

Depression

This page was last modified on 18 May 2016, at 10:14.



Contents

- [Condition](#)
- [Individual at Risk](#)
- [Guidance at RECRUITMENT for adult volunteer donor and maternal donor \(cord blood donation\)](#)
- [Guidance at CT / WORK-UP](#)
 - [Specific guidance for those taking selective serotonin reuptake inhibitors](#)
- [Justification for guidance](#)
- [References](#)

Condition

Depression, whether endogenous or exogenous in origin.

Individual at Risk

Donor / recipient

Guidance at RECRUITMENT for adult volunteer donor and maternal donor (cord blood donation)

ACCEPTABLE

Guidance at CT / WORK-UP

ACCEPTABLE if not currently depressed, or if depression adequately treated with medication or counselling. Ask the following questions:

Can the donor work and travel?

Could the donor cope with a hospital stay if required to donate?

Could the donor cope with pressures involved with donating, as donation may be a stressful procedure for some individuals?

If the answer to these questions are yes, then accept.

Specific guidance for those taking selective serotonin reuptake inhibitors

There is some concern over an impact of selective serotonin reuptake inhibitors on platelet function. In most studies this is manifest as an increase in gastrointestinal bleeding, particularly in those taking non-steroidal anti-inflammatory drugs or coumarins, with no evidence supporting an increase in intracerebral haemorrhage. However, for this reason, donors taking these medicines should be strongly advised to avoid concurrent non-steroidal anti-inflammatory (NSAID) therapy have close platelet monitoring and receive attentive follow-up should they become significantly thrombocytopenic following apheresis.

However, there is no evidence to suggest an increased bleeding risk during bone marrow harvest.

Justification for guidance

Depression is common, and the majority of depressed donors will be able to donate. There is anecdotal evidence of depressed donors withdrawing from donation at the last minute, but this behaviour has also been seen in non-depressed donors and forms no basis for deferral. There is no evidence that depressed donors have impaired capacity for informed consent.

References

Dall M, Hallas J. [Is the use of selective serotonin reuptake inhibitors associated with an increased risk of bleeding?]. *Ugeskr Laeger* 2006; 168(23): 2232-6.

Schalekamp T, Klungel OH, Souverein PC, de Boer A. Increased bleeding risk with concurrent use of selective serotonin reuptake inhibitors and coumarins. *Arch Intern Med* 2008; 168(2): 180-5.

Serebruany VL. Selective serotonin reuptake inhibitors and increased bleeding risk: are we missing something? *Am J Med* 2006; 119(2): 113-6.