ADDENDUM

British Society of Haematology Guidelines on the spectrum of fresh frozen plasma and cryoprecipitate products: their handling and use in various patient groups in the absence of major bleeding (*Br J Haematol.* 2018 Apr;181(1):54-67).

Laura Green¹, Paula Bolton-Maggs², Craig Beattie³, Rebecca Cardigan⁴, Yiannis Kallis⁵, Simon J Stanworth⁶, Jecko Thachil⁷, Sharon Zahra⁸ on behalf of the BSH Guidelines Transfusion Task Force.

Authors' affiliations

¹NHS Blood and Transplant, London, Barts Health NHS Trust, London & Blizard Institute, Queen Mary University of London

²Faculty of Biology, Medicine and Health, University of Manchester and Serious
Hazards of Transfusion Office, Manchester Blood Centre, Manchester, UK ³Dept of
Anaesthesia, Critical Care and Pain Medicine, Royal Infirmary of Edinburgh,
Edinburgh

⁴NHS Blood and Transplant/Haematology, University of Cambridge, Cambridge Biomedical Campus, UK

⁵Department of Hepatology, Barts Health NHS Trust and Blizard Institute, Queen Mary University of London

⁶Oxford University Hospitals NHS Trust/NHS Blood and Transplant, Oxford; University of Oxford ⁷Haematology Department, Manchester Royal Infirmary

⁸Scottish National Blood Transfusion Service

Correspondence:

BSH Administrator, British Society for Haematology, 100 White Lion Street, London,

N1 9PF, UK. E-mail: <u>bshguidelines@b-s-h.org.uk</u>

Keywords: fresh frozen plasma, cryoprecipitate, guidelines, non-bleeding patients, plasma

Following publication of the BSH guideline on the spectrum of fresh frozen plasma and cryoprecipitate products (Green et al, 2016), there have been a number of changes requiring this addendum, prior to revision of the guideline as a whole.

Implications of SaBTO 2019 advice to cease recommending imported plasma and apheresis platelets for individuals born on or after 1st of January 1996 or with thrombotic thrombocytopenia (TTP)

The requirement to import plasma for treatment of individuals born on or after 1st of January 1996 or with TTP was introduced in 2004 in the UK, as part of variant Creuzfeldt Jacob Disease (vCJD) risk reduction measures. In September 2019, the Department of Health and Social Care withdrew this requirement and approved the use of UK-sourced plasma and pooled platelets for these individuals (https://www.parliament.uk/business/publications/written-questions-answers-statements/written-statement/Commons/2019-09-09/HCWS1821/), following the publication of advice and a comprehensive assessment of the vCJD risk by the Advisory Committee for the Safety of Blood, Tissues and Organs (SaBTO; https://www.gov.uk/government/publications/risk-reduction-measures-for-variant-creutzfeldt-jakob-disease-pcwg-report). For details on the use of plasma for treatment of patients with TTP, also refer to the relevant BSH guideline (*Scully et al.*, 2012).

The Joint UK Blood Transfusion and Tissue Services Professional Advisory

Committee (JPAC) subsequently agreed that UK plasma for those born on or after 1

January 1996 does not need to be pathogen inactivated, similar to UK plasma for all

other age groups (Oct 2019, https://www.transfusionguidelines.org/about/minutes-of-jpac-meetings).

Plasma components for neonates, infants and older children

Imported Methylene Blue (MB) treated fresh frozen plasma (FFP) and MB cryoprecipitate will no longer be available from UK Blood Services once the currently available stock has been used; they will be replaced by UK plasma components.

For neonates and infants, new specifications for neonatal/infant FFP and cryoprecipitate, including the general requirements for neonatal/infant components, are given in the UK 'Guidelines for the Blood Transfusion Services'

(https://www.transfusionguidelines.org/red-book/chapter-7-specifications-for-blood-components). The neonatal/infant plasma components will all be negative for high-titre (HT) anti-A and anti-B.

Note: neonatal/infant FFP has a maximum 24-hour shelf-life post thawing when stored at 4 ± 2 °C (in contrast to standard FFP which may be used up to 120 hours post thawing at 4 ± 2 °C for recipients with unexpected major haemorrhage).

For children from 1 year of age, FFP and cryoprecipitate will be the standard UK 'adult' component. HT-negative 'adult' FFP is available, but not all components are routinely tested. Apart from the change in plasma component specifications, other information on plasma transfusion in the guidelines are unchanged.

Reference

Green L, Bolton-Maggs P, Beattie C, Cardigan R, Kallis Y, Stanworth SJ, Thachil J, Zahra S. British Society of Haematology Guidelines on the spectrum of fresh frozen plasma and cryoprecipitate products: their handling and use in various patient groups in the absence of major bleeding. *Br J Haematol.* 2018 Apr;181(1):54-67. doi: 10.1111/bjh.15167.

Marie Scully, Beverley J. Hunt, Sylvia Benjamin, Ri Liesner, Peter Rose, Flora Peyvandi, Betty Cheung, Samuel J. Machin. Guidelines on the diagnosis and management of thrombotic thrombocytopenic purpura and other thrombotic microangiopathies. *British Journal of Haematology*, 2012, 158, 323–335