C 2003 Transfuzní odd. Fakultní Thomayerovy nemocnice, Praha 4 – Krč, Vídeňská 800

Fakultní Thomayerova nemocnice

INFORMATION FOR BLOOD DONORS

version 2.6

I. BLOOD DONOR RIGHTS

Donor has the following rights:

- change his / her opinion at any time and withdraw from donation without giving explanation
- ask questions related to donation of blood and a process of collection
- get an explanation why donation should be voluntary and non-remunerated
- get detailed explanation of donation procedure including information on all possible risks related to blood donation and collection
- get detailed explanation of reasons which may disable him / her due to possible risks for his / her health or due to the health threats to recipients of products made from donors blood
- be informed about all clinical and laboratory investigations made to control donor's eligibility and laboratory tests done from collected blood
- be informed on how collected blood is processed and used
- be informed that collected blood could be used for intended purpose only if all quality and safety criteria are fulfilled
- be informed on his / her health and results of all laboratory tests performed
- privacy during medical interview and clinical investigation
- protection from misuse of any information about his / her blood donation and information about his / her health
- protection of personal data and any information about his / her health according to the law

Final responsibility on quality and safety of the product made from donor's blood lies on the Blood Establishment therefore Blood Establishment makes final decision about donor's acceptation or exclusion from donation. Innate right of the recipient for safe blood product overrules good will of anybody to give blood.

II. RISK FOR BLOOD DONOR

COLLECTON OF BLOOD OR BLOOD COMPONENT IN UNHEALTHY PERSON

Blood or blood component donation may harm unhealthy person. Basic medical investigation is performed to protect donor health and to investigate donor eligibility.
Any abnormal results are announced to the prospective donor. For temporary or permanent deferral a medical specialist of Blood Establishment is responsible. Donor is fully informed about reasons for temporary or permanent deferral.

ADVERSE REACTION TO DONATION

Following adverse reactions may occur:

- haematoma (improper venipuncture, bleeding into skin). You may prevent this complication by compression of the venipuncture place after donation
- weakness, fatigue are usually caused by improper stabilisation of circulation after blood loss or by psychological stress` this complication occurs more often in hungry donors, donors in hurry and after very quick upraise from the donor seat
- shivering or even convulsion may occur during plasma donation using cell-processor. It is caused by imbalance in calcium ions and could be quickly converted. Donor should inform technician immediately

All disposables used for blood collection, including disposables for collection of samples, are for single use only.
THERE IS NO RISK OF TRANSMISSION OF ANY INFECTION DURING BLOOD DONATION.

III. RISK FOR BLOOD RECIPIENT

Treatment with blood and blood components put the recipient into inherited risk of transmission infectious disease from donor. There is quite a lot of blood born infections but from practical point of view hepatitis B, hepatitis C and AIDS (acquired human immunodeficiency) are the most important.

donor selection ← **Our strategy is to minimize the risk by** → laboratory testing

PRINCIPLES OF DONOR SELECTION

Examples of the risk of the occurrence of infectious disease transmissible via blood (the donor is not eligible permanently or temporarily after the end of the given activity or procedure):

Exclusion for 4 months

- risks related to sexual activities – any person who
  - *had protected or unprotected anal intercourse with a new sexual partner in the last 4 months*
  - *had more than one sexual partner in the past 4 months and had protected or unprotected anal intercourse with at least one of them*
  - *provided protected or unprotected sexual intercourse for money, drugs or other consideration*
  - *had protected or unprotected sexual intercourse with a person tested positive for HIV at any time in the past*
  - *had protected or unprotected sexual intercourse with a person who provided protected or unprotected sexual intercourse for money, drugs or other consideration*
  - *had protected or unprotected sexual intercourse with a person who uses injectable illegal drugs or injectable medicinal products not prescribed by a physician*
  - *has taken any oral (given by mouth) medicine to prevent the transmission of HIV infection, i.e. antiviral pre-exposure prophylaxis (PrEP) or post-exposure prophylaxis (PEP)*
  - *underwent treatment for venereal disease*
- close contact with person with acute hepatitis (household, sex partner)
- tattoo, ear piercing, body piercing, acupuncture etc.
- contamination of mucous membranes or injured skin by infectious material
- endoscopy (e.g. joints – arthroscopy, stomach – gastroscopy, intestines – colonoscopy, urinary tract – cystoscopy, respiratory tract – bronchoscopy)
- surgery
- blood transfusion (administration of blood component) in the Czech Republic; abroad after 1996
- transplantation with cell and tissues of human origin
- detention, imprisonment

Exclusion for 12 months

- drug abuse and alcoholism (after declared cured)

Exclusion for 2 years

- a person who has taken any medicinal product in injectable form to prevent the transmission of HIV infection, i.e. antiviral pre-exposure prophylaxis (PrEP) or post-exposure prophylaxis (PEP)

Permanent exclusion

- history of hepatitis B or hepatitis C infection (including after successful treatment/recovery)
- in the case of a family risk of Creutzfeldt-Jacob disease and its variants (vCJD = BSE, TSE)
- living in Great Britain (longer then 12 months) in years 1980-1996 (due to theoretical risk of variant Creutzfeldt-Jacob disease)
- blood transfusion – administration of blood component abroad before 1996
- treatment with products of human origin e.g. for growth and development disorders (human growth factor)

- transplantation with animal draft; transplantation using tissue or cells of human origin in the case of a dura mater, eardrum or corneal graft
- abuse of injectable drugs, steroids or hormones not prescribed by a physician (even in the past)

You can ask any question and You can withdraw from the donation any time.

In case of any doubts, please, ask the physician of Blood Establishment or apply a self-exclusion procedure

SELF - EXCLUSION

If You realised that your blood could put a recipient of product made from your blood into increased risk of infection, please withdraw from donation or inform our personnel.

OTHER RISKS

Blood transfusion recipient may be endangered by some medicines used by blood donor. Long lasting exclusion is necessary if donor is treated by pills or injection for acne, psoriasis, alopecia or hyperplasia of prostatic gland with - isotretinoin (e.g. Aknenormin), etretinate, acitretin (e.g. Neotigason), finasterid (e.g. Adafin, Andorfin, Finard, Finex, Gefin, Milten, Penester), dutasterid (e.g. Avodart, Dustar, Dutalan). Length of exclusion depends on the drug and application form.

Risk of infection may be increased in some countries. Special risk is linked with longer stay in tropical countries, countries with malaria, Chagas disease or Q-fewer and countries with high prevalence of infectious diseases (e.g. infectious hepatitis, etc.).

Risk for recipient is lowered by

Non-remunerated donation ← **Regular donation** →

risk of infection for recipient is lower when the donor is not motivated by financial profit

↓

We prefer voluntary non-remunerated donation

risk of infection for recipient is lower if the donor is tested repeatedly

↓

We ask donors for regular donation

BLOOD TESTING

Additionally to review of donor questionnaire, laboratory checks and medical examination / interview we test each donation for markers of infectious diseases:

- HBV (hepatitis B)
- HCV (hepatitis C)
- HIV (causative agent of AIDS)
- syphilis (lues)

Despite all the effort we are not able to guarantee 100 % safety to blood recipient (it may be for example due to the fact that diagnostic tests are often based on demonstration of antibodies to infectious agent and "it may last" several weeks to the donor to develop these antibodies...). Good collaboration between Blood Establishment and the donor is essential. You will be informed in case of abnormal results of laboratory tests.
Positivity of laboratory markers for HIV, hepatitis B or hepatitis C is a reason for permanent deferral from blood donation.
Donor medical information is kept in the donor file under strict control respecting data protection rules, limited information is send to National Blood Transfusion Registry if necessary.
Products made from your blood will be used only if they fulfil all criteria for quality and safety.

CHANGE OF HEALTH STATUS AFTER COLLECTION

If you develop an infectious disease within 7 days after collection that could endanger the recipient of the transfusion, please inform the Blood Establishment.