

Deferral of donors who have received blood in the UK since 1980.

This Question and Answer briefing is for health professionals called upon to answer queries from patients or relatives who have received blood since 1980. It covers the change in UK policy from 5th April 2004 which means that donors who have previously received blood themselves since 1st January 1980 will now be asked not to donate blood.

More general information about CJD can be found on the web sites given at the end of this briefing.

Questions and Answers :

Blood Safety

1 Q Why can't transfused donors give blood?

A There is a possible risk that vCJD may be transmitted by blood. Therefore as an additional precaution against this risk the UK Blood Services no longer accept donations of blood from donors who have received a transfusion.

2 Q Why make this announcement now?

A In December, the Secretary of State for Health reported the first possible case of vCJD being transmitted by blood. As a result, a group of experts have reviewed additional precautions that could be implemented and this is the result of that work.

3 Q Is UK blood safe?

A The UK has an exceptionally good track record of safe blood. But like any medical procedure transfusion does have a small risk associated with it. To make sure blood is as safe as possible there are extremely sensitive tests and controls. The UK Blood Services constantly review our safety methods to ensure that they are appropriate, in the light of new developments such as vCJD.

Any risk associated with receiving blood must be balanced against the risk of not receiving that blood when it is most needed.

4 Q If most of the UK population is at risk through eating meat, why do transfused donors have to stop giving blood?

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- A** Most people living in the UK may have potentially been exposed to vCJD through the consumption of meat and meat products from cattle. Since 1996 this risk is thought to be minimal. By stopping previously transfused patients from donating blood we will stop further transmission of vCJD through this route.
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5 Q What other precautions are in place?

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- A** In view of the uncertainty as to whether vCJD could be transmitted by blood or blood products, the UK Blood Services have taken a number of precautionary measures:
- Withdrawal and recall of any blood components, plasma derivatives or tissues obtained from any individual who later develops vCJD (December 1997).
 - Import of plasma from the US for fractionation to manufacture plasma derivatives (announced May 1998, implemented October 1999).
 - Leucodepletion of all blood components (announced July 1998, implemented Autumn 1999).
 - Importation of clinical FFP from the US for patients born on or after 1st January 1996 (announced August 2002, to be introduced in spring 2004).
 - Promotion of appropriate use of blood and tissues and alternatives throughout the NHS.
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6 Q What is being done to ensure that blood is used appropriately?

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- A** National programmes for good transfusion practice have been established, supporting the work of local Hospital Transfusion Committees. Transfusion practitioners have been or are being appointed to many hospitals. There is increasing use in the NHS of techniques that can, for some patients, reduce the need for donor blood.
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7 Q Are the steps being taken enough?

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- A** There remains uncertainty over the number of people who will develop vCJD from eating meat and whether vCJD can definitely be transmitted by blood. Blood transfusion saves and improves many thousands of patients' lives every year. There has to be a balance between what measures should be implemented and the sufficiency of the blood supply.
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8 Q Are there any additional precautions that can be applied?

- A Expert advisors continue to review current precautions and possible future precautions.
The majority of blood components are derived from UK donors. It is unlikely that such quantities of blood could be sourced from non-remunerated donors outside of the UK. Even if this was possible, it could increase the risk of exposure to other infectious agents, would be difficult to implement for components with short shelf lives, and could precipitate shortages.
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- 9 Q Now that a BSE case has been reported in America, will the UK continue to import plasma from the USA?
- A Yes. The original risk assessment never assumed that there would be zero BSE cases in the USA. It is important to remember that in comparison there have been over 750,000 BSE cases and 146 vCJD cases in the UK. Therefore the scale of the problem within the USA and UK is entirely different.
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- 10 Q What areas are covered by this new policy?
- A This announcement covers England, Wales, Scotland and Northern Island. It does not cover the Isle of Man or the Channel Islands.

The Blood supply

- 11 Q What will this mean for the National Blood Service's blood supply?
- A This will reduce the number of donors by 3.2%. This is why NBS need more people to come forward and become regular blood donors to make sure that patients continue to get the life saving treatments they need.
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- 12 Q How about those people who don't know if they have had a transfusion?
- A To balance the safety of blood against the sufficiency of the blood supply it was decided that those people who do not know if they have had a blood transfusion will still be accepted.
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- 13 Q What happens to those donations from people who have already given blood but who have had a transfusion?

- A From 5th April 2004 the NBS will not accept donations from people who have received blood after 1st January 1980. Until then, the NBS will continue to accept those donations.

Patient Concerns

14 Q Can blood donors contract vCJD from giving blood?

- A No. Blood donations are taken through sterile, non-reusable, disposable needles and equipment. It is safe to give blood – you cannot catch anything from giving blood.

15 Q Should patients be worried about receiving a blood transfusion?

- A Like all medical treatments a blood transfusion should only be administered when really necessary. The decision to give a blood transfusion to a patient is made only after careful consideration. In making that decision the doctor will have had to balance the risk of having a blood transfusion against the risk of not having one.

16 Q Should recipients of blood be worried?

- A It is important to put this context into issue. No medical product can be 100% safe, but people must weigh up the balance of risks. In addition there has only been one possible case of vCJD being passed through blood, yet the NBS issues over 2.5 million units of blood every year. If someone needs a blood transfusion, then the risk to that person of not having a blood transfusion far outweighs any possible risk of contracting vCJD. This is a further precaution, in addition to existing precautionary measures, against the possible risk of vCJD.

17 Q How many patients have been exposed to blood components from donors who went on to develop vCJD?

- A There are currently 17 living recipients in the UK of blood components from donors who went on to develop vCJD. Their GPs have been contacted and asked to inform their patients of the circumstances of their case.

18 Q Could previously transfused blood donors have infected someone else?

- A Whilst there is a possible risk of vCJD being transmitted through transfusion this must be weighed up against the enormous life saving and life enhancing benefit of blood and blood products.

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- 19 Q If someone has been infected with vCJD because of a blood transfusion, when would they become ill?
- A As there has only been one possible transmission of vCJD by a blood transfusion, it is impossible to say whether someone will develop vCJD or how long it would take.
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- 20 Q Can people have a test to find out if they are going to get vCJD?
- A As yet, there is no screening test for people concerned that they may develop vCJD
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- 21 Q What about members of the family of someone who received blood?
- A No special precautions are needed for family or other household members. There is no evidence that vCJD can be passed on between people by:
- * Living in the same house;
 - * Sharing utensils;
 - * Kissing;
 - * Sexual contact;
 - From mother to baby through childbirth or breastfeeding
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- 22 Q What precautions do people who received a transfusion after 1st January 1980 need to take?
- A The only precaution these people need to take is not to donate blood.
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- 23 Q Do people who have received a transfusion after 1st January 1980 have to inform people who treat them in the future?
- A At the moment there is no requirement for people to inform those who treat them that they received a transfusion since 1st January 1980.
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- 24 Q How can people find out more about vCJD?

A More information about vCJD is available from the following web sites:

- National CJD Surveillance Unit at www.cjd.ed.ac.uk
- Department of Health at www.dh.gov.uk and search for CJD
- CJD Support Network at www.cjdsupport.net
- Human BSE Foundation at www.hbsef.org
- National Prion Clinic at

www.st-marys.org.uk/specialist/prion/index_prion.htm

Health Protection Agency at www.hpa.org.uk. In addition worried patients can contact NHS direct on 0845 4647

25 Q What about donating (bone marrow) (organs) (other tissues)?

A Our experts are considering whether any precautionary measures would benefit those who need transplants.

26 Q What about spillages of blood and bleeding?

A No special precautions are required.

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