

The BSE Inquiry / Statement No 410

Dr Helen Grant

Issued 13/05/1999 (not scheduled to give oral evidence)

BSE INQUIRY

STATEMENT OF DR HELEN GRANT MD FRCP

1. My credentials in the matters of BSE and CJD are:
 - a. 1970-1982 Consultant Neuropathologist at the Middlesex Hospital.
 - b. 1985-1989 Consultant Neuropathologist at the Charing Cross Hospital.
 - c. I have carried out six autopsies on CJD victims and reported on a similar number of cerebral biopsies from CJD patients.
1. Through my interest in slow viruses (particularly with reference to multiple sclerosis) I was one of only a few people to be aware of both Scrapie and CJD in 1988.
2. I have never had any formal links with the farming community, renderers, pet food manufacturers, etc. However, slaughterhouse workers began telephoning me as early as February 1989 after they learned through the media of my concern and knowledge about TSEs. Several of them rang me because they had had no instructions from the Health and Safety Executive about precautions to be taken to avoid infection from BSE carcasses. (I have kept some of the correspondence with these workers together with my list of precautions to be taken in abattoirs).
3. I asked the slaughterhouses workers in detail to explain the routine slaughtering practices and was astonished to learn that sheep's brains were generally left inside the skull whereas cattle brains were routinely removed to be added to our "meat products" – meat pies, pates, tinned items and stock cubes. I therefore feared that this almost indestructible infective agent was being swallowed by all beef eaters in the UK in large doses which would inevitably infect genetically susceptible people.
4. I was horrified because I suddenly realised why Government assurances about BSE – namely "we have lived with scrapie for two-and-a-half centuries and it has not done us any harm so we won't have any trouble with BSE" – were based on a false premise which was that cattle brains and sheep's brains were dealt with in the same way in the abattoirs which they obviously were not. Since sheep's brains were seldom removed from the skulls (which is why cattle caught scrapie in the first place) we humans have never been seriously exposed over the centuries to the scrapie agent. Simple economics is the reason: sheep's brains are too small to make the intricate process of their removal worthwhile.
5. I appeared on the BBC nine o'clock television news on February 27, 1989 (the day the Southwood Report was published) in my capacity as consultant neuropathologist at Charing Cross hospital. I was asked among other things to comment on the possible human hazard of BSE and I warned that I thought there was a risk because cattle brains were going into our food chain. I added: "Who knows? Some of us may be incubating it already." Some of us were.

6. I was called to give evidence to the House of Commons Agriculture Select Committee on 13 June 1990 (**IBD 1 Tab 7 p 42**). On re-reading it, I see no reason to change anything in my evidence except the numbers of animals mentioned. The Government of the day was hardly disposed to ask my advice about BSE on a regular basis given my critical attitude since early 1989. But the then Labour Opposition, understandably anxious for information, turned to me frequently. Opposition Members included David Clark MP, Ron Davies MP and Ian McCartney MP. It was my technical information which helped Ron Davies MP to make his effective speech about BSE in the House of Commons on 17 May 1989 (**M 7 Tab 7**). Shortly afterwards, the Minister for Agriculture, John MacGregor, announced that legislation would be brought in to ban all cattle brains from human food (**YB 89/6.13/5.1-5.2**). The long summer recess delayed this legislation and the "specified offals" ban was finally enacted on 9 November 1989 (**L2 Tab 4**) (9 February 1990 in Scotland) (**L10 Tab 9**). Of course this was more than a year (15 months) after cattle had been protected in the same way.
7. Apart from my involvement with CJD I have of course been interested in that worldwide scourge, multiple sclerosis (MS). This led me to ponder the question of "slow virus infection – now labelled "prion infection" (an inaccurate title. In my opinion prion is a short title for an organism which causes Transmissible Spongiform Encephalopathy (TSE) such as scrapie, CJD, BSE, Kuru and others. Prion diseases has therefore become widely used instead of the cumbersome alternative (**YB 94/4.25/10.1**)) – which is one of the aetiological factors involved in MS. Scrapie, the ovine TSE, was then and still is by far the most extensively researched slow virus infection. I therefore read up all the papers on the subject as they appeared during the 1950s, '60s and '70s and was therefore immediately aware of the human hazard posed by the BSE catastrophe. Vets generally did not know about CJD (why should they?) and neuropathologists were mostly ignorant of scrapie. I happened to know about both in those early days due to my interest in "slow viruses".
8. I was in receipt of no extra funds beyond those provided by the NHS and the University of London to run my laboratories and pay my salary as a senior lecturer/honorary Consultant and I suffered no constraints over my publications, lectures to my students, or statements to the media. However, I became increasingly aware after 1988 that questioning official dogma about BSE brought difficulties to one's career. I was myself about to retire from the Charing Cross Hospital, where I worked as a Consultant Neuropathologist, but I observed with horror that the good reputations of dissenting scientists in the field, not least Dr Stephen Dealler and especially Dr Harash Narang were systematically undermined.
9. My primary function has been to teach medical under-graduates and post-graduates about diseases of the brain and nervous system and, of course, to fulfil my clinical functions as a consultant neuropathologist at two London teaching hospitals. This, of course, meant that I conducted both biopsies and autopsies including those on patients with CJD: it was not primarily to publish scientific articles. My scientific publications include only one case which I think in retrospect may be CJD before that was known to be an infection with this agent. ("Post Traumatic Dementia": Helen C Grant, Behrman et al. *Archiv für Psykiatrie und Zeitschrift für die ges. Neurologie*. 1965; 207: 128) More importantly I have carried out several biopsies and autopsies on CJD patients. My duties also included the initiation and supervision of research projects. When my trainees and PhD students published their resulting scientific papers I took the view that the work was theirs, they should get the credit (not I) and therefore I made it a matter of principle not to add my name as co-author.

10. I corresponded frequently from February 1989 onwards with Government ministers including John MacGregor, Donald Thomson, Gillian Shepherd and Angela Browning. But I received only short and reassuring replies containing what I believed to be inaccurate information. Because official bodies treated my early warnings with hostility, I soon learned that the only way to convey my concerns was to contribute relevant letters to the broadsheet newspapers and to speak to responsible members of the press, the broadcasting services and informed members of Opposition parties.
11. Since February 1989 I have answered innumerable letters from members of the public understandably anxious – if not panicky – about the effect on their diets of the outbreak. They came/come from a cross-section of the community: parents ("is the milk safe?"), restaurateurs, doctors, butchers, journalists, Education Committees. Since I retired finally in March 1989 I have had the time to answer them all eventually.
12. The BSE/CJD problem is quite incomprehensible without knowledge of the facts set out in Annex 1. The infective agent has unique and sinister properties.

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