

Issued by JPAC: 31 May 2022

Implementation: To be determined by each Service

Change Notification UK National Blood Services No. 34 - 2022

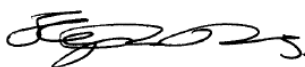
Diabetes Mellitus

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

Please amend the following entry.

<i>Obligatory</i>	<p>Must not donate if:</p> <p>Requires medication.</p> <ul style="list-style-type: none"> a) Requires treatment with insulin. b) Has had a transplant of pancreatic tissue c) Has significant end-organ complication -see <i>discretionary</i> d) Suffers from Hypoglycaemic attacks <p>Diabetes is poorly controlled -see <i>additional information</i></p>
<i>Discretionary</i>	<p>If controlled by diet alone, accept.</p> <p>The donor needs to be reviewed by the DCSO if they suffer from complications of diabetes mellitus which may cause a health risk to the donor or recipient. Complications include peripheral vascular disease, renal impairment, autonomic neuropathy, and cardiovascular disease. Hypoglycaemic attacks are less common in Type II Diabetes but can still be a complication of some medications.</p>
See if Relevant	Infection-General
<i>Additional Information</i>	<p>Diabetes Mellitus can result in acute illness, chronic morbidities, and death, and hence national guidelines recommend maintaining good glycaemic control to prevent or minimise macrovascular and microvascular complications</p> <p>It is estimated that 3.8 million of the UK population have diabetes (8.6%) (The state of the nation 2019-A review of diabetes services in Wales).</p> <p>Type I Diabetes (T1DM) comprises the minority (<10%) and the patients are insulin dependent, more prone to have hypoglycaemic events. It is, at least in</p>

	<p>part, considered to be genetically inherited. A review of the medical literature suggests that T1DM may be transmitted to the recipient after a successful transplant</p> <p>Type II Diabetes (T2DM) is commoner and many people with this type are in good health and do not require insulin treatment.</p> <p>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 ulcers).</p> <p>Diabetic patients are advised to maintain good glycaemic control -HbA1c 7-8% (52 -64mmol/mol) to prevent macrovascular and microvascular complications.</p> <p>UK blood services accept donors who are on oral medications for Diabetes following 2008 review and recommendation by SAC-CSD, and later this recommendation was reviewed to accept donors using some non-insulin derived injectable drugs. SHOT donor haemovigilance has not reported any donor adverse events related to diabetes. (SHOT 2009-2021)</p> <p>Blood Safety and Quality Regulations require UK blood services not to accept donors who are being treated with insulin, or who have received a transplant of human tissue.</p>
Reason for change	Updating the guideline



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