

RESOLUTION 4**Protect Canada's Blood Supply by Rejecting For-Profit Plasma Collection**

BE IT RESOLVED THAT the Canadian Nurses Association (CNA) advocate against initiatives to establish new for-profit plasma collection centres in Canada.

Submitted by: Registered Nurses' Association of Ontario

Rationale: During the 1970's and 1980's, more than 2,000 persons in Canada were infected with HIV and as many as 30,000 contracted Hepatitis C through the contaminated blood supply.¹ A comprehensive inquiry into this "nationwide public health calamity"² was led by Mr. Justice Horace Krever and resulted in 50 recommendations³ that helped to transform Canada's blood system into "one of the safest in the world."⁴

Krever identified five basic principles to safeguard Canada's blood supply:

1. "Blood is a public resource."

"A fundamental value that must guide the blood supply system in Canada is that blood is a public resource, given altruistically by persons in Canada for the benefit of other persons in this country. Profit should not be made from the blood that is donated in Canada."⁵

2. "Donors of blood and plasma should not be paid for their donations, except in rare circumstances."

Blood and plasma from unpaid donors are safer than blood and plasma from paid donor. . . persons who receive money in exchange for blood and plasma donations may have an incentive to donate even when they know they should not."⁶

3. "Whole blood, plasma, and platelets must be collected in sufficient quantities in Canada to meet domestic needs for blood components and blood products."

"Self-sufficiency in blood products is a desirable goal. . . . If good donor-screening measures are applied to altruistic donors, it is probable that the quality of the plasma will be superior to that obtained from remunerated donors in countries over which Canadian regulatory authority is diminished."⁷

4. "Canadians should have free and universal access to blood components and blood products."

"In keeping with the principles governing health care in Canada, including universality and accessibility, blood components and blood products that are essential for the health and safety of Canadians should be free to recipients."⁸

5. "Safety of the blood supply system is paramount."

"Preventive action should be taken when there is evidence that a potentially disease-causing agent is or may be blood borne, even when there is no evidence that recipients have been affected. If harm can occur, it should be assumed that it will occur."⁹

The above principles are consistent with the World Health Organization's position that "the safest blood donors are voluntary, non-remunerated blood donors from low-risk populations."¹⁰ In 1975, the World Health Assembly urged member states "to promote the development of national blood services based on voluntary, non-remunerated donation of blood."¹¹ The rationale for this position was based on concerns about increasing commercial blood collection and plasmapheresis projects in developing countries linked to higher risk of disease transmission and harmful consequences to the health of too frequent blood donors. This position has been reaffirmed by the World Health Organization and other groups, including the *Melbourne Declaration* in 2009,¹² the global consultation on 100% voluntary non-remunerated blood donation of blood and blood components,¹³ the 2010 global framework for action¹⁴ and the 2012 expert consensus statement on achieving self-sufficiency in safe blood and blood products, based on voluntary non-remunerated blood donation.¹⁵

In operation for 30 years, the only pay-for-plasma clinic licensed by Health Canada is the Cangene Corporation in Winnipeg.¹⁶ Canadian Blood Services closed down their last dedicated plasma collection centre in April 2012 in Thunder Bay due to a "decline in demand" for plasma.¹⁷ In November 2012, Canadian Plasma Resources (CPR) submitted an application to Health Canada as a private, for-profit company to operate pay-for-plasma clinics in Ontario.¹⁸ Health Canada is responsible for regulating the safety of the national blood supply, but provinces/territories have the ultimate authority to prohibit paying for plasma.¹⁹ On March 20, 2014, Ontario Health Minister Deb Matthews introduced Bill 178, the Voluntary Blood Donations Act,²⁰ to ban pay-for-plasma in the province and wrote to her provincial/territorial counterparts urging them to do the same.²¹ Québec is currently the only province to outlaw the practice. The dissolving of the 40th Parliament of Ontario caused Bill 178 to die on the Order Paper. Because of Bill 178, CPR threatened legal action against the province to recover the nearly \$7.5 million it had already invested in setting up two Toronto and one Hamilton facilities to collect plasma,²² even though a final decision on CPR's application from Health Canada is still pending.²³

Relevance to CNA's mission and goals: This resolution will advance CNA's mission "to improve health outcomes in a publicly funded, not-for-profit health-care system." This is an opportunity for the nursing profession to demonstrate leadership in protecting the Canadian health system from market forces that would undermine public safety in the pursuit of profit. It meets the goal of shaping and advocating for healthy public policy provincially/territorially, nationally and internationally.

Key stakeholders: On March 25, 2013, the Canadian Association of Nurses in AIDS Care, Canadian Association of Nurses in Oncology, Canadian Council of Cardiovascular Nurses, and the Canadian Nurses Association sent a letter of concern on this issue to then-federal Minister of Health, Leona Aglukkaq.²⁴ The Canadian Nurses Association was one of 16 groups to participate in a roundtable discussion on the payment of plasma donors in Canada on April 10, 2013, hosted by Health Canada.^{25,26} On July 25, 2013, the Registered Nurses' Association of Ontario urged Health Canada not to grant approval for any new paid-donor plasma or blood clinics.²⁷ The Canadian Federation of Nurses' Unions,²⁸ the Ontario Nurses' Association,²⁹ Canadian Doctors for Medicare,³⁰ Canadian Health Coalition,³¹ Council of Canadians,³² and a host of civil society, labour, and health professionals groups are all on record against collecting plasma for profit.³³

Estimated resources required or expected outcomes: With a strong response by the nursing

community working with other health professionals, the labour movement, civil society coalitions, and especially the public, blood will be perceived as a treasured public resource. Canada will become a leader in meeting its domestic needs for blood services based on the voluntary, non-remunerated donation of blood.

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