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*Note for the Editors:* Further information is available on the internet site: [www.edqm.eu](http://www.edqm.eu)

## **OPTIMAL CLINICAL USE OF BLOOD COMPONENTS, 24-25 APRIL 2009, WILDBAD KREUTH, BAVARIA, GERMANY**

110 experts representing all relevant areas involved in transfusion medicine from 38 countries including Russia, Turkey and the United States of America (USA) met in Wildbad Kreuth, Bavaria, Germany on 24-25 April 2009. Experts from the clinical areas considered as main users of blood and blood components such as anaesthesiology, surgery and haematology from a number of different countries were speakers and moderators of lively and interesting debates.

Representatives of blood transfusion centres and blood banks as well as representatives from the European Manufacturers Associations of plasma derivatives and from the European patients association for haemophilia were also participating.

The symposium was aimed at exchanging view points and gathering information in the field of therapeutical application of transfusion medicine in order to make recommendations on how to optimise the clinical use of blood and blood components based on clinical evidence.

After key lectures and specific presentations describing national experiences, the symposium was structured in four workshops:

1. Blood products: red cells, platelets, fresh frozen plasma, albumin
2. Clotting factor concentrates and haemophilia treatment
3. Quality management in clinical use
4. Efficacy in terms of outcome including Health Technology Assessment and cost-effectiveness.

Discussions were based on an enquiry which had been performed prior to the symposium. The questionnaire took into account the outcome of a meeting held in 1999 (Kreuth 1999) under the German Presidency of the European Union which was a first attempt to reach common recommendations in the field of clinical use of blood and blood products.

At the present symposium the previous recommendations as well as their state of implementation were revisited and revised where necessary. In addition, new ideas, concepts and proposals were developed which all shall help decision makers both at the national and the European level to develop appropriate work programmes and regularly assess their achievements. The proceedings of the symposium will be publicly available.

The symposium was co-organised with the German Regulatory Agency for the control, evaluation and supervision of biological medicines (Paul Ehrlich Institute) and the University of Munich – LMU/Klinikum, Department of Transfusionmedicine and Haemostaseology.

The European Pharmacopoeia<sup>1</sup> and the EDQM (a Directorate of the Council of Europe notably in charge of the secretariat of the European Pharmacopoeia and the Steering Committee of transfusion medicines and its subordinated working groups) have a mission to protect and promote public and animal health, through the elaboration of quality standards of medicines for human and veterinary use, standards, policies and recommendations on health care.

Medicines need to be safe, efficacious and of good quality in order to produce the expected therapeutic benefit. The EDQM works closely with its international and European partners to strengthen measures in order to ensure that substandard or counterfeit medicines do not reach the marketplace.

The EDQM's networks collaborate on a daily basis with all the authorities involved in the standardisation, regulation and control of medicines for human and veterinary use. The EDQM is also active in the fields of blood transfusion, organ transplantation, the legal classification of medicines and the co-ordination, of the fight against falsification and counterfeit of medical products.

***A political organisation set up in 1949, the Council of Europe works to promote democracy and human rights continent-wide. It also develops common responses to social, cultural and legal challenges in its 47 member states.***

**Contact:** Caroline Larsen Le-Tarnec

Public Relations Division, EDQM, Council of Europe

Tel.: +33 (0) 3 88 41 28 15 E-mail: [caroline.letarnec@edqm.eu](mailto:caroline.letarnec@edqm.eu)

<sup>1</sup>There are currently thirty-seven members of the European Pharmacopoeia Commission: *Austria, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, the Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Montenegro, Netherlands, Norway, Poland, Portugal, Romania, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, the former Yugoslav Republic of Macedonia, Turkey, United Kingdom and the European Union and twenty-three observers: The World Health Organisation (WHO); 6 member states of the Council of Europe: Albania, Armenia, Georgia, Moldova, Russian Federation and Ukraine; 16 other countries in the world: Algeria, Argentina, Australia, Brazil, Canada, China, Israel, Madagascar, Malaysia, Morocco, Republic of Belarus, Republic of Kazakhstan, Senegal, Syria, Tunisia, United States of America.*