Transfusion

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Condition

Transfusion with blood components, products and derivatives.

Individual at risk

Recipient

Guidance at RECRUITMENT

ACCEPTABLE, unless:

1. received transfusion in country endemic for malaria or South American trypanosomiasis (Chagas disease). If so, validated tests for malaria antibodies and/or T. cruzi antibody must have been performed (see also Malaria and Chagas disease). If these tests are negative, donor is acceptable.

2. received transfusion within the United Kingdom since 1980. There is a risk of transmission of vCJD.

Autologous transfusion and treatment with human immunoglobulin limited to small quantities as prophylaxis (eg. anti-D, tetanus) are acceptable.

Guidance at CT/WORKUP

As recruitment.

Donors who have received transfusions which place them at risk of Malaria, Chagas disease should have relevant serological assessments performed and may proceed at the discretion of the requesting transplant centre (see also Malaria and Chagas disease).

Donors who have received transfusions within the United Kingdom since 1980 may be proceed at the discretion of the requesting transplant centre.

Nucleic acid testing is recommended for all donors who have received a blood or blood product transfusion within 6 months of donation.

Justification for guidance

Malaria and trypanosomiasis are transmissible by blood transfusion. vCJD appears to be transmissible too and is believed to be caused by BSE which appeared in animal stock in 1980. In view of this, people transfused since 1980 must have a documented risk assessment performed.

References

Peden AH, Head MW, Ritchie DL, Bell JE, Ironside JW. Preclinical vCJD after blood transfusion in a PRNP codon 129 heterozygous patient. Lancet 2004;364(9433):527-9