RTD M/176

NOT FOR PUBLICATION

Present:

REGIONAL TRANSFUSION DIRECTORS MEETING

MINUTES OF THE 176th MEETING HELD ON WEDNESDAY 3 OCTOBER 1979 IN ROOM 30 DEPARTMENT OF HEALTH AND SOCIAL SECURITY, HANNIBAL HOUSE, ELEPHANT AND CASTLE LONDON SEL

- Chairman

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		Army Blood Supply Depot, Aldershot
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APOLOGIES FOR ABSENCE

Apologies were received from i who had taken over the Department from and

MINUTES OF THE MEETING OF 27 JUNE 1979

These were agreed.

a. PREVENTION OF HARMOLYTIC DISEASE OF THE NEW BORN

i. Report from the Joint Sub-Committee on Prevention of HDN

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reported that at the last meeting of the Joint Sub-Committee it had been agreed that with the exception of the trials being undertaken at Lewisham and in the Leeds Region, anti-D immunoglobulin should not normally be administered antenatally to Rh negative pregnant women. Instead there should be a "tidying-up" operation to ensure that all Rh negative mothers at risk of giving birth to an Rh positive baby were given anti-D post-natally. A working party was now considering the best means of putting this into practice.

ii. Draft Group Card for Rhesus Women

reported that he had drafted a card which was now being considered by the working party.

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and who are members of a working group on the supply of anti-D said that their group had had discussions about the requirements for and availability of anti-D and Regional Transfusion Directors were assured that they would be kept informed of the supply position.

b. SINGLE DONOR PACK STUDY GROUP - ORAL REPORT FROM DR R S LANE

reported that the group had recently had a further meeting with Travenol and would shortly be discussing a final template design for a pack. A single pack would be ready for field trials in February 1980. Theoretical Group would set these in train and afterwards present a full report to Directors.

No date had yet been fixed for the introduction of the pack because several major matters, including pricing, had still to be discussed with Travenol.

stressed the need for Supply Division to be kept in touch because they had to ensure the supply of 5 litre frozen plasma collection packs prior to the introduction of the new pack.

asked about Travenol's rights (eg regarding patents) in view of the fact that other manufacturers were about to be approved as suppliers of donor packs (see paragraph 4a). said that while Travenol would doubtless take out copyright type patents, it was open to any manufacturer to put forward a proposal for a pack, and he suggested that Supply Division should refer any interested manufacturer to him for details of the requirement

c. DEVELOPMENTS IN THE MANAGEMENT OF THE CENTRAL LABORATORIES ORAL REPORT BY THE DEPARTMENT

explained that it was likely that the North West Themes Regional Health Authority would not want to continue indefinitely to manage the central laboratories and alternative management arrangements may have to be considered the recommendations of the Royal Commission on the NHS would have to be borne in mind when deciding the future management of the laboratories.

d. RECRUITMENT OF KIDNEY DONORS - ORAL REPORT BY THE DEPARTMENT

At the request of Regional Transfusion Directors, Regional Donor Organisers had discussed the question whether there ought to be greater involvement by Centres in the recruitment of kidney donors. Donor Organisers agreed that they would prefer to have a passive rather than an active role ie they would display posters and kidney donor cards at blood collecting sessions and in their caravans, but did not wish actively to encourage blood donors to sign kidney donor cards.

e. SERUM QUALITY CONTROL

The Chairman reminded Directors that they had undertaken to supply with 400 litres of serum per annum. However after 8 months only 85 litres had been sent to Birmingham, and he wondered what problems Directors had encountered.

Directors explained that one of the reasons for the shortfall in the supply of serum was a lack of appropriate labels, but these had now been received and Regional Transfusion Directors would attempt to meet the annual target, provided suitable donors were available. The dearth of suitable donors would be discussed by the Regional groups at their next meeting and if it still mroved difficult for Centres to collect the required amount of serum then would have to be told in December that regrettably the NBTS was unable to meet its target. kindly offered the Army's services in helping to collect serum from donors attending ABSD sessions.

4. SUPPLY MATTERS

- a. (i) Blood bags approval scheme
 - (ii) Advisory group on equipment used in connection with blood and blood products.

explained that the Advisory Group, which was in the process of being set up, would have a Regional Transfusion Director as Chairman and other Directors would be members.

Firms which already had a licence under the Medicines Act would automatically be included in the first published Approved List; BIOTEST would be included in this list as they had been licenced since April 1979.

b. Frozen Blood

suggested that there was a need for a common system for handling frozen blood especially in the washing and packing. The Chairman thought there was a need for a working group to consider the NBTS' future requirements for frozen blood. It was agreed those Directors who were most concerned with the continued production of frozen blood (

and) should meet under chairmanship at the Army's Blood Supply Depot, Aldershot to discuss what the future requirements for frozen blood were likely to be and how these could best be met

the Regional Computer Services Officer for North East Thames said that following a feasibility study on the use of computers in the NETS which had been sent to all Directors about 9 months ago, Directors had received user systems specification, and it had now to be decided whether a computer project for the NETS should be taken any further.

Considered there were many reasons why the NETS needed a computer system — eg it would help toward safer blood transfusion; mislabelling of donation packs could be eliminated and a computer system would help the NETS in its increasing work. There would probably also be some cost benefits. For example, building a computer room and equipping it with a Duplex computer system plus a number of terminals would cost £293,000. In addition there were annual revenue costs of £26,500, but it was calculated that there would be annual revenue savings of £72,300. There would be a basic computer system to start with and further systems would be hooked on as developed. Centres could also be linked up with the blood products laboratory at Elstree.

An all embracing computer system which would be tailored for individual regions needs would be much cheaper than 14 or 15 individual systems, and bulk purchase contracts for hardware and software would mean significant discounts.

said that the Department was prepared to consider investing more money in a continued study of a computer project provided that Directors accepted that there was a future for a computer system in the NBTS.

Directors agreed in principle that there was a need for such a system, but that various problems, like language and the type of computer to be used, would have to be resolved first.

agreed to discuss the question of language and computer type with his fellow Regional Computer Services Officers as soon as possible.

6. REPORTS FROM REGIONAL GROUP CHAIRMEN

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- a. group discussed the report of the Trends Working Party, and the usage of blood products and synthetic blood expanders. The group had agreed that should be their representative of Committee to study the implications for Regional Transfusion Centres of the Howie Code of Practice.
- b. Froup discussing computing in the NBTS concluded that this was an essential future development. The group also discussed the Howie Code of Practice and concluded that normally NBTS laboratories would not be affected by it.
- group had considered many of the subjects under discussion at the meeting and he would report his group's views as the items arose:

The Chairman raised the question of whether Regions should become self-supporting in the supply of blood products ie each Region should receive from the blood products laboratory blood products in relation to the amount of plasma it sent to be fractionated. Regional groups of Directors had already indicated their broad agreement to this proposal and a date had now to be fixed for a meeting with Representatives of Regional Health Authorities (including Treasurers) to discuss the proposal further.

Directors accepted the suggestion that where a patient from one Region attended a haemophilia centre in another it should be the responsibility of the patient's a home Region to ensure that sufficient plasma was collected to cover the patient's treatment in the other Region.

reported that some study groups were advising against transfusion of plasma protein fraction to some patients with oligaemic shock and that already in Scotland usage of HPPF was showing some signs of decreasing. He undertook to circularise suitable references to Directors.

7. NATIONAL PROFICIENCY TESTING IN BLOOD GROUP SEROLOGY - ORAL REPORT

reported that 4 groups funded by the Department-including

Steering Committee conserve examining the quality of proficiency testing. Some of
the results had been disturbing and Committee considered that the reasons for some laboratories' poor performances should be examined. It might be
specessary to issue guidelines or alternatively Regional Transfusion Directors

could "police" the scheme.

said that his group had discussed this matter and had concluded that it is was appropriate for Regional Transfusion Directors to take on the monitoring against of proficiency testing and to discover why errors were being made. Directors agreed that they were best equipped to take on the task.

It was decided that should let Directors know regularly how their regional laboratories were performing.

asked what the Department's views were on proficiency testing and whether it would provide extra funding for the testing.

said that he would discuss the matter within the Department and let Directors know.

8. POSSIBLE HAZARDS OF LONG-TERM PLASMAPHERESIS - RTD(79)10

reported that a regular plasmapheresis donor in the Birmingham Region with a high titre ante-D, was recently found to be suffering from a malignant lymphoma. Further investigations were in hand to discover whether the condition was one of chronic lymphatic leukaemia or a differentiated form of lymphocytic lymphoma. had been unable to discover any other known case where a malignant lymphoma had been associated with plasmapheresis.

Directors were also unaware of any such cases. reminded Directors that it has been agreed that any cases where plasmapheresis donors had contracted a disease or illness should be reported to him. He would also require a regular return of the total numbers of donors who had been boosted so that the number of people who were found to have contracted an illness or disease could be related to this figure.

9. RETENTION OF USED DONOR PACKS - RTD(79)11

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Directors agreed that the retention of all used donor bags for 24 hours post-transfusion for medical-legal reasons presented considerable practical difficulties and that since any serious transfusion reaction was likely to become manifest during the course of the transfusion this recommendation need no longer be regarded as mandatory.

WORKING PARTY TO SUPERVISE THE INTRODUCTION OF MACHINE READABLE <u>.1</u>0. RTD(79)13 LABELS - REPORT BY

said that the report of the Working Party was a preliminary one and and much has yet to be considered. Proposals put forward in the report had yet to be tried out in the field and experience had to be gained in using the labels before final recommendations could be made. Directors agreed that the interim report could be published.

ll. a. Hepatitis Testing

, as Chairman of the Advisory Group on the Testing for the Presence of Figure 2 The Partitis B Surface Antigen and its Antibody, said that the Group was concerned at and make the incidence of post-transfusion jaundice. The Group was particularly The anxious to receive from Regions details of patients suffering from Non-Arand Rose and Non-B hepatitis and would appreciate receiving samples of serum from these patients. reminded Directors of the continued need to report all cases of posttransfusion hepatitis.

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7-6 b. Ampins

Directors were most concerned at the way in which the Department & Medicines and a Division at very short notice asked all Centres to cease using amouns. expressed regret at the short notice which Directors had received but explained that Medicines Division appeared to have little choice in certain circumstances abut to take such decisions at very short notice.

Anti-Tetanus Immunoglobulin

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Directors were worried that although they had been told that supplies of the same of a regimmunoglobulin would be distributed no supplies had yet been received.

explained that the Department had first to issue indications for use of a the immunoglobulin and he would need to know how it would be used of He was meeting Dr Smithies shortly to discuss these points.

Post-Rubella Vaccination

was worried that although the memorandum on the medical care of Donors advised that blood could be donated 3 weeks to a month after such vaccination he had recently had a case where rubella virus was present in the donor's urine 3 months after vaccination. wondered whether the period of non-donation ought to be extended. It was agreed that would consult with an expert and report to Directors at their next meeting.

Electrolytic Removal of Hair

Regional Group wondered whether the process of removal of hair by electrolysis ought to be treated in the same way as acupuncture as far as blood donation was concerned. The meeting agreed, however, that questioning donors about this routinely might give rise to considerable embarrassment and since there is no evidence of a link between this procedure and post-transfusion hepatitis . the matter could be left as it is.

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f. Use of local anaesthetic guns

asked that Directors of Centres using guns should advise at Colindale who was investigating their use. It was reported that certain guns have been condemmed in the USA and undertook to obtain further details and report to the next meeting.

12. DATE OF NEXT MEETING

It was agreed that the next meeting should take place on 12 December in Sheffield and would be followed by a dinner for those Directors who were retiring.

The evening of 12 December has since proved not to be convenient to all retiring Directors. The dinner will therefore now be held in Sheffield on 11 December.

DHSS

October 1979