
| Symptomatic patients | ▪ Patients who fulfill the diagnostic criteria for definite, probable or possible CJD or vCJD  
▪ Patients with neurological disease of unknown aetiology, who do not fit the criteria for possible CJD or vCJD, but where the diagnosis of CJD is being actively considered |
|----------------------|--------------------------------------------------------------------------------------------------|
| Patients “at increased risk” from genetic forms of CJD | ▪ Individuals who have been shown by specific genetic testing to be at significant risk of developing CJD  
▪ Individuals who have a blood relative known to have a genetic mutation indicative of genetic CJD;  
▪ Individuals who have had two or more blood relatives affected by CJD or other prion disease. |
| Patients identified as “at increased risk” of vCJD through receipt of blood from a donor who later developed vCJD | ▪ Individuals who have received labile blood components (whole blood, red cells, white cells or platelets) from a donor who later went on to develop vCJD. |
| Patients identified as “at increased risk” of CJD/vCJD through iatrogenic exposures | ▪ Recipients of hormone derived from human pituitary glands, e.g. growth hormone, gonadotrophin, are “at increased risk” of transmission of sporadic CJD. In the UK the use of human-derived gonadotrophin was discontinued in 1973, and use of cadaver-derived human growth hormone was banned in 1985. However, use of human-derived products may have continued in other countries after these dates.  
▪ Individuals who underwent intradural brain or intradural spinal surgery before August 1992 who received (or might have received) a graft of human-derived dura mater are “at increased risk” of transmission of sporadic CJD (unless evidence can be provided that human-derived dura mater was not used).  
▪ Individuals who have had surgery using instruments that had been used on someone who went on to develop CJD/vCJD, or was “at increased risk” of CJD/vCJD;  
▪ Individuals who have received an organ or tissue from a donor infected with CJD/vCJD or “at increased risk” of CJD/vCJD;  
▪ Individuals who have been identified as having received blood or blood components from 300 or more donors since January 1990;  
▪ Individuals who have given blood to someone who went on to develop vCJD;  
▪ Individuals who have received blood from someone who has also given blood to a patient who went on to develop vCJD;  
▪ Individuals who have been treated with certain implicated UK sourced plasma products between 1990 and 2001  
▪ Recipients of ocular transplants, including corneal transplants, are not considered to be “at increased risk” of CJD/vCJD. |

Recipients of ocular transplants, including corneal transplants, are not considered to be “at increased risk” of CJD/vCJD.