

Change Notification for the UK Blood Transfusion Services

Date of Issue: 13 August 2024 **Implementation:** to be determined by each Service

No. 33 – 2024

Tuberculosis

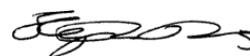
This notification includes the following changes:

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
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- 1. Tuberculosis



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Chair of Standing Advisory Committee on Tissues & Cellular Therapy Products (SACTCTP)



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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
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1. Changes apply to the **Deceased Tissue** and **Living Tissue DSGs**

Tuberculosis

(revised entry)

Affected Individual	
<i>Obligatory</i>	<p>1. Must not donate if:</p> <p>a) Infected.</p> <p>b) Less than 24 months from completing treatment.</p> <p>«b)» e) Under follow-up.</p> <p>«c) Ever had clinically active tuberculosis.</p> <p>d) Diagnosed with latent tuberculosis within past two years.»</p> <p>2. Bone:</p> <p>Must not donate bones that have been the site of previous infection.</p>
<i>Discretionary</i>	<p>a) If donor with a history of tuberculosis that has been successfully treated, with treatment being completed at least 24 months previously, been discharged from follow up, and has remained well and asymptomatic – «refer to DCSO for individual risk assessment.» accept.</p> <p>b) Donors with a diagnosis of latent tuberculosis currently not undergoing investigation, or more than 7 days after completion of treatment: refer to DCSO for individual risk assessment.</p> <p>«c) See Additional Information.»</p>
<i>See if Relevant</i>	<p><u>BCG</u></p> <p><u>Heaf Test</u></p> <p><u>Mantoux Test</u></p>

Contact	
<i>Obligatory</i>	<p>Must not donate until:</p> <p>Screened and cleared.</p>
<i>Discretionary</i>	<p>If the donor has been informed that they do not need to be screened, accept.</p>
<i>See if Relevant</i>	<p><u>BCG</u></p> <p><u>Heaf Test</u></p>

	<u>Mantoux Test</u>
<i>Additional Information</i>	<p>Tuberculosis can be present in many tissues and be spread through the blood stream. It is sensible to exclude people who may have active disease from donating to prevent any possibility of transmitting the infection.</p> <p>Individuals with latent tuberculosis do not have symptoms of active infection. Treatment is usually recommended for individuals aged under 65. Antibiotics used to treat tuberculosis can cause liver damage in older adults, and hence treatment may not be offered. If latent tuberculosis is thought to be drug resistant, or if the individual is taking immunosuppressive medication for any reason, they may be regularly monitored to check the infection does not become active.</p> <p>«DCSOs should consider all the TB risk factors in combination, and along with any clinical signs, symptoms, or radiological evidence of TB, treatment during review of donor eligibility, along with the processing methodology applied.</p> <p>Donors with past treated tuberculosis can be accepted if tissues are to be terminally sterilised or processed in a manner validated to remove viable donor cells. However, this does not apply to any bone that has been the site of previous infection.»</p>
<i>Reason for Change</i>	<p>«Obligatory section updated to include past active TB and latent TB. Discretionary section updated to require that donors with a past history of treated TB be referred to DCSO for individual risk assessment. Additional points added to Discretionary section and Additional Information section updated.»</p> <p><i>To provide clarity that 24 month deferral is following completion of treatment, rather than confirmation of cure. To provide information and guidance regarding latent tuberculosis.</i></p>