



May 16, 2023

Representative Stephanie Klick
Chair
Public Health Committee
Texas House of Representatives
Room E2.504
P.O. Box 2910
Austin, TX 78768

Dear Representative Klick:

America's Blood Centers is expressing strong opposition to Texas Senate Bill 1584 because it is medically unnecessary, would interfere with high-quality medical care, would disrupt community volunteer donations, and would increase healthcare costs in Texas.

America's Blood Centers is the national organization bringing together community-based, independent blood centers. Our member organizations provide close to 60 percent of the U.S. blood supply to serve more than 150 million people, including providing blood to patients in Texas.

The blood supply in the United States is exceptionally safe due to multiple safeguards, including donor screening and extensive infectious disease testing. Volunteer blood donations are the foundation of the U.S. blood supply. More than 10.7M red blood cells are transfused in the United States every year and just 0.1% are medically necessary directed or autologous donations¹. This model supports patient needs, including those with complex blood type matching requirements, as well as the overall availability of blood for any patient in need.

It is a common misconception that directed donations are inherently safer than community volunteer blood donations². Indeed, studies demonstrate that more widespread use of directed donations is not medically justified and may pose risks to the blood recipient. These risks include higher rates of transfusion-transmitted infection (TTI) markers than blood donations from general donors, likely because directed donors tend to be first-time donors who have not previously been screened, and/or may feel pressured to donate even knowing that they are not eligible. Also, directed donations from family members carry a risk of transfusion associated

¹ Mowla S, Sapiano M, [Jones J](#), Berger J, and [Basavaraju S](#). Supplemental Findings of the 2019 National Blood Collection and Utilization Survey. *Transfusion*. 2021; 61(S2): S1 – S43.

² Wadge G, Zhang J, Seal J, Cooper E, and Alquist C. Directed Donors: Special Circumstances and Review for Contemporary Clinical Practice. *The Ochsner Journal*. 2021; 21(3): 281 – 286.

graft versus-host disease and must undergo irradiation, adding both complexity and expense. Directed donation from a family member also increases the risk that a patient will create antibodies which would substantially complicate future bone marrow or organ donation, if needed.

In the rare instance that a medically warranted directed donation is needed, blood centers have existing processes to qualify such requests in concert with patients' physicians, including ensuring patients are informed of the potential safety and health risks that can occur from directed donations. It is critical that public policy upholds clinically appropriate utilization of blood products that promote patient and donor safety as well as the overall availability of the nation's blood supply.

For the above reasons, America's Blood Centers urges the Public Health Committee to table SB 1584. Please direct any follow up and/or questions to Diane Calmus, Senior Director, Federal Government Affairs at dcalmus@americasblood.org.

Sincerely,

A handwritten signature in cursive script that reads "Kate Fry". The signature is written in black ink and is positioned above the typed name and title.

Kate Fry, MBA, CAE
Chief Executive Officer