

COUNCIL OF EUROPE

COMMITTEE OF MINISTERS

RECOMMENDATION No. R (84) 6

OF THE COMMITTEE OF MINISTERS TO MEMBER STATES ON THE PREVENTION OF THE TRANSMISSION OF MALARIA BY BLOOD TRANSFUSION

*(Adopted by the Committee of Ministers on 28 February 1984
at the 367th meeting of the Ministers' Deputies)*

The Committee of Ministers, under the terms of Article 15. *b* of the Statute of the Council of Europe,

Considering that the aim of the Council of Europe is to achieve a greater unity between its members and that this aim may be pursued, *inter alia*, by the adoption of common regulations in the health field ;

Having regard to the Protocol to the European Agreement on the exchange of therapeutic substances of human origin, Part II, by which "the blood shall not be obtained from a human subject (...) who is not, as far as can be ascertained after medical examination and the study of his antecedents, free from disease transmissible by blood transfusion" ;

Recalling its Resolution (78) 29 on harmonisation of legislations of member states relating to the removal, grafting and transplantation of human substances ;

Recalling also its Recommendations No. R (80) 5 concerning blood products for the treatment of haemophiliacs and No. R (81) 14 on preventing the transmission of infectious diseases in the international transfer of blood, its components and derivatives ;

Conscious of the fact that an increasing number of people travel to areas where malaria is endemic, with the consequent risk of contracting this disease ;

Conscious of the need to ensure the best possible protection of both donors and recipients, and of the necessity to promote a policy of optimal use of blood and blood products ;

Considering that appropriate serological techniques are available for the detection of latent malaria,

Recommends to governments of member states that they introduce the following regulations and adopt the following measures for preventing the transmission of malaria by blood transfusion or, if appropriate, invite the relevant blood transfusion centres to do so :

i. Individuals born or brought up in endemic malarious areas can be accepted as blood donors three years after their last visit to an endemic malarious area if the results of an approved immunological test are negative after cessation of the quarantine period ; individuals with a history of malaria can be accepted three years after becoming asymptomatic and cessation of antimalarial therapy if the result of an approved immunological test is negative after the quarantine period.

ii. All other persons who have visited an area where malaria is endemic can be accepted as blood donors six months after returning, if they have had no febrile episodes during or after their stay in the malarious area ; individuals having had such febrile episodes can be accepted if the result of an approved immunological test is negative six months after becoming asymptomatic and cessation of therapy.

iii. The quarantine periods and immunological tests mentioned above may be omitted for donors whose red cells are discarded and whose plasma is used exclusively for fractionation into blood products, thus rendering it safe from the transmission of malaria ; it should be remembered that liquid or frozen untreated plasma and frozen cryoprecipitates cannot be regarded as wholly devoid of the cellular elements of blood and, therefore, of viable malarial parasites.

iv. Since questioning of the donor as to the country (or countries) in which he was born or brought up or has visited is essential for effective detection, every transfusion service should have a map of the endemic zones and an alphabetical list of the countries concerned.