Reply to Flanagan "The Code of Ethics of the International Society of Blood Transfusion" [Blood Transfus 2015; 13: 537-8]

Let us use all the good olive wood

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Dear Sir,

We appreciate the importance given to our recent paper "Some reflections on the Code of Ethics of the International Society of Blood Transfusion"[1] (ISBT) as reflected in the commissioning of Flanagan's editorial[2]. However, Flanagan asserts that our position, which has been carefully put together from our different backgrounds in transfusion (AF) and philosophy (CDB), arises from "*Farrugia's close association with the commercial plasma industry*"[2]. Flanagan's assertion may appear logical but is in fact, incorrect. It seems to be rather a case of making an observation on the basis of information that, since the Authors' profiles are clearly stated in the "Conflict of Interests" declaration, is irrelevant to the argument put forward. Other works by Farrugia are referred to in reference[3] (see references 13, 21, 48 within), which we are unable to cite in their entirety due to the space restrictions here. These clearly resonate with the concepts regarding voluntary non-remunerated donation (VNRD) set out in our paper. These papers were published during Farrugia's tenure as a senior public health official in Australia charged with the oversight of a plasma product supply system underpinned by a vigorously defended domestic monopoly, now fortunately defunct, which was ideologically justified by the kind of VNRD principles espoused by Flanagan. This led to Australia trailing behind other developed health systems in the adequate provision of essential plasma products to patients.

So much for the historical record. Like Flanagan, we support the concept of the Nuffield Council around the "Ladder of Altruism", believing that, in human affairs, absolutes are rarely constructive, and we have, indeed, embedded within it our concept of "supplier". We contend that paid plasma donors make an undeniable contribution to the supply of sufficient safe plasma products globally and that this is crucial for the wellbeing of vulnerable patients (Figure 1). As the supply of plasma recovered from blood from VNRDs continues its inexorable decline, both through the decreased use of red cells resulting from Patient Blood Management and from the demographic imbalance between the donors and the users of blood, this is, if anything, increasing in importance. The reality is that, despite the best efforts of heavily subsidised blood systems such as those in Australia and the Netherlands where, despite

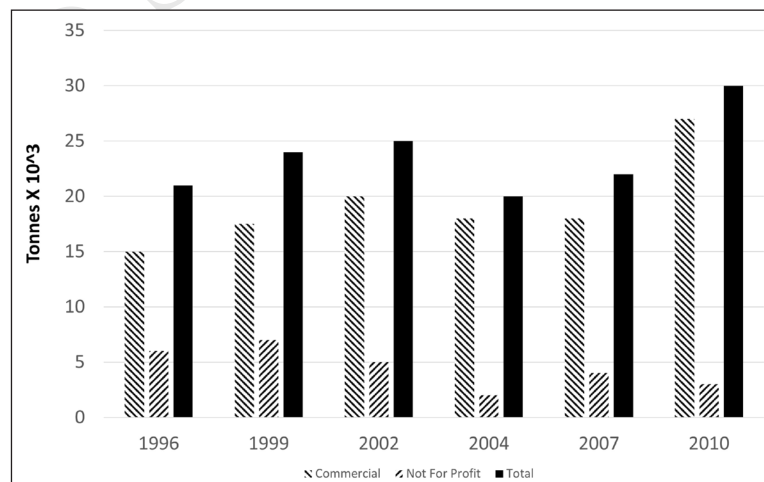

Figure 1 - Global plasma collections.
Data provided by the Market Research Bureau.

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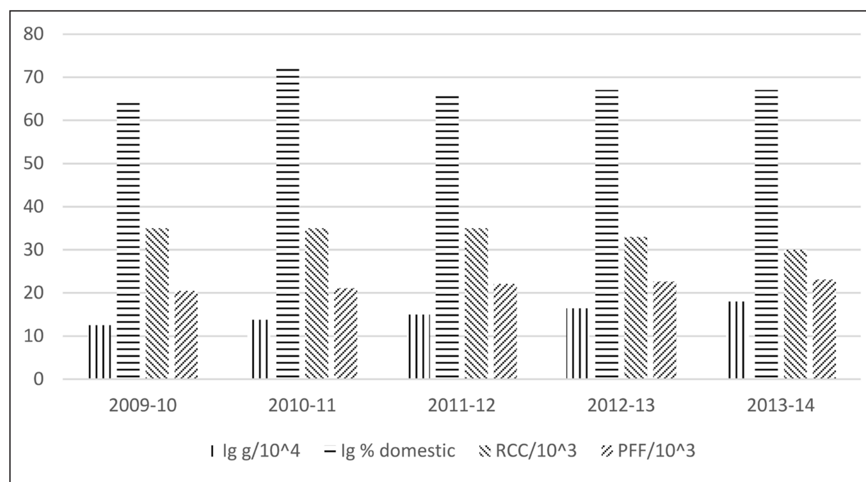

Figure 2 - Trends in plasma collection and product use in Australia showing levels of Ig consumption per 10^4 population, % of Ig use met by domestic plasma, use of red cells (RCC), and collection of plasma for fractionation (PFF).
A continuing increase in PFF will not be sufficient to increase the level of self-sufficiency in Ig, while RCC use is decreasing. Data provided by the Australian National Blood Authority.

a praiseworthy increase in public funding, plasma collection continues to be a fraction that achieved by commercial entities, plasma supply is dependent on blood collection from renumerated donors. Even in settings in which plasma from VNRD has increased, this has not reduced the system's capacity to increase the domestically sourced supply of plasma products relative to the total clinical demand, while the demand for red blood cells, and hence VNRD sourced plasma collection, continues to drop (Figure 2). Excluding products sourced from paid donors will harm patients in any current landscape.

We note and support Flanagan's concerns regarding donor health. We suggest that the protection of donors is mandatory, and includes, but is not restricted to, continued doubts on the collection volumes allowed by the US FDA on all source plasma donors, irrespective of payment status. We also encourage the blood collection sector to continue its efforts in managing the problem of iron deficiency in whole blood donors, especially women. The patient centred issues which we propose as the basis of all aspects of health care policy do not put "*the health, safety and wellbeing of donors (as) subservient to the needs of patients*" since donor health and safety is crucial for a safe and adequate product supply. Flanagan admits that incentives "*should be a source of concern for the proponents of VNRD*". We encourage an open and transparent debate on this issue, and an assessment of the reality beyond the Council of Europe definition espoused by proponents of VNRD. Are we to accept that individuals offered a choice between donation and incarceration are VNRD[4]?! We note that in this instance, the authority responsible for overseeing legislative measures preventing payment did not intervene. We suggest that the appropriate positioning of these incentives is perfectly feasible within the Nuffield Council's "Ladder", but that these may lie uneasily within the purist construct of VNRD.

We applaud Flanagan's commitment to review the ISBT Code with the aim of "*reflect(ing) a consensus view of those in the society and this will be achieved by internal debate and discussion.*" As an ISBT member of 30 years standing, one of us at least looks forward to being involved in this process. But we propose that the issues arising merit a wider debate, and we encourage a process which will "let a thousand flowers bloom" (Mao Tse Tung). It is now four years since the initial statements by Flanagan, and we caution the Society from lapsing into the error cited by the great Italian philosopher, Antonio Gramsci, who described "*the master craftsman who was given a fine trunk of seasoned olive wood with which to carve a statue of Saint Peter; he carved away, a piece here, a piece there, shaped the wood roughly, modified it, corrected it - and ended up with a handle for a cobbler's awl*"[5].

A genuine attempt towards a synthesis should give us, if not a statue of Saint Peter, which might be viewed as denominationally sectarian (although we would hope that the ISBT retains its status as a wider "church"), at least a much better monument. The Society is abundant in rich and seasoned olive wood, and Flanagan may wish to use his influence to convene a debate on this, possibly at a session during the coming ISBT Congress in Dubai. He may well conclude, as we have, that this would be better than singing to our respective choirs, and that embracing plurality, as did the Editor of this Journal

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when he accepted our work, may be the best option, to the benefit of patients, donors and the wider community.

The Authors declare no conflicts of interest.

References

1) Farrugia A, Del Bò C. Some reflections on the Code of Ethics of the International Society of Blood Transfusion. Blood Transfus 2015; **13**: 551-8.
2) Flanagan P. The Code of Ethics of the International Society of Blood Transfusion. Blood Transfus 2015; **13**: 537-8.
3) Farrugia A. The Australian government's review of the plasma fractionation arrangements in Australia. Pharm Policy Law 2007; **9**: 383-402.
4) BBC News. Alabama judge orders defendants to give blood to avoid jail. Available at: http://www.bbc.com/news/world-us-canada-34589198. Accessed on 05/01/2016.
5) Gramsci A. Introduction. In: *Selections from the Prison Notebooks of Antonio Gramsci*. Southampton, UK: The Camelot Press Limited; 1976. p. xciii.

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