

EXTENSION OF UPPER AGE LIMIT FOR BLOOD DONATION IS SAFE AND HELPS TO SATISFY THE GROWING NEEDS FOR BLOOD PRODUCTS

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Background: The upper age limit for blood donations is still controversial¹. With regard to demographic developments², a higher upper age limit of blood donors seems to be reasonable and even necessary to maintain blood supply³.

Methods: We retrospectively analyzed our safety practice applied to donors between age of 65 to 75 years by reviewing the effectiveness of a specifically designed questionnaire containing 12 additional questions expected to uncover symptoms indicative of severe cardio-/cerebrovascular disorders and complementing the routine selection procedure for blood donation.

Results: Between 2008 to 2009, 11071 donations from 3399 donors aged between 65 and 75 years were collected and 914 refusals of 810 donors were registered. Those refusals included 20 autologous donations. From the 894 refusals we analyzed, the vast majority were due to low Hb or high blood pressure (42.7%), information in the routine questionnaire (42.3%) prohibiting blood donation, pathologic results in physical examination and information obtained in the personal interview (10.5%), explaining 95.5 % of refusals. In 11 cases (1.2%) the reason for refusal could not be evaluated. In only 3,2 % (n=29 donors), the additional questionnaire alone led to the exclusion of the donor. Later on, following additional medical checkup, 9 of those donors were accepted for donation and did not experience any donation related adverse reaction (DRA). 10 donors stopped donating blood at their own request. These donors have been contacted and all of those 10 donors could have donated blood after medical check up but refused because of personal reasons (age, ect). In 6 cases (0.7%) the additional medical check up lead to a reason for definitive exclusion from donating blood. 3 donors have been excluded for cardio vascular reasons, 2 donors because of malignoma and 1 donor because of an severe blunt trauma.

No severe DRAs were reported among the 11071 donations of donors with advanced age, confirming the findings of another study at our institution⁴ showing significantly decreasing risk profile for blood donation with progressively increasing donor age up to 75 years.

Conclusion: Analysis of the data covering 2 years with more than 10 000 donations of donors aging between 65 and 75 shows a) that an additional questionnaire does not efficiently uncover additional health risks and b) that the standard questionnaire, together with a careful yearly medical examination and interview seems to be sufficient to evaluate the risk profile of donors aged between 65 and 75 and c) the upper age limit of donation of 75 years is reasonable and safe and may become important to assure future blood supply.

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