

Issued by JPAC: 26 April 2022

Implementation: To be determined by each Service

Change Notification UK National Blood Services No. 31 - 2022

Arrhythmias

These changes apply to the Bone Marrow & Peripheral Blood Stem Cell Donor Selection Guidelines.

Please amend the following entries as shown.

<i>Obligatory:</i>	<p>1. Must not donate if: Symptomatic or requires treatment.</p> <p>a) Symptomatic or requires treatment.</p> <p>b) The donor is undergoing investigation.</p> <p>c) The donor has a history of an arrhythmia (e.g. Atrial Fibrillation, Atrial Flutter, Supraventricular Tachycardia, Ventricular Tachycardia) even if their symptoms have now settled.</p> <p>2. In other cases: Refer to Designated Clinical Support Medical Officer.</p>
<i>Discretionary:</i>	<p>1. Donors with a previous history of an arrhythmia triggered by a noncardiac medical condition which has now been treated (e.g. thyrotoxicosis), refer to a Designated Medical Officer.</p> <p>2. Donors who have been treated by ablation therapy for Supraventricular Tachycardia (including Wolff-Parkinson White Syndrome), refer to a Designated Medical Officer.</p> <p>3. Donors with a history of palpitations where the donor has been assessed clinically and a cardiac cause has been excluded, accept.</p>
<i>See if Relevant</i>	Cardiovascular Disease
<i>Additional Information</i>	Some heart irregularities may be made worse through blood loss or by a general anaesthetic. It may be necessary to contact the specialist who has made the diagnosis. This includes a risk that donation could trigger a recurrence in someone with a history of a previous arrhythmia. In cases where the donor's eligibility is not clear, Designated Clinical Support Officer referral ensures further information can be sought regarding their condition.

Reason for change	This entry has been revised to clarify the obligatory and discretionary criteria.
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Dr Sheila MacLennan
Professional Director - Joint UKBTS Professional Advisory Committee
✉ sheila.maclennan@nhsbt.nhs.uk