Change Notification UK National Blood Services  No. 11 - 2017

This change applies to the Whole Blood and Components Donor Selection Guidelines

Autoimmune Disease & Osteopenia

Autoimmune Disease

Please modify “Additional Information” and “Reason for Change” as follows:

**Additional Information**

Treatment to suppress the condition may be with monoclonal antibodies (e.g. Adalimumab (Humira), Etanercept (Enbrel), Infliximab (Remicade), Rituximab (Mab Thera) etc), steroids, immunosuppressive drugs, antimetabolites, antibodies directed against parts of the immune system as well as other therapies such as PUVA (psoralen plus ultraviolet A). These will affect the donor’s immune system. This may make the donor more susceptible to certain types of infection and also will make some infections more difficult to diagnose.

Nonsteroidal anti-inflammatory drugs and Methotrexate, Sulfasalazine and Hydroxychloroquine, are treatments which do not affect the donor’s immune system in this way. If Methotrexate, Sulfasalazine and Hydroxychloroquine are used as maintenance treatment for Arthritis and donor fits the rest of the criteria they may be accepted.

Physical therapies such as physiotherapy and hydrotherapy are not considered treatments to suppress the condition.

Autoimmune disease can cause problems such as infertility and thrombosis (antiphospholipid or Hughes' syndrome).

Some autoimmune conditions can permanently damage the cardiovascular system. If this is known to have happened, the person should not donate as they are more likely to have a serious adverse event.

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Reason for change

The use of Hydroxychloroquine for the maintenance treatment of arthritis and the inclusion of arthritis other than Rheumatoid arthritis in the discretion.

The addition of monoclonal antibodies to the list of agents that may affect a donor’s immune system

Osteopenia

Please modify “Obligatory”, “Discretionary”, “See if Relevant” and “Reason for Change” as follows:

**Obligatory**

Must not donate if:

The donor is being treated with systemic monoclonal antibody therapy e.g. Denosumab (Prolia)

**Discretionary**

If the cause is not of itself a reason to defer, even if on treatment to prevent or treat (other than Denosumab), accept.

**See if Relevant**

Disabled Donor

Malignancy

Steroid Therapy

Vitamins and Other Nutritional Supplements

Autoimmune Disease

**Reason for Change**

A new see if relevant link to Vitamins and other Nutritional Supplements has been added.

The addition of the obligatory deferral for donors with osteoporosis treated with systemic monoclonal antibody therapy and the addition of a link to Autoimmune Disease

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