



Hepatitis – ‘To E or not to E’


Lisa Gibb
Risk Manager
Great Ormond Street Hospital



Disclaimer

- ▶ *Note: It is understood that the material in this presentation is intended for general information only and should not be used in relation to any specific application without independent examination and verification of its applicability and suitability by professionally qualified personnel. Those making use thereof or relying thereon assume all risk and liability arising from such use or reliance.*

Background

- ▶ August 2015 SaBTO assessing the risk of transmission due to increase in prevalence
 - ▶ In December 2015, SaBTO issued a position statement regarding HEV negative components
 - ▶ Hepatitis E is one of five viruses that have a tendency to infect the liver and cause acute viral hepatitis.
- 

Hepatitis E Negative components

So what are the recommendations?



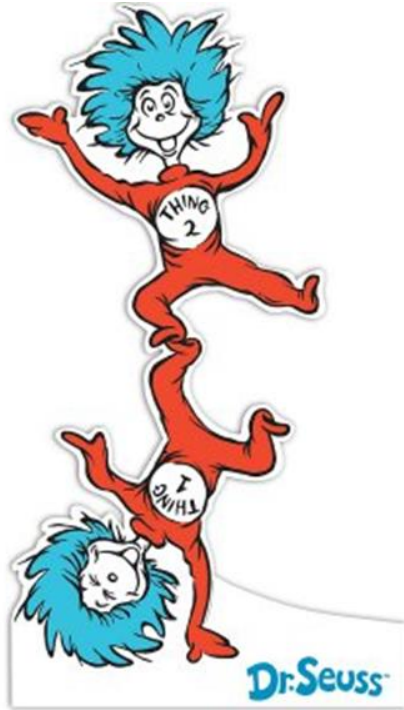
Hepatitis E negative (HEV) requirements

Patients awaiting solid organ transplant (SOT)	from 3 months prior to date of planned elective SOT or from the date of listing for a solid organ transplant
Patients who have had SOT	for as long as the patient is on immune suppression
Patients with acute leukaemia	from diagnosis (unless/until decision made not to proceed with stem cell transplant)
Patients awaiting allogeneic stem cell transplant	from 3 months prior to the date of planned transplant and up to 6 months following transplant, or for as long as the patient is on immune suppression
Extra corporeal procedures	extra-corporeal circulatory support is included if within above indications e.g. dialysis

Additional recommendation

- ▶ Provide advice to allogeneic stem cell transplant and solid organ patients regarding risk of eating poorly-cooked pork or pork products including sausages and offal.


'To E or not to E'




Risk

- ▶ HEV genotype 3 infections are widespread in the English population and in blood donors
- ▶ HEV causes mild infection but can lead to more serious complications in pregnant women and people with weakened immune system and lead to chronic inflammation of the liver and cirrhosis
- ▶ In developed countries, transmission potentially linked to:
 - ▶ eating under-cooked pork and game, processed pork products and some shell fish
 - ▶ transmission via blood components and organ transplantation


Risk Assessment

- ▶ Potential/actual harm to patients – increasing prevalence 1 in 2848 donations (July 2014)
 - ▶ Transmitted through blood, organs and tissues
 - ▶ Diet remains long term risk from eating raw or undercooked meat (particularly pork)
 - ▶ Cost pressure £17.18 per unit
 - ▶ Increased turn around times for screening and accuracy (delays to components)
- 


Implementation

- ▶ Change request and validation
 - ▶ LIMS changes
 - ▶ Stock levels – changes to OBOS
 - ▶ EDN update
 - ▶ Documentation
 - ▶ Communications
 - ▶ Clinical – prevent errors
- 


Laboratory

- ▶ Flagging patients and units
 - ▶ SOP's
 - ▶ Education and training
 - ▶ OBOS
 - ▶ Reporting errors to SHOT/SABRE
- 

Barriers

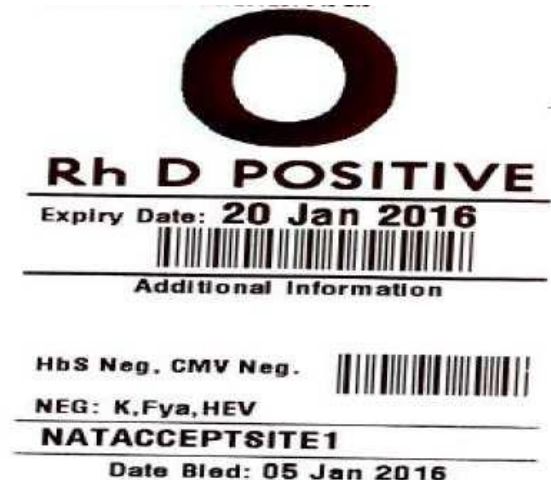
- ▶ NHSBT raised concerns to MHRA
 - ▶ Short timeframe
 - ▶ LIMS challenges
 - ▶ Temporary solutions
 - ▶ Could supply meet demand
- 

LIMS Patient requirements

- ▶ At episode registration need to be able to flag patient with HEV requirement
 - ▶ Needs to remain on patient record indefinitely
 - ▶ Will give warning if non HEV component issued
 - ▶ Requires validation
- 

LIMS Component requirements


- ▶ Vital that units can be booked in as HEV negative on receipt
- ▶ HEV has to be manually entered as no barcode
- ▶ HEV status is not required for Octaplas, MBFFP and MBCryo



Components issued HEV negative as standard

- ▶ Red cells for neonatal use (i.e. 'paedipack'/split pack)
- ▶ Platelets for neonatal use (i.e. 'paedipack'/split pack)
- ▶ Red cells for intrauterine transfusion
- ▶ Platelets for intrauterine transfusion
- ▶ Red cells for large volume transfusion
- ▶ Red cells, irradiated, for exchange transfusion (neonatal)
- ▶ Pooled granulocytes, irradiated
- ▶ Methylene blue fresh frozen plasma (paediatric)
- ▶ Methylene blue fresh frozen plasma (neonatal)
- ▶ Methylene blue cryoprecipitate (pooled)
- ▶ Methylene blue cryoprecipitate (single)

Documentation

- ▶ Update special requirement notification forms
 - ▶ Request logs in lab updated
 - ▶ Request form updated to remind requestors
 - ▶ Register copy to flag special requirement (did not work)
- 

Clinical

- ▶ Special requirement form updated
- ▶ Flagged on LIMS
- ▶ Flagging new/existing patients
- ▶ Added to prescription chart
- ▶ Sticker on register copy
- ▶ Reminder on blood track device
- ▶ Electronic requesting flag
- ▶ Updated policy



Communication

- ▶ Trust newsletter
 - ▶ Blood transfusion newsletter
 - ▶ Intranet news
 - ▶ General emails
 - ▶ Directed emails to affected teams
- 