indicates that BSE can be transmitted between individuals of the same species by whole-blood transfusion,” the authors report. The finding came after blood services in Canada, the US and New Zealand had already moved to ban transfusions from people who spent more than 6 months in the UK in the 1980s and early ’90s because of fears they might harbour the disease. Australia is now considering a similar move.

This initial result was released early because of fears of media leaks, but an accompanying editorial questioned the move: “Science should not be driven to what in certain medical quarters might be termed a premature emission through fear of media misrepresentation.” The authors said the finding was “sufficiently important” to warrant the early report. — Patrick Sullivan, CMAJ

New food labels to reveal nutritional content

The nutrition labels that Health Canada has proposed for nearly all packaged foods mark a “major breakthrough,” the Alliance for Food Label Reform says.

The 16-member alliance has been fighting for better labelling for more than 3 years. Use of the new, highly informative labels will likely become federal policy in 2001; manufacturers will then have 2 years to comply. The alliance is led by the Centre for Science in the Public Interest (Canada), a nonprofit consumer health organization.

“Only 50% to 60% of foods have any nutritional information,” says CSPI spokesperson Bill Jeffery. Health Canada says that current nutrition labelling is fully voluntary, looks different on different foods, and “when it is present, it usually gives information on only a few nutrients.”

The proposed labels will help parents be more aware of nutritional content, says Jeffery. “It will be great to see the total sugar and calories listed on soft drinks. That will make people think twice.” Health Canada estimates that costs related to unhealthy eating total more than $6.3 billion per year.

The proposed “Nutrition Facts” box will provide information on calories and the 13 nutrients considered most important to health: fat, saturated fat, transfat, cholesterol, sodium, carbohydrate, fibre, sugars, protein, vitamin A, vitamin C, calcium and iron.

Special rules apply to small packages, and exemptions will be given to small manufacturers. Jeffery says the key exemption involves foods packaged at the retail level, including meat, fish and baked goods: “It’s a needless concession that has the potential to compromise the quality of the labelling effort.” — Barbara Sibbald, CMAJ

Prairie paramedics test new weapon against MIs

Paramedics in Saskatchewan and Alberta will soon be administering the clot-busting drug tenecteplase (TNK) to heart attack patients in the field. The move is part of a 1-year clinical trial. The trial, involving paramedics in Edmonton, 2 Alberta counties and Saskatoon, will assess whether patients who receive thrombolytic drugs before arriving at hospital have better outcomes. Paramedics will connect suspected heart attack patients to a 12-lead ECG and transmit the results to participating hospitals. Physicians staffing a 24-hour hotline will deliver the diagnosis and may give a verbal order to inject TNK at once. “When it comes to heart attacks, time is muscle,” said Tim Hillier, director of education for Saskatoon’s MD Ambulance. “The shorter the time from onset of pain to receipt of these drugs, the less damage is done, which in turn improves a patient’s chances of recovery. Within the city we should be able to save 10 to 15 minutes.”

Studies have shown that TNK is as effective as tissue plasminogen activator (tPA) but is easier to administer. It requires a single injection rather than tPA’s 90-minute, 3-bolus infusion. Patients will also receive 1 of 2 different anticoagulant drugs as part of the trial, which began this fall. — Greg Basky, Saskatoon