

## Malarial Risk:

As part of your pre-donation interview, you will be asked about countries where you have visited or lived outside the U.S. or Canada. It's important that you tell the historian about all your travels so we can be sure you meet current blood donor acceptability criteria, in two major areas.

Although rare, even today malaria remains a medically serious risk of transfusion, and the Food and Drug Administration (FDA) requires blood centers to assess prospective blood donors for the possibility of exposure to malaria. Protozoa transmitted by the bite of infected female Anopheles mosquito cause malaria. If you've traveled to a part of the world where malaria is a risk, you may be asked to wait to donate blood.

Possible Risk Areas	No-Risk Areas
Central America	North America
South America	Greenland & Iceland
Africa	Continental Europe
Turkey	Australia
Costa Rica	New Zealand
India	Israel
Southeast Asia	Bahamas & Barbados
China	Jamaica
The Middle East	Singapore
Indonesia	Virgin Islands

**Your medical historian will review travel in possible risk areas with you in more detail.**

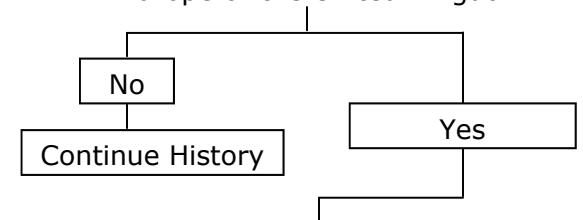
## Variant Creutzfeldt-Jacob Disease (vCJD)

### Information for donors with United Kingdom or Europe Deferrals.

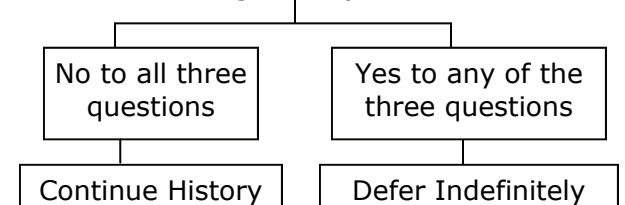
The FDA, in concert with world health organizations and blood centers, has imposed certain restrictions in order to reduce the possibility of vCJD (CJD, the human form of "Mad Cow" disease) entering U.S. Blood supply. Use the chart below to help guide you through the decision process, and **please** discuss your own situation with your medical historian.

#### The historian will ask you the following:

Since 1980, have you lived in, or traveled to Europe or the United Kingdom?



1. From 1980 through 1996 did you spend time that adds up to 3 months or more in the U.K.?
2. Since 1980 have you received a transfusion of blood, platelets, plasma, cryoprecipitate, or granulocytes in the U.K.?
3. Since 1980 have you spent time that adds up to 5 years or more in Europe (including time spent in the U.K. from 1980 through 1996)?



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In May of 2002, the Food and Drug Administration (FDA) in concert with world health organizations and blood centers implemented revised preventive measures to decrease the possibility of variant Creutzfeldt-Jakob Disease (vCJD; “mad cow” disease) from entering the U.S. blood supply. Additional restrictions were implemented in October 2002.

It is important to note that to date, transmission of vCJD by human blood or plasma has not been demonstrated and no laboratory or epidemiological studies have demonstrated infectivity of blood from vCJD donors. We are providing you with this pamphlet so that you have the most current information about vCJD.

### **What’s the concern about the U.K.?**

Variant CJD is an emerging disease for which few studies have been published about how the disease might be transmitted by blood or blood components. In other words, scientists are not sure whether human blood can transmit the vCJD agent. 1980 through 1996 were the peak years of the United Kingdom BSE (bovine spongiform encephalopathy; “mad cow” disease) epidemic. Since 1996, the U.K. implemented measures designed to keep BSE out of the human food chain.

When blood centers began deferring donors who were in the U.K. for 6 months or more, approximately 87% of donors potentially exposed to BSE were eliminated from the donor pool. The FDA now feels that by implementing the more stringent criterion of **3 months or more** in the U.K. that percentage can be increased to 90%.

### **Why are France and other European countries now included?**

Since the FDA guidelines were published in 1999, the vCJD and BSE epidemics have continued to evolve. More BSE cases have been reported in Europe. There are two types of risk outside the U.K.: exposure to BSE from infected cows within the country, and exposure to BSE from beef products exported from the U.K. prior to full implementation of food control measures in 1996.

Available data suggest that France imported a substantial amount of beef from the U.K. during the peak years of the BSE epidemic. About 5% of beef consumed in France is estimated to have come from the U.K. Substantial amounts of British beef also were exported to other countries in Europe, although in smaller amounts than to France.

### **And why are U.S. military bases in some countries included and not others?**

The military keeps extensive and highly accurate procurement records, making it possible to identify exactly when British beef was imported for use on each military base. Some U.S. military personnel, civilian military personnel, and their dependents were potentially exposed to British beef procured for military bases between 1980 and 1996. U.S. military bases North of the Alps received British beef through 1990 and military bases South of the Alps up through 1996.

Due to the potential of exposure to U.K. beef while on bases in Europe, the FDA recommends personnel who spent 6 months or more on those bases and during those times outlined be deferred from donating blood.

### **What’s being done in the U.K. and Europe to protect the human food chain?**

Control measures include:

- Active surveillance through testing of slaughtered cattle over 30 months old
- Exclusion of high-risk material from human food
- A ban on human consumption of cattle more than 30 months old
- Prohibition of mechanically recovered meat
- A ban on mammalian-derived feed for cattle, sheep and other ruminants
- Herd control and ongoing surveillance

### **Will the rules ever be changed to allow me to donate?**

Tests are being developed to detect CJD and vCJD infections in blood and plasma donors. However, until suitable donor screening tests are available, the FDA will continue to recommend all preventive measures currently in effect. As additional scientific information becomes available, the FDA may update their recommendations.

Even though these restrictions represent the most careful consideration of current knowledge and advice from medical experts, the FDA, along with blood centers and health care providers across the country, is very concerned about how these recommendations might impact the supply of blood available for patients in need.

### **When do the restrictions become effective?**

#### **May, 2002**

Deferral of donors who were in the U.K. for 3 months or more from 1980 – 1996; who received a blood transfusion in the U.K. since 1980; who were in France for 5 years or more since 1980; and military personnel, civilian military employees or their dependents stationed in certain European countries for 6 months or more from 1980 through 1996. Please see a blood center staff person for a list of affected countries.

#### **October, 2002**

In addition to the May restrictions, donors who spent 5 years or more in Europe (please see a blood center staff person for a list of affected countries) will also be deferred from donating.

## **Questions?**

**Call the Resource Nurse at  
650-725-9968.**



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