

BloodBrief

-An Update on CMV negative platelets-



March 2015

Dear Hospital Colleague:

Nationally, hospital demand for Cytomegalovirus (CMV) seronegative platelets has been decreasing since 2008 (Figure 1).

As part of the manufacturing process, Canadian Blood Services has been providing leukoreduced cellular components since 1998-1999. In the era of universally leukoreduced blood products, the use of CMV seronegative products is evolving. Experience from centres that have abandoned the use of CMV seronegative cellular components, due to the safety provided by of universal pre-storage leukoreduction, has prompted many Canadian centres to change their policies for transfusion-related CMV prevention. In 2014, the *National Advisory Committee on Blood and Blood Products* (www.nacblood.ca) released a statement regarding the appropriateness of use of CMV seronegative versus CMV safe blood:

The National Advisory Committee recommends that CMV safe and CMV IgG seronegative products be considered equivalent for the majority of patient populations including adult and pediatric Hematopoietic stem cell recipients, CMV seronegative patients who may require future transplant and immunodeficient patients. Due to significant controversy and lack of evidence on the need for the provision of CMV seronegative products in addition to leukodepletion in the following 3 patient groups - intrauterine transfusion, neonates under 28 days of age and in elective transfusion of CMV seronegative pregnant women, NAC recommends to follow local policies.

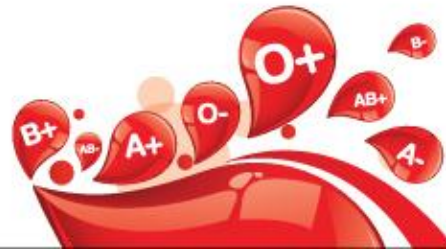
In an effort to promote optimal utilization of CMV seronegative platelets, hospital transfusion committees for the top 50 hospital users are being engaged via BloodBrief. This year, the BloodBrief provides five years of CMV-negative platelet order data specific to your hospital, ranking within the top 50 hospital list (and within peer groups) and anonymized issue data for other hospitals across the country as a reference.

The goal is to continue to heighten hospital awareness of issue trends over time and compared to other hospitals. Results from the BloodBrief effectiveness survey conducted in January 2014 revealed that for 68% of survey respondents the BloodBrief highlighted data/information that was new and it also prompts hospitals to review transfusion practice and blood component demand.

Please do not hesitate to contact me directly with any questions or comments you may have regarding the content of this BloodBrief. Alternately, your local Canadian Blood Services Medical Officer or Hospital Liaison Specialist is available as well.

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Sincerely,

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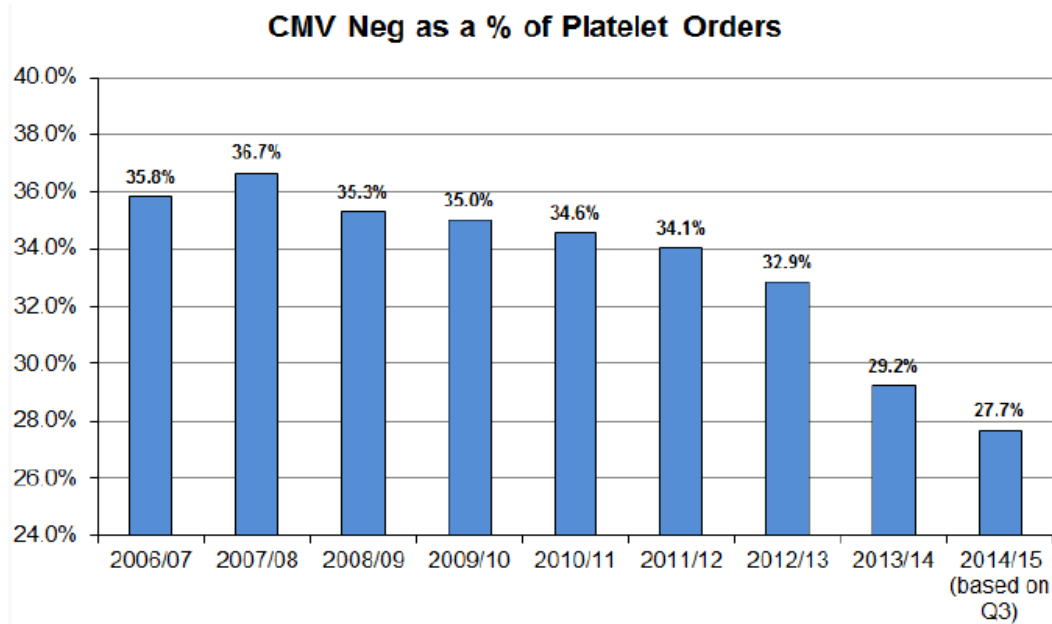


Figure 1: Hospital demand for CMV seronegative platelets.