



Donor information leaflet





Genetic haemochromatosis is one of the most common genetic disorders in Scotland. If left untreated, it can cause iron levels in the body to build up over time which may damage organs and joints. The main treatment is taking blood, which is called venesection. When iron levels are very high, patients may have to undergo this as often as once a week, called the 'induction phase'. Following this, when levels have fallen, patients enter a 'maintenance phase.' It is when patients with haemochromatosis are nearing the end of the induction phase or are in the maintenance phase that they may be able to become blood donors.



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## Why do we need blood?

Giving blood saves lives. It can be used as a lifeline in emergencies and for people who need long term treatments. The blood and its components are used to treat patients with many different medical conditions, such as anaemia, cancer, blood disorders and those having surgery.

In Scotland, the Scottish National Blood Transfusion Service (SNBTS) aims to welcome around 450 blood donors every day. We have community sessions across Scotland. and five blood donor centres (Aberdeen, Dundee, Edinburgh, Glasgow and Inverness). Page 3 of 6

## Can I be a blood donor with genetic haemochromatosis?

People with genetic haemochromatosis are very welcome to donate blood if you are having your iron levels regularly monitored by your GP or specialist team. To give blood you must be generally fit and well, have no organ damage and meet all of our other criteria for donating. If you have never required venesection or you are a carrier of genetic haemochromatosis, you can refer yourself by contacting SNBTS to book your appointment to give blood.

If you require or have previously required venesection you will need a referral from your haemochromatosis specialist. Most of the specialists across Scotland are aware of this and are familiar with the referral process. If this applies to you, we suggest contacting your specialist to have a discussion and see if you are eligible to be referred.

Please remember, we are only able to provide a donation service. Iron monitoring and advice on the frequency of donation will still need to be carried out by your own doctor. At the current time we are only able to take donations from you every 12 weeks. If you need more frequent venesection or are unable to donate due to a new medical condition or treatment, your specialist will need to arrange this. In addition, at each attendance a blood count (haemoglobin level) is checked and needs to fall within a specific range to be able to donate.

People with genetic haemochromatosis may also be able to enrol as a new blood donor above the usual recruitment age range (age 65).

## What are the next steps?

If your haemochromatosis specialist is happy to refer you to become a blood donor, your referral will be reviewed by a member of our clinical team. If you meet the eligibility criteria, we will write and let you know you have been accepted as a blood donor and provide guidance on how to make an appointment to donate. If you are not eligible, we will write to you and provide a reason why. We will also write to your specialist to let them know our decision.

If you meet the criteria for self-referral as outlined above, please either visit the Scotblood website scotblood.co.uk or phone 0345 90 90 999 to speak with a member of our donor advice team. They will be happy to arrange an appointment for you to donate and answer any further questions you may have. We very much hope to welcome you as a blood donor. Thank you.



This publication can be made available in large print, Braille (English only), audio tape and different languages. Please contact <a href="mailto:nss.equalitydiversity@nhs.scot">nss.equalitydiversity@nhs.scot</a> for further information

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