IN CONFIDENCE

SCOTTISH NATIONAL BLOOD TRANSFUSION SERVICE

Minutes of Directors' meeting held at Protein Fractionation Centre, Edinburgh at 10.45 a.m. on Tuesday, 17 January 1978.

PRESENT : Dr. J. Wallace (in the Chair)
Dr. C. Cameron
Dr. J.D. Cash
Dr. I.A. Cook
Dr. H.B.M. Lewis
Mr. J.G. Watt
Dr. A.E. Bell, SHHD
Dr. W. d'A Maycook, DHSS
Mr. R.N. Roberts, SHHD
Dr. A.T.B. Moir, SHHD (items 3c and 5)
Dr. D.M. Walford, DHSS " " " "
Miss M. Corrie (Secretary)

1. INTRODUCTION

Dr. Wallace welcomed Dr. Maycook to the meeting and expressed the hope that 1978 would be a successful year for transfusion services throughout the United Kingdom. Later, he welcomed Dr. Moir and Dr. Walford who attended items 3c and 5 only.

2. MINUTES OF THE LAST MEETING

The minutes of the meeting held on 12 October 1977 (which had been circulated) were amended as follows :

3(a) Replace the words "statutory restrictions" by "statutory requirements".

7 Second paragraph to read "Dr. Bell explained that DHSS was negotiating a contract with a firm to produce reagents from human serum provided by DHSS. SHHD would have to consider whether to participate in such a contract. It was agreed to discuss the matter further at the next meeting".

With these amendments the minutes were agreed to be a true record.

3. MATTERS ARISING FROM THE MINUTES

a. Red cell grouping reagents

It was explained that the existing method of determining whether a donor injury had been directly caused by a BTS procedure was by a panel of assessors, who did not determine the amount of any compensation to be paid. Directors welcomed the view that the present method might be reviewed and asked to be consulted if such a review took place. It was agreed that the question of compensation would have to be considered nationally very soon in relation to a code of practice for the use of cell separators.

It was agreed to keep this item on the agenda.

b) Plasma from BPL Elstree

Mr. Watt reported that the plasma mentioned at the last meeting was still in store. It was agreed that no start should be made on large-scale processing of plasma from England and Wales until a plan had been drafted and agreed by Transfusion Directors both north and south of the border. Such a plan should be drafted by the Joint Committee on Blood Products Production. It was generally agreed that Scotland should secure its own supply of fractions before undertaking work for NBTS.

Pending an agreement on shift working Mr. Watt felt he could process a limited amount of the plasma from BPL on the basis of an extended working day, to ascertain the yield and establish costs. Directors agreed that he should do so, possibly devoting two weeks to fractionating English plasma only.

c. Blood collecting packs

It was confirmed that DHSS Medicines Division were awaiting the result of tests being carried out, it was understood, by Tuta, on a "pigtail" pack modified by the company. Dr. Cash offered to undertake tests on the modified pack if DHSS Medicines Division wished him to do so.

d. Human serum for quality control

Dr. Bell reported having asked the clinical chemistry sub-committee of the Scientific Services Advisory Group to suggest a means by which the need for human serum could be assessed. As a result it was proposed to draft a questionnaire for issue to Scottish NHS laboratories and Transfusion Directors were asked to advise on its preparation.

4. PREVENTION OF HAEMOLYTIC DISEASE OF THE NEWBORN

It was agreed to postpone discussion of this item till the next meeting, which should be held as soon as possible.

5. STANDARDS FOR THE COLLECTION AND PROCESSING OF BLOOD AND BLOOD COMPONENTS

It was confirmed that the Secretary had conveyed to Mr. Roberts the Directors' views, expressed at a special meeting on 20 December 1977, on the document 'Standards for the collection and processing of blood and blood components'. Detailed comments on Section 1 of the document had already been conveyed from SHHD to DHSS. The comment made by Directors on Section 2 which concerned the separation of blood components had been to the effect that they were not prepared to accept the consequences implied in the section without full national discussion. Dr. Moir asked Directors to amplify this statement.

Dr. Cash tabled, and spoke to, a draft paper in which he reported the following :

a. clinical experience of the microbial contamination of blood in open ('pigtail') and 'closed' systems from Bristol, New Zealand and SE Scotland BTS.

b. laboratory studies undertaken in SE Scotland BTS of microbial contamination of blood collected by the open system.

c. cost comparison between the use of 'pigtail' and double packs.

The conclusion drawn from a. and b. was that in routine practice there was no indication that an open ('pigtail') blood bag system produced a higher risk of microbial contamination than 'closed' systems. It was pointed out also that the 'pigtail' pack should be categorised as lying between the truly open (bottle) and the completely closed (multiple pack) systems. The conclusion drawn from c. was that the exclusive use of multiple packs against a combination of 'pigtail' and multiple might mean extra expense amounting to £1 million per annum in the UK.

In the discussion which followed it was pointed out that the major source of hazard might well be pinhole punctures in packs, in which case it would be advantageous to reduce the number of multiple packs used. The view was expressed that the Medicines Inspectorate required to lay down standards which would take into account the future possibility of separation being undertaken by inexperienced or unskilled staff. Directors generally felt that the responsibility for ensuring that staff had the necessary skill was theirs, as assessed by the Licensing Authority. Developing this theme, Directors felt strongly that the safety of blood products depended much more on maintaining strict standards of work and professional discipline amongst staff than on attempting to provide fail-safe physical conditions.

It was agreed that Dr. Cash would revise his draft paper and submit it to Dr. Moir for consideration in SHHD whence it would be transmitted to DHSS. Dr. Maycock, it was agreed, should submit to DHSS Medicines Division data produced by Dr. John Jenkins, Director, NE Metropolitan Transfusion Centre which appeared to confirm Dr. Cash's findings.

The chairman thanked Dr. Moir and Dr. Walford for their interest and extended an open invitation to them to attend future meetings as appropriate.

6. SUPPLY OF PLASMA

Speaking to his quarterly report for the twelve weeks to 23 December 1977, which had been circulated, Mr. Watt pointed out that the average intake of plasma to PFC over the period had been 640 litres per week, insufficient to produce 10 bottles of SPPS per 1000 population per annum. The current intake appeared to be sufficient to support an issue of 39000 units of SPPS per annum or 3276 units per month and Mr. Watt suggested that the bulk of this (2980 units) should be issued on the following basis per calendar month :

N Scotland	...	110
NE	...	280
E	...	280
Edinburgh & SE	...	660
Glasgow & W	...	1650
		2980

Directors agreed to consider this proposal and let Mr. Watt have their decisions in writing.

7. BLOOD TRANSFUSION ADVISORY GROUP

Mr. Watt reported briefly on the meeting of BTAG held on 11 November 1977. Some members had, he said, expressed concern at the resource implications of the proposal to extend the use of anti-D IgG, feeling that finance would be more appropriately invested in the production of other immunoglobulins. There had been a valuable discussion on human specific immunoglobulins related to the paper prepared by Dr. C.C. Smith (Directors' meeting 21 April 1977) and it was agreed that some of the comments should be incorporated in the paper.

8. ANTI-RABIES PLASMA

The meeting discussed Dr. Maycock's letter of 18 November (which had been circulated) to Miss Corrie, concerning the decision taken at the Directors' meeting on 12 July 1977 to fractionate PFC's stock of anti-rabies plasma and send the surplus of the finished product over Scottish needs to BPL Elstree. It was pointed out that no laboratory in Scotland was able to assay anti-rabies IgG. The cost of assay of all anti-rabies plasma (including the Scottish stock mentioned above) was being met by BPL Elstree following the agreement that BPL would fractionate all the UK plasma.

It was agreed that the matters of how to maintain a turnover of the IgG when very little was being used and where the plasma should be fractionated, ought to be discussed at a meeting of an ad hoc group on anti-rabies IgG with which Dr. Maycock was concerned. It was agreed that the ad hoc group should have a representative from Scotland and Dr. Maycock agreed to try to arrange this.

9. PRE-SCOTBLOOD MEETINGS

Dr. Cash reported that the meeting on testing for hepatitis had been arranged by Dr. D.B.L. McClelland, as instructed by the Directors, for Friday 12 May 1978 in Dundee. In addition, his Centre was arranging on the same day a meeting for those interested in cell separators. Directors were asked to contact Dr. S.J. Urbaniak, Consultant, Edinburgh and SE Scotland BTS, for information : there would be accommodation for 2 or 3 representatives from each Scottish Transfusion Centre.

10. PLASTIC PACKS FOR CRYSTALLOIDS

It was agreed to defer to the next meeting a paper on this subject tabled by Mr. Watt so that Directors could study it.

11. GOVERNMENT CHEMIST LABORATORY, GLASGOW

It was explained that the Government Chemist was concerned that his laboratory in Glasgow was under-used and that SNBTS had been asked whether it wished to use the facilities.

After studying the information available about the laboratory Directors agreed that they had no immediate work for it.

12. HEALTH SERVICE OPERATIONAL RESEARCH UNIT

It was reported that the Health Service Operational Research Unit, University of Strathclyde, would be willing to undertake research into any aspect of BTS work on which Directors wished a study to be conducted. It was agreed to bear the offer in mind.

13. DATE OF THE NEXT MEETING

It was agreed that Miss Corrie should circulate Directors with dates for a meeting to be held between mid-February and mid-March. The principal item on the agenda would be haemolytic disease of the newborn. (Meeting since arranged for Wednesday, 1 March)

6. SPECIFIC IMMUNOGLOBULINS

a) Dr. C.C. Smith's paper

It was suggested at the Blood Transfusion Advisory Group meeting on 9 March 1977 that Directors might wish to meet Dr. C.C. Smith over the discussion paper "Human Specific Immunoglobulins" which he prepared for the Advisory Group and which has been circulated to Directors.

b) anti-rabies

Production and distribution, following Mr. Watt's letter of 28 February to Directors and the proposed update of circular SHM 36/1973 about which CSA Supplies Division contacted Directors on 17 February 1977.

c) anti-rubella

Mr. Watt and Dr. Cash wish to discuss passive immunisation against rubella: Dr. Smith touches on the subject in his paper also.

7. USE OF ANIMAL FRACTIONS

Dr. Wallace reports that a Glasgow cardiologist has approached him about the use of animal fractions to treat patients with Digoxin overdose and asks for this to be reported to the meeting for comment.

8. PLASMA PACK NO. ED1/FR/7099 : DONOR NO.48476

Directors have copies of the exchange of correspondence between Mr. Watt and Mr. McPhee between 25 January and 22 February 1977.

9. SENIOR REGISTRAR POSTS

Discussion on current and future vacancies, including the comments made by Dr. Wallace in his letter to Directors dated 7 April.

10. "PIGTAIL" BLOOD PACKS

Directors may wish to discuss the design of blood packs, referring in particular to the meeting of English Transfusion Directors on 2 March and to Dr. Fletcher's recent visit.

11. ANY OTHER BUSINESS

12. DATE OF THE NEXT MEETING