

# COUNCIL OF EUROPE

## COMMITTEE OF MINISTERS

RECOMMENDATION No. R (85) 12

OF THE COMMITTEE OF MINISTERS TO MEMBER STATES

ON THE SCREENING OF BLOOD DONORS  
FOR THE PRESENCE OF AIDS<sup>1</sup> MARKERS

*(Adopted by the Committee of Ministers on 13 September 1985  
at the 388th meeting of the Ministers' Deputies)*

The Committee of Ministers, under the terms of Article 15.b of the Statute of the Council of Europe,

Considering that the aim of the Council of Europe is to achieve greater unity between its members and that this aim may be pursued, *inter alia*, by the adoption of common rules in the health field;

Considering the growing importance of a new and severe health hazard, Acquired Immune Deficiency Syndrome (AIDS), that is caused by an infectious agent transmissible by blood and blood products;

Recalling Recommendation No. R (80) 5, concerning blood products for the treatment of haemophiliacs, with special reference to Section II of the operative part, Recommendation No. R (81) 14 on preventing the transmission of infectious diseases in the international transfer of blood, its components and derivatives, Recommendation No. R (84) 6 on the prevention of the transmission of malaria by blood transfusion, and in particular Recommendation No. R (83) 8 on preventing the possible transmission of Acquired Immune Deficiency Syndrome (AIDS) from affected blood donors to patients receiving blood and blood products;

Having regard to Assembly Recommendation 985 (1984) on the supply and utilisation of human blood and blood products;

Recalling again the basic principles to minimise the hazard of transmissible infectious diseases by blood or blood products drawn up in the context of the work of the Committee of experts on blood transfusion and immunohaematology:

1. to expose the recipient to a minimum number of donations of blood when the transfusion is of cellular and coagulation factor products,
2. to achieve national self-sufficiency in the production of coagulation factor products from voluntary, non-remunerated donors,
3. to avoid the importation of blood plasma and coagulation factor products from countries where the incidence of AIDS is increasing, unless these products have been tested for AIDS markers or have undergone virus inactivation;

Noting that most member states are taking steps to introduce screening techniques aimed at identifying the presence of serological markers of AIDS in blood donors;

Aware of the important ethical, medical and social implications of such screening,

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1. Acquired Immune Deficiency Syndrome.

Recommends the governments of member states :

- I. to adapt the various elements of the strategies against AIDS to the national situation ;
- II. where they are considering, in the light of the national situation, the introduction of screening procedures for the presence of AIDS markers in blood donors, to take all the necessary steps and measures to ensure that :
  - donors are made aware that their blood may be tested for the presence of AIDS markers ;
  - if a reliable method of evaluating the specificity of the screening test is available, this is applied to confirm a positive result ;
  - competent counselling facilities are available to any donor who is informed of abnormal serological findings ;
- III. to arrange for alternative sites for such testing to be established in advance of the commencement of testing in blood transfusion services, in order to avoid attracting persons to blood donation sessions whose motive is to be tested for the presence of serological markers ;
- IV. in co-operation with the appropriate health authorities, ethical committees, medical and donor associations and blood transfusion experts, to confront and, as far as possible, resolve the wider ethical, social and medical issues raised by the screening of donors for the presence of serological markers of AIDS, particularly whether, when and in what way donors are to be informed of abnormal serological findings ;
- V. to establish a programme for the production of blood products, in particular coagulation factors for the treatment of haemophilia, which includes suitable procedures for the inactivation of the responsible virus ;
- VI. to pursue rapid and full implementation of Recommendations No. R (80) 5, No. R (81) 14 and No. R (83) 8 and, notwithstanding the increasing use of screening techniques, to continue to provide all blood donors with information about the syndrome such as that appearing in the appendix to Recommendation No. R (83) 8 so that those in risk groups will refrain from donating.