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Change Notification UK National Blood Services No. 2 – 2008

Diabetes Mellitus

Applies to the Whole Blood and Components Donor Selection Guidelines.

Obligatory
Must not donate if:

a) Requires treatment with insulin.

b) Diabetes medication has been altered in the last four weeks.

c) Is having problems with feeling faint, fainting or giddiness.

d) Has suffered from heart failure.

e) Has renal impairment requiring dialysis, the use of erythropoietin or similar drugs, or is either under active investigation or continued follow up for their renal impairment.

f) Has required surgery for a blocked or narrowed artery including any type of amputation.

g) Has or has had gangrene.

h) Has or has had ulcers or wounds related to a loss of sensation.

Discretionary

a) If diagnosed with pre-diabetes or gestational diabetes but not requiring treatment at present, accept.

b) If controlled by diet or oral medication that has not been changed in type or dose in the last four weeks, accept.

C) If previous treatment with insulin (including bovine insulin) was stopped more than four weeks ago, accept.

d) If gangrene was not related to diabetes or peripheral vascular disease (e.g. it was due to hypothermia or meningococcal meningitis) and all wounds are fully healed, even if amputation was required, accept.

See if relevant
Cardiovascular Disease
Central Nervous System Disease
Chiropody
Infection – General
Intermittent Claudication
Additional Information

In the UK about one in twenty individuals has diabetes. The majority of cases do not require treatment with insulin. Many people with this type of diabetes (often called type 2) are in good health and are fit to donate blood.

It is however important that complications due to diabetes are carefully assessed and, where necessary, donors are excluded from donating (e.g. those at risk of postural hypotension due to autonomic neuropathy, or those at risk of bacteraemia due to unhealed foot ulcers).

Note

Part of this entry is a requirement of the Blood Safety & Quality Regulations 2005.

Reason for Change

The rationale for not accepting donors on oral medication for diabetes mellitus was reviewed by the Standing Advisory Committee for the Care and Selection of Donors in 2008. It was decided that available data did not support the deferral of all individuals with diabetes that required treatment. It is a requirement of the Blood Safety and Quality Regulations not to accept donors who are being treated with insulin.

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