

# Plasma Collection & Plasma Therapies: **Did you KNOW??**



Your blood contains a yellow liquid packed with lifesaving proteins - called *plasma* - which helps your blood clot after an injury and allows your body to defend against infections.



Plasma is used to create medicines which are used to treat people with rare diseases.  
**Donating plasma saves lives!**

Globally, approximately **76%** of plasma donors are compensated for their time and effort.



**It takes more than:**

**1200** plasma donations to treat 1 patient with hemophilia for 1 year.



**130** plasma donations to treat 1 patient with Primary Immune Deficiency for 1 year.



**900** plasma donations to treat 1 Alpha-1 patient for 1 year.



Canadian Blood Services and Héma-Québec only meet **17%** of the demand for plasma for PDMPs for Canadian patients through voluntary donations. We purchase the rest from the United States, where plasma is collected from compensated donors.



Canadian demand for Immune Globulin, a plasma-derived medicinal product (PDMP), is growing by 6-10% annually.



Thanks to rigorous donor screening, testing of donations, and viral clearance procedures, PDMPs have a perfect safety record with regard to pathogen transmission for the last 25 years.



Network of  
Rare Blood Disorder  
Organizations

The NRBDO is a pan Canadian coalition of not-for-profit organizations representing people with rare blood disorders and/or people with a chronic condition who are recipients of blood or blood products or their alternatives.

[www.nrbdo.ca](http://www.nrbdo.ca)

# Plasma Collection & Plasma Therapies: **Myths & FACTS.**

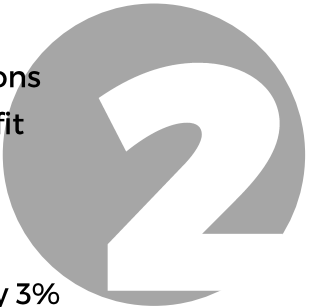


**MYTH:** Plasma-derived medicinal products (PDMPs) from compensated donors are less safe than PDMPs from non-compensated donors.

**FACT:** According to Health Canada, the U.S. FDA, and the European Medicines Agency, there has not been a single case of pathogen transmission in the last 25 years. This is because of the rigorous testing, screening and viral reduction procedures applied to all products, whether the donors are compensated or not.

**MYTH:** Compensating plasma donors threatens voluntary blood collection.

**FACT:** The U.S. blood system is able to meet their needs for whole blood donations for the supply of fresh blood components through a robust voluntary, not-for-profit donation system, similar to Canada's, while simultaneously supplying 70% of the world's plasma supply through a paid collection system. There is currently no published evidence that compensated plasma donation is "crowding out" whole blood donations to Canadian Blood Services. Moreover, only 3% of eligible Canadians currently donate blood or plasma.



**MYTH:** If we compensate Canadian plasma donors, it will lead to patients paying for blood transfusions in hospital, and privatized healthcare.

**FACT:** The donation of whole blood and other fresh components such as platelets, collected by not-for-profit blood establishments such as Canadian Blood Services (CBS) and Héma-Québec, must remain voluntary and non-compensated.

However, plasma-derived products are manufactured by for-profit multi-national corporations, and sold to the provinces and territories, just like any other drug. The manufacture and sale of plasma products is almost entirely a private, for-profit operation, completely outside our public health system, with plasma being the main raw material. The compensated collection of this ingredient does not put our public health care system in peril, nor does it open the door to patients paying for either fresh blood components or PDMPs, which today are supplied entirely free of charge.

**MYTH:** It is unethical to pay Canadians to donate plasma.

**FACT:** The Canadian blood system already indirectly pays American donors for 83% of our plasma needs. Why then is it unethical to pay Canadians?

