

Issued by JPAC: 07 October 2020	Implementation: To be determined by each Service
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Change Notification UK National Blood Services No. 43 - 2020

Infection - Chronic

These changes apply to the Tissue and Cells Donor Selection Guidelines as stated below

Please make the following changes:

Living Tissue, Bone Marrow and Peripheral Blood Stem Cell and Cord Blood Donor Selection Guidelines

Infection - Chronic

<i>Obligatory</i>	Must not donate.
<i>Discretionary</i>	<p>1. Acne: Most donors with acne can be accepted.</p> <p>2. Chronic superficial fungal infections: a) If on local therapy for superficial infections only, accept. b) If on systemic anti-fungal treatment only for treatment of a localised, non-systemic fungal infection, and there are no complications, accept. bc) If otherwise more than seven days from completing systemic antifungal therapy, accept.</p> <p>3. Typhoid and Paratyphoid If more than seven days from completion of antibiotic course and last symptoms, accept.</p>
<i>See if Relevant</i>	Acne Steroid Therapy
<i>Additional Information</i>	Typhoid and paratyphoid are gastrointestinal infections which rarely have a chronic carrier state. It is usually caught while travelling. It is passed by the faecal-oral route and is not transfusion -transmitted by tissue or cell transplantation .

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	<p>Unusual bacterial/fungal/protozoal infections</p> <p>Specialist microbiological advice should be sought when considering using cells and tissues from donors who have had unusual infections in the past, including those acquired outside of Western Europe. This should include infections common in immuno-compromised patients, or infections which lie dormant or may be difficult to eradicate.</p> <p>Local fungal infections, e.g. nail infection or athlete's foot</p> <p>Systemic oral antifungal treatment may be prescribed to treat localised fungal nail infections or athlete's foot which are difficult to eradicate. Despite the systemic treatment, due to the fact that the infection is localised to the nails/digits the risk to donated tissue/cells is considered to be remote.</p>
<i>Reason for change</i>	<p>To add additional guidance for evaluation of unusual infections for which no specific entry exists, as advised by SaBTO Microbiological Safety Guidelines, 2017.</p> <p>To add guidance for acceptance of donors on oral antifungal treatment for localised nail infections or athlete's foot.</p>

Deceased Tissue Donor Selection Guidelines

Infection - Chronic

<i>Obligatory</i>	Must not donate.
<i>Discretionary</i>	<ol style="list-style-type: none"> 1. Acne: Most donors with acne can be accepted. 2. Chronic superficial fungal infections: <ol style="list-style-type: none"> a) If on local therapy for superficial infections only, accept. b) If on systemic anti-fungal treatment only for treatment of a localised, non-systemic fungal infection, and there are no complications, accept. c) b) If otherwise more than seven days from completing systemic antifungal therapy, accept. d) If undiagnosed or untreated local infection, refer to designated clinical support officer. 3. Typhoid and Paratyphoid If more than seven days from completion of antibiotic course and last symptoms, accept. 4. Eyes. If caused by bacterial infection and the corneas are to be stored by organ culture, accept.

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<i>See if Relevant</i>	<u>Acne</u> <u>Steroid Therapy</u>
<i>Additional Information</i>	<p>Typhoid and paratyphoid are gastrointestinal infections which rarely have a chronic carrier state. It is usually caught while travelling. It is passed by the faecal-oral route and is not transfusion transmitted by tissue or cell transplantation.</p> <p>Unusual bacterial/fungal/protozoal infections</p> <p>Specialist microbiological advice should be sought when considering using cells and tissues from donors who have had unusual infections in the past, including those acquired outside of Western Europe. This should include infections common in immuno-compromised patients, or infections which lie dormant or may be difficult to eradicate.</p> <p>Local fungal infections, e.g. nail infection or athlete's foot</p> <p>Systemic oral antifungal treatment may be prescribed to treat localised fungal nail infections or athlete's foot which are difficult to eradicate. Despite the systemic treatment, due to the fact that the infection is localised to the nails/digits the risk to donated tissue/cells is considered to be remote.</p>
<i>Reason for change</i>	<p>To add additional guidance for evaluation of unusual infections for which no specific entry exists, as advised by SaBTO Microbiological Safety Guidelines, 2017.</p> <p>To add guidance for acceptance of donors on oral antifungal treatment for localised nail infections or athlete's foot.</p>

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