Change Notification for the UK Blood Transfusion Services

No. 29 - 2025

'Accept' entry and Polycystic Ovary Syndrome

This notification includes the following changes:

	BM-DSG Bone Marrow & Peripheral Blood Stem Cell	CB-DSG	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. Accept						•	
2. Skin Disease						•	
3. Central Nervous System Disease						•	
4. Polycystic Ovary Syndrome						•	
5. Changes to the A-Z index						•	

Dr Jayne Hughes

of Mighes

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

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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» deleted text

Changes apply to the Whole Blood and Components DSG

The 'Accept' entry will be removed.

Accept

(removed entry)

Discretionary	If use of medicines or other therapies are not a reason to defer, accept.
See if Relevant	Complementary Therapy
	<u>Drug Index - preparations which may affect platelet function</u>
	<u>Fertility</u>
	Nonsteroidal Anti-Inflammatory Drugs
	<u>Neurosurgery</u>
	If taking Dopamine-receptor agonists (e.g. Rotigotine, Bromocriptine, Ropinirole, Pramipexole), see: Central Nervous System Disease
Additional Information	The condition that brought you to this entry is not a reason for deferral. It is however important to ensure that there are no other factors that may affect any donation, such as having symptoms related to hypotension as side effects from the use of medicines such as dopamine receptor agonist drugs (e.g. rotigotine, bromocriptine, ropinirole and pramipexole) that can cause hypotension and fainting, or complementary (alternative) therapy.
Reason for Change	Fertility has been added to See if Relevant section.

The following entries are now indicated for the conditions noted below:

For	See
Arachnoid Cyst	Central Nervous System Disease
Brain Cyst	Central Nervous System Disease
Colloid Cyst	Central Nervous System Disease
Dermoid Cyst	Skin Disease (for skin-associated Dermoid Cysts)
	Surgery (for other Dermoid Cysts)
Epidermoid Cyst	Skin Disease
Fish Pedicure	Skin Disease
Polycystic Ovary Syndrome	Polycystic Ovary Syndrome (new entry)
Restless Legs Syndrome	Central Nervous System Disease

2. Changes apply to the Whole Blood and Components DSG

Skin Disease (revised entry)

Obligatory	Must not donate if:		
	a) The donor has a condition that is infected or infectious e.g. scabies.		
	b) History of malignancy.		
	c) The venepuncture site is affected.		
	d) Required application of steroid, tacrolimus (Protopic®) or pimecrolimus (Elidel®) creams over large areas for periods of more than three weeks in the last six months.		
	e) Ever been treated with Etretinate (Tigason®).		
	f) Less than 36 months from the last dose of acitretin (Neotigason®).		
	 g) Less than four weeks from the last does of isotretinoin (Roaccutane®) or Alitretinoin (Toctino®). 		
	h) Has any current open skin wounds or infection.		
Discretionary	a) If occasional use of steroid, tacrolimus (Protopic®) or pimecrolimus (Elidel®) or other creams over small areas of skin and none of the above apply, accept.		
	b) If chronic superficial fungal infection (e.g. ringworm, athlete's foot, chronic fungal nail infection or tinea) on local therapy only or has been in contact with an infected individual, accept.		
	c) If in contact with scabies but not obviously infected, accept.		
	 d) If malignancy was a basal cell carcinoma (rodent ulcer) and treatment is completed and all wounds healed, accept. 		
	«e) If an epidermoid (sebaceous) cyst is uninfected, accept.		
	 f) If no further investigation or treatment is required for a skin-associated dermoid cyst, accept. 		
	g)» For donors with Lichen Sclerosus requiring treatment other than topical steroid therapy only, excluding Etretinate (Tigason®):		
	e) If more than 24 months from completing treatment, have no areas of open wound or infection, have no history of associated malignancy and symptoms are controlled with or without intermittent use of topical steroid therapy only, accept.		
See	Is there a specific A-Z index entry for the treatment and/or condition you are concerned about?		
See if Relevant	«See: is there a specific A-Z index entry for the treatment and/or condition you are concerned about?»		
	<u>Acne</u>		
	<u>Anaemia</u>		
	Autoimmune disease		

	<u>Dermatitis</u>		
	Herpes Simplex		
	<u>Immunodeficiency</u>		
	Infection - General		
	<u>Malignancy</u>		
	« <u>Neurosurgery</u> »		
	<u>Psoriasis</u>		
	Steroid Therapy		
	Surgery		
	Thrush		
	Thyroid disease		
	Wounds, Mouth and Skin Ulcers		
Additional Information	A donor who has been in contact with scabies but has no symptoms (e.g. itching) does not pose a risk to other donors or staff.		
	Damaged skin can increase the risk of infection contaminating a donation. For this reason a venepuncture should not be performed through an area of affected skin.		
	Many malignancies spread through the blood stream. It is therefore considered safer not to accept donations of blood from people who have been diagnosed with malignancy. Treated basal cell carcinoma is an exception to this as it is not spread through the blood stream.		
	«Dermoid cysts of the skin are benign growths which usually appear at birth. They are generally harmless but may be surgically removed if their location or size is problematic for an affected individual. Dermoid cysts occurring in other parts of the body (e.g. intracranial, spinal, ovarian) should be assessed against the <u>Surgery</u> and <u>Neurosurgery</u> entries, as appropriate.»		
	Initial treatment of Lichen Sclerosus is through specialist care with potent steroid therapies.		
	Treatment can also be with methotrexate and retinoids such as Etretinate (Tigason®) or acitretin (Neotigason®). If taken systemically these can cause birth defects for babies exposed to them before birth. It is important to allow time for the drug to be cleared from the blood of a donor. Some drugs take longer to be cleared than others.		
	Under normal circumstances the use of topical treatment with steroid, tacrolimus and pimecrolimus will not result in blood levels which cause suppression of the adrenal system or immune response. Side effects are more likely if there is a skin barrier defect or high doses are used over large areas for extended periods. A large area of skin is defined as >9% (Wallace Rule of Nines). 1% is equal to the area of the closed digits and palm of the donor's hand.		
Reason for Change	«A discretionary acceptance has been added for Epidermoid Cysts and for skin-associated Dermoid Cysts.»		
	Link updated from 'Immunosuppression' to 'Immunodeficiency' in the 'See if Relevant' section.		

3. Changes apply to the Whole Blood and Components DSG

Central Nervous System Disease

(revised entry)

Excludes	Cerebrovascular disease and all forms of intracranial haemorrhage.
Obligatory	Must not donate if has or has had:
	a) Dementia (e.g. Alzheimer's disease).
	 A history of CNS disease of unknown aetiology or suspected infective origin. These include, but are not limited to, neurodegenerative conditions, multiple sclerosis (MS), optic neuritis, clinically isolated syndrome, and transverse myelitis.
	c) Malignant tumour.
	d) Parkinson's Disease
	e) If having symptoms related to hypotension while taking dopamine receptor agonist drugs such as rotigotine, ropinirole and pramipexole.
Discretionary	 Individuals who have had Bell's palsy more than four weeks ago and have discontinued any treatment for the condition for at least seven days, once investigated and discharged from specialist follow-up even if they have residual paralysis, accept.
	 b) If the donor has been investigated and a definite diagnosis of transient global amnesia has been made, accept.
	c) If diagnosed with Idiopathic (benign) intracranial hypertension (IIH) and
	the donor is asymptomatic, and
	 if the donor is taking diuretics (e.g. Acetazolamide) for IIH and the dose has not changed in the last four weeks,
	accept.
	«d) If diagnosed with restless legs syndrome, and
	 any underlying cause does not preclude donation, and
	 the donor does not have significant side effects from medication, if used,
	accept.»
	d) If taken for a condition other than Parkinson's Disease, as long as not having symptoms of hypotension related to dopamine receptor agonist drugs such as rotigotine, bromocriptine, ropinirole and pramipexole, accept.
See if Relevant	Cardiovascular Disease
	Cerebrovascular Disease and Intracranial Haemorrhage
	<u>Epilepsy</u>
	Infection - General
	<u>Neurosurgery</u>

	Pituitary Disorders		
	Prion Associated Diseases		
	Steroid Therapy		
	Urinary Catheterisation		
Additional Information	Donor safety:		
	Transient global amnesia is a temporary and isolated disorder of memory. Affected individuals are usually over 50 years of age and there is an association with migraine. There is no association with cerebrovascular disease.		
	Idiopathic or benign intracranial hypertension is a raised intracranial pressure where no mass or other disease is present.		
	«Restless legs syndrome is a common condition characterised by an irresistible urge to move the legs or arms, sometimes associated with abnormal sensations and jerking movements of the limbs. In the majority of cases there is no obvious cause, but it can be associated with iron deficiency or kidney failure. If required, restless legs syndrome can be treated with dopamine-receptor agonist drugs such as ropinirole, pramipexole or rotigotine. Donors taking these medications for treatment of restless legs syndrome can be accepted, provided they don't have significant side effects such as hypotension or impulse control disorders.»		
	Parkinson's disease is a movement disorder that can make venepuncture difficult and lead to damage to the donor's arm. It is also treated with dopamine receptor agonist drugs (e.g. rotigotine, bromocriptine, ropinirole and pramipexole) that can cause hypotension and fainting.		
	Recipient safety:		
	It is thought that degenerative brain disease in the form of vCJD has been transmitted by blood transfusion. Often the exact cause of a degenerative brain condition only becomes known after death. For this reason, when there is any doubt as to the underlying cause of a brain condition, it is considered safest not to accept a donation.		
Information	This is a requirement of the Blood Safety and Quality Regulations 2005.		
Reason for Change	«Addition of guidance for donors with restless legs syndrome, including information regarding dopamine-receptor agonist drugs.»		
	A discretion to accept donors on treatment for IIH has been added.		

4. Changes apply to the Whole Blood and Components DSG

«Polycystic Ovary Syndrome (PCOS)»

(new entry)

«Obligatory	If associated with complications such as high blood pressure, diabetes, cardiovascular disease, non-alcoholic fatty liver disease or obstructive sleep apnoea, refer to the relevant entry.
Discretionary	If otherwise eligible, accept.
See if Relevant	Cardiovascular Disease Diabetes Mellitus Fertility Blood Pressure - High Liver Disease Sleep Apnoea
Additional Information	Polycystic ovary syndrome (PCOS) is a common endocrine condition affecting women. Clinical features can include irregular or infrequent periods, excess facial or body hair (hirsutism), hair loss, weight gain, acne and difficulties getting pregnant. The exact cause of PCOS is unknown but the symptoms are related to hormone imbalance, often including increased testosterone activity. Many individuals with PCOS also have raised insulin levels and insulin resistance, putting them at risk of diabetes and metabolic syndrome. Conditions such as cardiovascular disease, sleep apnoea and non-alcoholic fatty liver disease are also associated with PCOS. A diagnosis of PCOS does not prevent someone from donating. Drugs used to
	treat PCOS can include the combined oral contraceptive pill, co-cyprindiol, progestogens and anti-diabetic medications such as metformin. Patients may sometimes be prescribed spironolactone to treat acne, hirsutism or hair loss. Provided they are otherwise eligible, donors on any of these medications can be accepted. Care should be taken to assess eligibility against the relevant guideline if the donor has any PCOS-associated complications.
Reason for Change	This is a new entry.»

5. Changes apply to the Whole Blood and Components DSG

The following redirections will be <u>amended</u> in the **A-Z index**

Arachnoid Cyst » Central Nervous System Disease Accept
Brain Cyst » Central Nervous System Disease Accept
Colloid Cyst » Central Nervous System Disease Accept
Epidermoid Cyst » Skin Disease Accept
Fish Pedicure » Skin Disease Accept
PCOS » Polycystic Ovary Syndrome Accept
Restless Legs Leg Syndrome » Central Nervous System Disease Accept

The following redirections will be <u>added</u> to the **A-Z index**

Dermoid Cyst – Skin-associated » Skin Disease

Dermoid Cyst – Not skin-associated » Surgery

The following redirection will be removed from the A-Z index

Dermoid Cyst » Accept

Polycystic Ovary Syndrome » Accept