## NORTH LONDON BLOOD TRANSFUSION CENTRE COLINDALE

PEH/rsb

Date: 29th September 1989

From:Dr. Hewitt

To: All MOs

Consultants for action

at Static Clinics

C.c. Dr. Barbara
Mr. O'Brien

## Blood Donors and HIV Risk

I am very concerned that the last two cases of positive anti-HIV tests in donated blood arose because the written guidance on selection of donors was not applied.

Assessment of HIV risk is set out very clearly in the guidance for selection of donors. It is important that the guidance is followed, both to minimise the risk of infected but seronegative blood being inadvertently transfused and to reduce the possibility of testing being performed without adequate pre-test counselling on an individual recognised to be at significant risk of infection.

HIV risk is one area where "if in doubt, defer" must <u>always</u> be applied. I thought that this was already the case for all doctors. No clinic doctor should make an exception to the written guidance unless the particular case has been discussed with Dr. Moore or myself. A previous "similar" case must not be taken as a precedent as each donor is considered as an individual.

The two cases in question can be briefly summarised:

- A donor responded positively to the questionnaire and discussed her situation with the doctor. Despite the details, which clearly classified her as Group I (high risk), a donation was taken.
- 2. An African national was accepted as a donor and designated 'TA'. The entry on the card recorded that he had been in Africa this year. No further information was given; there was no record of when he came to the UK or whether he had merely returned for a visit this year. No form with further details was completed. It must therefore be assumed that the question of HIV risk was not ever considered. This incident took place at a static clinic and we have no evidence that the doctor was consulted by the clinic nursing staff.

The staff concerned in these two incidents have been informed. Other staff who <u>are</u> applying the guidelines should take this memo as a reminder that the current practice is well justified.

It is sad to realise that the national statistics for anti-HIV testing of blood donors will show a significant increase for this Region which does not reflect any true increase in prevalence but rather the failure of medical and nursing staff to follow procedures.

GRO-C