

## Guidelines for the Blood Transfusion Services

### 3.10: Donors on treatment with medications (drugs)

<http://www.transfusionguidelines.org/red-book/chapter-3-care-and-selection-of-whole-blood-and-component-donors-including-donors-of-pre-deposit-autologous-blood/3-10-donors-on-treatment-with-medications-drugs>

### 3.10: Donors on treatment with medications (drugs)

Donor deferral for most drugs is based on the underlying illness suffered by the donor (e.g. cardiovascular disease, diabetes, anaemia and malignancies) rather than on the properties of the drug itself. Since, in general, traces of drugs in blood and blood components are believed to be harmless to patients, many people taking medications – even when prescribed – are acceptable as blood donors as long as the reason for which the medication is taken is acceptable.

A pragmatic view should be taken of treatment of infections with antimicrobials. Provided that the donor is in good health, deferral is limited to 2 weeks from full recovery and 1 week after cessation of antimicrobial therapy, whichever is the longer. This is based on what may be regarded as a reasonable recovery period for the infection and is not related to the antimicrobial therapy itself.

Donors taking drugs which are proven or potential teratogens (e.g. vitamin A derivatives) or who are taking drugs that accumulate in tissues over long periods, should not be accepted for blood donation. Some such drugs may be taken to prevent diseases to which the donor – though currently healthy – is prone. A decision to accept should be taken after considering the pharmacodynamics of the specific drug, and its mode of action. The period of deferral after finishing a course of treatment is set out in the JPAC *Donor Selection Guidelines*.<sup>1</sup>

The current JPAC *Donor Selection Guidelines*.<sup>1</sup> must be referred to for all donors who have had immunisations recently.

Sporadic self-medication with some drugs (e.g. vitamins, aspirin, sleeping tablets) need not prevent a donation being accepted, as long as the donor is in good health.

If the donor has taken drugs affecting platelet function (e.g. aspirin) within the last 2 days (depending on the drug) the donation shall not be used for preparing platelets. A list of such drugs is in the JPAC *Donor Selection Guidelines*.<sup>1</sup> Other drugs or tablets may be acceptable. However, the taking of some drugs may indicate a disease that would automatically make a donor ineligible.