# Asian Meeting for self-sufficiency in blood and blood product based on Voluntary Nonremunerated Donation (VNRD)

#### 24 - 25 November 2014, Phnom Penh, Cambodia

#### Issues and challenges

Universal and timely access to safe blood and blood products and their appropriate use is an essential component of health-care provision. Governments are responsible for national health systems and therefore for the safety, availability and equitable distribution of these products. This responsibility encompasses the establishment of an effective national blood system that is integrated into the national health system, stewardship of donated blood and the blood products derived as a national resource, protecting the health of blood donors and recipients, and ensuring the safety, sufficiency, security and accessibility of supply. However, many countries are still facing challenges in making sufficient supplies of blood and blood products available and sustainable, while also ensuring their quality and safety due to known and emerging threats to public health. Consequently, a large number of patients who require life-saving transfusion therapy still lack access to safe blood and blood products.

#### Global concerns

Concerns about global blood safety and availability were first raised in 1975 when, in resolution WHA58.72, the World Health Assembly (WHA) urged Member States to promote the development of national blood services based on the voluntary non-remunerated blood donation and to take other actions necessary to protect and promote the health of blood donors and of recipients of blood and blood products. Resolution WHA58.13, resolutions of WHO Regional Committees and The Melbourne Declaration on 100% Voluntary Non-Remunerated Donation of Blood and Blood Components further defined the guiding principles and essential elements in the development of sustainable national blood system that could ensure access to safe blood and blood products as part of universal health coverage.

In 2010, the World Health Assembly deliberated on challenges to the availability, safety and quality of blood products and defined self-sufficiency in the supply of safe blood and blood products based on voluntary non-remunerated donation, and the security of that supply, as important national goals to prevent blood shortages and meet the transfusion requirements of the patient population. Resolution WHA63.12 urged Member States "to take all necessary steps to establish, implement and support nationally-coordinated, efficiently-managed and sustainable blood and plasma programmes according to the availability of resources, with the aim of achieving self-sufficiency". In this context, self-sufficiency means that the national needs of patients for safe blood and blood products, as assessed within the framework of the national health system, are met in a timely manner and that patients have equitable access to transfusion services and blood products.

Despite some successes, in many countries self-sufficiency is not yet a reality. Although it has been recognised that the most robust and safe blood system is based on VNRD, it is a reality that family/replacement donation are still practiced in some regions due to lack of development of programme for VNRD. The weakness of family/replacement donation system is that it puts the

responsibility for the provision of blood on individuals rather than on the national health system, and therefore may lead to coercion and hidden payment which often cause undue risks to patients and harm to the donors. In the long term, family/replacement donation systems will be unable to provide safe, sufficient and sustainable national blood supplies to ensure equitable access for all patients. Such systems will inevitably act as a barrier to enabling national blood systems to develop appropriately alongside countries' overall health systems.

#### Towards self-sufficiency in safe blood and blood products

The implementation of a policy for self-sufficiency in blood and blood products generally follows a stepwise progression, from whole blood to blood components for transfusion and further to PDMPs produced by plasma fractionation. Countries may set different timelines in achieving the goals of self-sufficiency in the supply of blood and blood products from VNRD and ensuring the security of that supply, depending on the state of development of their national health system. Countries that have already established policies and systems to achieve self-sufficiency can serve as models by demonstrating the effectiveness of policies, strategies and mechanisms that should be supported and implemented in other countries.

To support countries in implementing resolution WHA63.12, WHO has launched a new initiative on self-sufficiency in safe blood and blood products, based on VNRD. In 2011, WHO organized an expert consultation to analyse factors influencing the global implementation of self-sufficiency, including safety, ethics, security and sustainability of supply, trade and its potential impact on public health, and availability and access for patients. The consultation also provided policy guidance on strategies and mechanisms for achieving self-sufficiency and made recommendations to national health authorities and WHO. These were published in an Expert Consensus Statement on achieving self-sufficiency in safe blood and blood products based on voluntary non-remunerated blood donation. In accordance with these recommendations, WHO commissioned the preparation of a report, Global Blood Safety and Self-Sufficiency for Safe Blood and Blood Products.

### Asian Meeting for self-sufficiency based on Voluntary Non-remunerated Donation

WHO, Cambodian National Blood Transfusion centre and Nagasaki University was collaborating together to expand the participation of youth in voluntary non-remunerated donation since 2011 and had a significant progress through the campaign programme done by students of universities in Phnom Penh. Last year, we could successfully implemented a national campaign among 7 universities in Phnom Penh. To expand the progress of our efforts for voluntary non-remunerated donation, we will organize the meeting for information and experience sharing among ASIAN countries.

#### Objectives of the meeting

- 1. To share experiences on different strategies and mechanisms for working towards self-sufficiency in safe blood and blood products based on VNRD.
- 2. To review evidence, gaps, challenges and trends in donation, safety, ethics, access, sufficiency and self-sufficiency in blood and blood products.
- 3. To identify the need for priority actions to achieve this goal at national, regional and global levels.

### Expected outcomes of the meeting

- 1. Recognition of the roles and responsibilities of national health authorities and national partners in achieving self-sufficiency in safe blood and blood products as part of universal health coverage.
- 2. Elaboration of national systems, strategies, mechanisms and resources that can contribute to the achievement of self-sufficiency in safe blood and blood products based on VNRD.

# Organized by

Jointly organized by National Blood Transfusion Centre, Ministry of Health of Cambodia and Nagasaki University, Japan, Ministry of Health, Labour and Welfare of Japan, WHO Representative Office in Cambodia, Australian Red Cross Blood Service and Japanese Red Cross.

## **Participants**

3 to 5 representatives of each Asian countries including Ministry of Health, Red Cross and related organizations

# Provisional Agenda

### 1st day

8:30 am	Registration
9:00 am	Opening ceremony: (30 min)
	<ul> <li>Welcome remark by Dr Hok Kim Cheng, Director of NBTC, Cambodia</li> <li>Welcome remark by Prof Yasushi Miyazaki, Nagasaki University</li> <li>Remark by Dr Dong II Ahn, WHO Representative in Cambodia</li> <li>Opening speech by Secretary of state, Ministry of Health</li> </ul>
9:30 am	Group photos
9:40 am	"Collaboration between NBTC and Nagasaki University"
(15'presentation and 5' Q&A)	Dr Jun Fukuyoshi, Japan
10:00 am	Coffee break
10:15 am (20' presentation and 10' Q&A)	"Towards self-sufficiency in blood and blood products based on VNRD: Global status, challenges and strategies"
	Dr Sek Mardy, Technical Officer for Transfusion Safety, WHO in Cambodia
10:45 am	"Current Situation of blood safety in Cambodia, Challenges and strategies"
(20' presentation and 10' Q&A / country)	Dr Hok Kim Cheng, NBTC Director
11:15 am	"Voluntary blood donation among youth in university - Cambodian model"
(30' presentation and 15' Q&A)	Representatives of 7 leading universities in Phnom Penh

12:00 pm	Lunch
1:30 pm (15' presentation and 5' Q&A / country)	Case Study in Asian Countries; "Voluntary Blood Donation & Current situation of blood safety in Asia" Malaysia Lao PDR Philippines Thailand Vietnam Australia Japan
3:30pm	Coffee break (15 min)
5:30 pm	Adjourn of the 1st day

# 2<sup>nd</sup> day

8:30 am	Registration
9:00 am	Plenary Discussion of experiences and lessons learned from the experiences
	in Asian countries
	Panellist: Representatives of countries
11:00 am	Coffee break
11:30 am	Future collaboration among Asian countries for self-sufficiency based on
	Voluntary Non-remunerated Donation (VNRD)
	Chaired by Prof Shinjiro Nozaki, Nagasaki University
12:00 pm	Closing address:
	Prof Yasushi Miyazaki
	Dr Hok Kim Cheng,
	High level figure from the MoH
12:30pm	Lunch