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7714

LOOKBACK EXPERIENCE OF AN UK BLOOD
TRANSFUSION CENTRE

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Objective. To trace past recipients who might have received blood components infectious for HIV.

Method. Donations were traced for 3 categories of donors: (i) current donors found positive for anti-HIV, (ii) ex-donors reported positive, (iii) donors implicated in cases of transfusion-transmitted HIV. Hospitals were notified of involved blood components, traced their fate and blood samples were obtained from living recipients wherever possible.

Results. Previous donations had been given by 9 of 17 current donors, 4 ex-donors and 2 identified as anti-HIV positive through infected recipients. Of 44 blood components made, 6 were unused, 9 not traced by the hospital and 4 incorporated in plasma pools for factor VIII. Of recipients who could be traced; 11 were deceased, 8 were not infected, 3 were anti-HIV positive and 4 were not tested. Seven recipients were notified as infected. In 2 cases donors were implicated, 2 cases could not be solved despite contact of all available donors, 1 could not be pursued due to inadequate hospital records and 2 are incomplete.

Conclusions. These investigations are time-consuming. Hospital records are often deficient. The benefit produced by these enquiries has been little, but 3 blood recipients have been identified as seropositive and spread to their sexual partners possibly averted.

p353