

Department of clinical and Laboratory Medicine

BS/FT140

Rev 2

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## Guidance on Requirement for Irradiated Blood

The following patients need irradiated blood components:

1. Patients treated with purine analogue drugs should receive irradiated components indefinitely (treatment for haematological malignancies: AML, CLL, HCL, HL). **Fludarabine, Cladribine Deoxycoformicin (Pentostatin)**
2. For other purine antagonists and new related agents: **Bendamustine (treatment of CLL), Clofarabine (treatment of ALL)**
3. Irradiated blood components should be used after **alemtuzumab (anti-CD52) therapy (MabCampeth)**
4. Aplastic anaemia patients receiving immunosuppressive therapy with ATG (anti-thymocyte globulin) [and/or alemtuzumab].
5. All adults and children with Hodgkin Lymphoma at any stage of the disease.
6. All patients undergoing autologous bone marrow transplant or peripheral blood stem cell transplant
7. Patients undergoing bone marrow or peripheral blood stem cell 'harvesting' for future autologous re-infusion.
8. All recipients of allogeneic haemopoietic stem cell transplantation (SCT).
9. All severe T lymphocyte immunodeficiency syndromes should be considered as indications for irradiation of cellular blood components (Di George Syndrome, CHARGE syndrome).
10. Red cells / platelets transfused in utero to treat alloimmune thrombocytopenia
11. All blood for intrauterine transfusion (IUT), neonatal exchange transfusion (ET), if there has been a previous IUT or if the donation comes from a first or second degree relative.
12. All donations from first or second degree relatives.