

**Change Notification for the UK Blood Transfusion Services**

**Date of Issue:** 26 November 2024

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

No. 48 – 2024

**Haemolytic Anaemia**

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. Haemolytic Anaemia



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

**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»

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# 1. Changes apply to the **Whole Blood and Components DSG**

## Haemolytic Anaemia

(revised entry)

<i>«Includes</i>	<p>«Red cell disorders:</p> <ul style="list-style-type: none"> <li>• Enzyme abnormalities e.g. G6PD deficiency, pyruvate kinase deficiency</li> <li>• Membrane abnormalities e.g. hereditary spherocytosis, hereditary elliptocytosis</li> <li>• Paroxysmal nocturnal haemoglobinuria</li> </ul> <p>Immune causes:</p> <ul style="list-style-type: none"> <li>• Transfusion-related</li> <li>• Drug-induced</li> <li>• Autoimmune conditions</li> </ul> <p>Other causes:</p> <ul style="list-style-type: none"> <li>• Infection</li> <li>• Toxins</li> <li>• Venom</li> <li>• Trauma e.g. march haemoglobinuria</li> <li>• Liver disease – e.g. cirrhosis, Wilson’s disease, pregnancy-induced including HELLP syndrome</li> <li>• Malignancy</li> </ul>
<i>Excludes</i>	«For sickle cell syndrome, thalassemia syndrome – see <a href="#">Haemoglobin Disorders</a> »
<i>Obligatory</i>	<b>Must not donate.</b>
<i>Discretionary</i>	<p>a) If there is a known cause for the haemolysis «that does not otherwise preclude donation» (e.g. an adverse reaction to a medicine, march haemoglobinuria or a venomous bite) and the individual is completely recovered, accept.</p> <p>b) Hereditary elliptocytosis not causing haemolysis or requiring splenectomy, accept.</p>
<i>See if Relevant</i>	<p><a href="#">Autoimmune Disease</a></p> <p><a href="#">Haemoglobin Disorders</a></p> <p>«<a href="#">Liver Disease</a>»</p> <p>«<a href="#">Monoclonal antibody therapy and other Biological Modalities</a>»</p> <p><a href="#">Splenectomy</a></p> <p>«<a href="#">Steroid Therapy</a>»</p> <p><a href="#">Transfusion</a></p>
<i>Additional Information</i>	<p>«Causes of haemolytic anaemia include red cell and haemoglobin disorders.»</p> <p>Affected red cells are more likely to break down after collection. This could make the stored blood dangerous to transfuse.</p> <p>Most cases of hereditary elliptocytosis do not affect red cell survival and may be accepted.</p> <p>«Haemolytic anaemia can also be caused by immune reactions and other triggers. Care should be taken to establish the cause or associated condition and any treatment which</p>

	may preclude donation or affect eligibility e.g. malignancy, splenectomy, transfusion, steroid or monoclonal antibody therapy. Only individuals who have otherwise had a distinct episode from which they have fully recovered, with no ongoing problems, no risk of recurrence and no ongoing specialist follow-up will usually be eligible.»
<i>Information</i>	<del>This is a requirement of the Blood Safety and Quality Regulations 2005.</del>
<i>Reason for Change</i>	«Addition of causes and associated conditions in a new 'Includes' section and into the 'See if Relevant' and 'Additional Information' sections with reference to treatments that may also affect eligibility. Addition of 'Excludes' section for clarification.» <del>This is a new entry.</del>
<i>Donor Information</i>	If you wish to obtain more information regarding a personal medical issue, please contact your <a href="#">National Help Line</a> .  Please do not contact this web site for personal medical queries, as we are not in a position to provide individual answers.