

## Change Notification for the UK Blood Transfusion Services

**Date of Issue:** 28 August 2025

**Implementation:** to be determined by each Service

No. 28 – 2025

### Hepatitis C

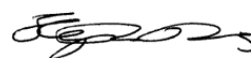
This notification includes the following changes:

	BM-DSG Bone Marrow & Peripheral Blood Stem Cell	CB-DSG Cord Blood	GDRI Geographical Disease Risk Index	TD-DSG Tissue – Deceased Donors	TL-DSG Tissue – Live Donors	WB-DSG Whole Blood & Components	Red Book Guidelines for the BTS in the UK
1. Hepatitis C	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>



**Dr Jayne Hughes**

Interim Chair, Standing Advisory Committee  
on Care & Selection of Donors (SACCSO)



**Dr Stephen Thomas**

Professional Director of JPAC

Changes are indicated using the key below. This formatting will not appear in the final entry.

original text	«inserted text»	<del>deleted text</del>
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# 1. Changes apply to the **Whole Blood and Components DSG**

## Hepatitis C

(revised entry)

1. Person with current Hepatitis C infection	
<i>Obligatory</i>	<b>Must not donate.</b>
<i>See if Relevant</i>	<u>Blood Safety Entry</u>
<i>Additional Information</i>	<p>Hepatitis C Virus (HCV) is a serious infection that can lead to chronic liver disease, liver cancer (hepatoma) and chronic fatigue syndrome. It has also been linked with malignant lymphomas and autoimmune disease. The infection is very easily spread by transfusion.</p> <p>Individuals who are chronically infected are sometimes referred to as 'carriers'. They often have no, or minimal, symptoms associated with their infection.</p> <p>Many cases are linked to previous drug use and, before the introduction of HCV screening of blood donations, to transfusion.</p>
<i><del>Reason for Change</del></i>	<i><del>See below.</del></i>
2. Person with treated Hepatitis C infection	
<i>Includes</i>	Individuals who have received successful treatment for HCV.
<i>Obligatory</i>	<b>Must not donate.</b>
<i>Discretionary</i>	<p>«Blood services can consider samples for blood donation screening if:</p> <ul style="list-style-type: none"> <li>a) six months has elapsed from the completion of therapy, and</li> <li>b) the individual has been told their treatment has cleared their HCV infection, and</li> <li>c) the donor is otherwise eligible with regards to the cause of HCV.</li> </ul> <p>Donors should be aware that samples will include screening for HCV antibodies. Most individuals who have been successfully treated for HCV remain HCV antibody positive for many years. Therefore, most donors with past HCV will not be eligible to donate.»</p> <p><i><del>If six months has elapsed from the completion of therapy and the individual has been told their treatment has cleared their HCV infection, accept.</del></i></p> <p><i><del>Samples should be taken to confirm that the donor is HCV antibody negative before a full donation is taken.</del></i></p>
<i>See if Relevant</i>	<u>Blood Safety Entry</u> <u>«Transfusion»</u>

<i>Additional Information</i>	Individuals who have been successfully treated will usually remain HCV antibody positive for many years. As a negative HCV antibody screening test is required before blood can be issued, «an individual who has HCV antibodies will not be eligible to donate.» <del>their blood cannot be used.</del>
<i>Reason for Change</i>	<del>See below.</del>
<b>3. Current or Former Sexual Partner of Affected Individual</b>	
<i>Obligatory</i>	<b>Must not donate if:</b> Less than three months from the last sexual contact.
<i>Discretionary</i>	Donors who have a current sexual partner with a history of previous HCV infection may be able to donate, depending on the status of their partner: <ol style="list-style-type: none"> <li>1. If the partner has been treated for HCV infection, and has been free of therapy for six months, and is in sustained remission, accept.</li> <li>2. If the partner has evidence of previous HCV infection (HCV RNA negative, anti-HCV positive) and has been fully assessed by an appropriate clinician who has confirmed that there is no current HCV infection, accept.</li> </ol>
<i>See if Relevant</i>	Blood Safety « <a href="#">Entry</a> » <del>Leaflet</del>
<i>Additional Information</i>	<p>Confirmation of the success of treatment of the HCV positive partner is not required.</p> <p>Individuals who remain HCV RNA negative six months after completing treatment are likely to have been 'cured', with a risk of relapse of less than 1%.</p> <p>In the United Kingdom the risk of sexual transmission of HCV from an infected individual to a sexual partner is low, but not zero.</p> <p>As the treated individual would have a very low (&lt;1%) risk of relapse of infection and sexual transmission of the hepatitis C virus is rare, the transmission of hepatitis C from a successfully treated individual to a sexual partner is most unlikely.</p> <p>All donations in the UK undergo HCV NAT screening so that the chance of a window period donation escaping detection is also exceedingly low (estimated residual risk for HCV transmission from a UK blood donation for 2014-2016 is 1 in 95.8 million donations).</p> <p><b>Sexual Partners of anti-HCV positive, PCR negative donors</b></p> <p>Individuals who have cleared an acute HCV infection naturally are sometimes identified through HCV testing, including testing of a blood donation. Such individuals will be HCV RNA negative but HCV antibody positive. Unlike people who have been treated for HCV infection, they may not have received appropriate clinical follow up, including repeat HCV RNA testing several months after the original negative result. Unless the individual has undergone specialist assessment and been given the assurance that they are not currently infected, their partner is not eligible to donate.</p>
<i>Reason for Change</i>	<del>See below.</del>

<b>4. Person Currently or Formerly Sharing a Home with an Affected Individual</b>	
<i>Discretionary</i>	Accept.
<i>See if Relevant</i>	Current or Former Sexual Partner of Affected Individual, above.
<i>Additional Information</i>	Hepatitis C is neither contagious nor spread by the faecal-oral route. It is usually only spread through a direct blood to blood route. For these reasons household contacts do not need to be deferred.
<del><i>Reason for Change</i></del>	<del><i>See below.</i></del>
<i>«Information</i>	Part of this entry is a requirement of the Blood Safety and Quality Regulations 2005.»
<i>Reason for Change</i>	«Clarification regarding eligibility of individuals with treated HCV, and link to 'Transfusion' entry.»  <del><i>This entry was updated to remove the reference to a separate entry for Northern Ireland. This is to reflect changes in donor selection criteria for donors in Northern Ireland (1st June 2020) which are in line with the other UK Blood Services and the SaBTO Donor Selection Criteria Review Report (2017).</i></del>