

“Cash-for-blood” companies still thriving in US

Milan Korcok

In brief

UNLIKE CANADA’S VOLUNTARY BLOOD-COLLECTION SYSTEM, the US system routinely makes use of donations from paid donors. Milan Korcok reports that this is starting to cause some concern, since infection levels tend to be higher among those who are paid for their blood.

En bref

CONTRAIREMENT AU SYSTÈME DE COLLECTE DE SANG FONDÉ SUR LE BÉNÉVOLAT AU CANADA, le système américain utilise régulièrement des dons rémunérés. Milan Korcok signale que cette pratique commence à préoccuper puisque les taux d’infection ont tendance à être plus élevés chez les donneurs qui vendent leur sang.

The foot-high letters pasted on the window — INSTANT CASH WHEN YOU DONATE BLOOD — are hard to miss as you drive through a certain section of Fort Lauderdale, Fla. And in this part of Fort Lauderdale, you keep your car moving.

The area is best described as seedy, for even in daylight prostitutes patrol the streets. If you really are desperate enough to stop for gas, be prepared to pay before you approach the pumps.

And if you call this blood bank, which also advertises in the part-time-employment section of the local newspaper, you’ll receive the no-nonsense facts: you can donate every 2 months, and you’ll get paid \$10. What more do you need to know?

That blood bank is certainly not typical of America’s high-tech blood-collection system, but it is debatable whether collection services like this will ever die out, given their appeal to drug addicts, prostitutes, down-and-outers and others who can use a little extra money. And where does this blood end up? Because federal law in the US requires that blood drawn from paid donors be labelled “paid,” it’s not going to be used by local hospitals. But somebody is buying it.

Before the age of AIDS, paying for whole blood was common throughout the US, but today virtually all of the nation’s supply of whole blood for transfusions is donated by volunteers. However, paying for blood or its components still goes on, and it is not a benign issue for those who draw from, regulate or profit from America’s blood supplies. Some 14 million units of whole blood are donated freely by American volunteers each year, but some 13 million units of plasma are also drawn, many from paid donors.

(Source plasma is the noncellular fluid portion of blood that is used as a raw material in the production of plasma-based products. These are used in the diagnosis and treatment of conditions such as immune disorders and hemophilia, to treat burns and trauma-related injuries, and to provide protection against hepatitis, RH disease and tetanus.)

The process of removing only plasma from a donor’s bloodstream (plasma-pheresis) involves withdrawing about 175 mL of whole blood, mixing it with an anticoagulant designed to prevent clotting, centrifuging the blood to separate the plasma and then reinfusing the donor’s red cells. And it is a growth industry.

In June 1997, Bernice Steinhardt of the US Department of Health and Human



Features

Chroniques

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Services told Congress that “although the US blood supply is safer . . . than at any time in recent history . . . nevertheless, risk remains.” She noted that 8 of every 10 000 units donated by unpaid volunteers carry some form of potentially serious risk for the recipient, “including allergic reactions, bacterial reactions to incompatible blood, and viruses.” However, when blood products are provided by paid donors they carry a far higher risk of viral infectivity, and these account for about half of all donations in the US.

A 1995 study by the California Department of Health Services revealed that the confirmed HIV-infection rates per 100 000 commercial plasma donations in that state are sometimes 4 or 5 times higher than the rates for volunteer donations of whole blood. Moreover, because of the way plasma is obtained and fractionated — a single donor can give as often as twice a week, and a lone infectious donor can contaminate an entire pool of as many as 60 000 units — even a single donation slipping through the screen can do enormous damage.

“While most commercial plasma donors are healthy and free of disease,” says Steinhardt, “monetary incentives such as those offered by commercial plasma-collection centres may be tantalizing to some of those who are known to be at risk for infectious diseases, such as intravenous drug users and prostitutes.”

College students are being tantalized too. Centeon, which bills itself as “the world’s largest fully integrated plasma collection company,” runs frequent advertisements in the *Iowa State Daily*, offering up to \$30 for a plasma donation. A recent article in that newspaper quoted several students who donate twice a week, several times a year. “If you’re a broke college student, it’s worth it. . . . It takes only an hour and you can watch TV or read magazines or do homework. In an hour you can make what you do at other jobs [in a day].”

The story is the same in Kansas, where some 40 state university students in the college town of Manhattan routinely make up to \$30 a week donating plasma at the Manhattan Biomedical Center. In North Carolina, Sera-Tec Biologicals solicits donors, including many students, via the Internet. The company offers \$15 to \$25 if 2 donations are made in the same week, \$20 to 25\$ for new or returning donors, new donor bonuses and \$50 bonuses to donors who have mononucleosis, because their blood is needed for research purposes.

There are also group incentives to encourage donors to bring friends and, of course, parking tickets are validated. Sera-Tec uses the same inducements in many of its 50 locations throughout the US.

According to the Food and Drug Administration (FDA), more than 1000 federally licensed donor centres in the US collect, process and distribute blood and blood products across state lines, and there are another 2500 that are not involved in interstate commerce. The latter companies do not require a federal licence, but are subject to FDA investigation; the FDA has been severely criticized for poor regulation and inconsistent and sporadic inspections.

One common recommendation for improving the collection system is to curb exposure to infection by reducing the number of donors contributing to each plasma pool; a pool is the plasma donations that are mixed together for subsequent refinement into purified coagulants, immunoglobulins, albumin and other products, and the larger the number of donors, the greater the risk to the entire pool.

In recent testimony, Dr. Glenn Pierce, a hemophiliac and former president of the National Hemophilia Foundation (NHF), said the “NHF was both surprised and troubled to learn that there are no upper limits on the number of donors contributing to plasma pools.”

He said that the NHF had been led to believe that manufacturers were voluntarily observing limits of about 15 000 paid donors per pool, compared with 60 000 volunteer donors. In fact, some manufacturers place plasma from 80 000 to 100 000 paid donors in a single pool.

There is an intricate system of safeguards in place to secure the US blood supply: donor screening, deferral registries that list unsuitable donors, viral testing, quarantining of blood until its safety is established, and monitoring of facilities and investigation of adverse incidents. Still, fear remains about the “window” during which HIV infection may be present but antibodies to it are not yet detectable; this is still considered the leading reason why infected blood enters the blood supply.

With newspaper ads and sophisticated Internet campaigns by commercial collection centres offering to pay \$15 to \$20 for donations (twice a week), are many prospective donors being taken out of the volunteer donor pool? Experts think so. One Red Cross official said that because some centres pay donors, the Red Cross can’t fully meet hospitals’ needs.

Giving blood in the US used to be simple and uncomplicated. I have given it and I have received it. Like most Americans, I have always considered blood a precious gift, and a priceless one to those who need it.

Unfortunately, “blood money” has become a very influential variable in the land of the free.‡