

Health Clearance for new Medical and Dental Students

In accordance with Department of Health (DOH) Guidance, Medical and Dental Students of Barts and The London School of Medicine and Dentistry (Queen Mary University of London), 'new healthcare workers' (DOH) are required to participate in health clearance processes, including immunity assessment and immunisation where appropriate, in regard to infectious diseases; for their own protection and that of the patient community with whom they will have contact.

Here is some information about these diseases and immunity assessment/immunisations:

Chicken Pox (Varicella)

Chickenpox is a disease commonly occurring in young children, but adults can also catch it. Chickenpox tends to be more severe in adults than children, and adults have a higher risk of developing complications. It is particularly risk for pregnant women, new born babies and those with weakened immune systems. You will have contact with many patients from these groups during training and on qualifying as a doctor.

For healthcare workers a vaccine is available for those without chickenpox immunity

Measles, Mumps and Rubella

Measles, Mumps and Rubella are also highly infectious diseases that can result in serious illness (particularly in the case of Measles and Rubella) as with Chickenpox. Anyone can contract these illnesses if they are not immune.

Ideally, students should have had two doses of Measles, Mumps and Rubella (MMR) vaccine in order to provide protection.

Tuberculosis (TB)

TB is a bacterial infection. It is spread through inhaling tiny droplets of saliva from the coughs or sneezes of an infected person. TB mainly affects the lungs. However, the infection can spread to many parts of the body, including the bones and the nervous system.

The Bacillus Calmette –Guerin vaccine (BCG) can protect against TB. BCG is no longer given as part of the childhood vaccination schedule, but where needed this can be provided by the Occupational Health Service during health clearance. In 2009, 9040 cases of TB were reported in the UK. Most of these occurred in urban centres, with over one third cases in London. Globally, TB remains a major public health problem. There were 9.4 million cases of TB in 2009, and 1.7 million deaths from the condition

Blood Borne Viruses (BBVs) - Hepatitis B, HIV and Hepatitis C

How can BBVs be spread in the workplace?

BBVs are mainly transmitted sexually or by direct exposure to infected blood or other body fluids. However, in the workplace, e.g. a clinical setting, direct exposure can happen through accidental contamination by a sharp instrument, such as a needle, broken glass or a sharp piece of bone / tooth. Infected blood may also spread through contamination of open wounds, skin abrasions, skin damaged due to a condition such as eczema, or through splashes to the eyes, nose or mouth.

The risk of injury can be minimised by following infection control arrangements and appropriate use of e.g. gloves and other protective equipment that may be provided, also by following local safety procedures.

Hepatitis B

Hepatitis B is a blood borne virus which causes inflammation of the liver. Many people have no symptoms, but others may experience a flu-like illness with nausea and jaundice when they are first infected. Hepatitis B becomes a chronic infection when the infection persists longer than six months.

An immunisation is available against Hepatitis B Dental students are requested to ensure they commence these vaccinations before coming to College. It is also recommended for medical students at this stage. The primary course of injections consists of 3 doses of vaccine followed by a blood test to assess the level of response.

There are two further blood borne viruses for which no immunisation is available:

Hepatitis C

In the UK, most cases occur in people who share needles contaminated with traces of blood to inject 'street drugs'. Some people clear the infection naturally. Some people with persistent infection remain free of symptoms, but some go on to develop symptoms. After many years of infection some people develop cirrhosis, and a few develop liver cancer. There is a good chance of clearance if treatment starts early.

Human Immunodeficiency Virus

The UK is a relatively low prevalence country for HIV infections. The introduction of drug therapies has improved the lives of many people infected with HIV, but there is still no cure, although with new treatments started early, life expectancy can be little reduced from the average population.

Students are not routinely tested for presence of blood borne viruses unless their studies concern Exposure Prone Procedures (EPPs')

All dental courses are EPP – but for medical courses EPP is not compulsory, for more information see separate leaflet on EPP

Healthcare workers who are infected with BBVs are not allowed to carry out EPPs.² Should a blood test carried out within Occupational Health at Queen Mary University, confirm a dental student to be infected with a BBV they will be referred to our Occupational Health Physician where they will receive counselling and referred for specialist treatment.

For confidential advice please email Occupational Health on occhealth@gmul.ac.uk or telephone: 0207 882 8700.

Further information – References: NHS Choices Website: <http://www.nhs.uk/Pages/HomePage.aspx>

Department of Health – Health clearance for Tuberculosis, Hepatitis B, Hepatitis C, and HIV – New healthcare workers.