Guidelines for the Blood Transfusion Services

3.9: Genetically determined conditions

http://www.transfusionguidelines.org/red-book/chapter-3-care-and-selection-of-whole-blood-and-component-donors-including-donors-of-pre-deposit-autologous-blood/3-9-genetically-determined-conditions

3.9: Genetically determined conditions

An increasing number of genetically determined conditions that potentially affect donor health are being identified, and some donors have had specific tests which confirm that they possess variant genes. These include not only the haemoglobinopathies and thalassaemias, but also more recently discovered conditions such as the thrombophilias (e.g. factor V Leiden). Mere possession of such genetic variants does not exclude donation if the donor is otherwise healthy and fulfils all other selection criteria.

3.9.1: Genetic haemochromatosis

This is a special case. Blood from individuals with genetic haemochromatosis (GH) who have no symptoms arising from their GH is intrinsically safe for transfusion. However, before patients with GH who require continued venesection for the maintenance of their health are accepted as blood donors, the consultant with responsibility for donors must ensure that the following criteria are met:

- The selection criteria/methods for all donors with GH preserve the principles of altruism.
- Blood donated for therapeutic use by any donor known to have GH meets all other criteria (except donation frequency) in the JPAC *Donor Selection Guidelines*.[1] If it is clinically necessary for individuals to donate more frequently than the minimum donation interval, specific permission must be obtained from the designated clinical support officer.
- The donor is under the continuing care of a physician who is able to offer alternative venesection facilities whenever, for any reason, the donor does not meet all other criteria in the JPAC *Donor Selection Guidelines*.[1]