Document 1
Rothwell, Erin W; Anderson, Rebecca A; Burbank, Matthew J; Goldenberg, Aaron J; Lewis, Michelle Huckaby; Stark, Louisa A; Wong, Bob; Botkin, Jeffrey R

**Concerns of newborn blood screening advisory committee members regarding storage and use of residual newborn screening blood spots.**
American journal of public health 2011 Nov; 101(11): 2111-6

*Abstract:* We assessed attitudes and opinions of members of newborn blood screening (NBS) advisory committees regarding the storage and secondary research use of residual specimens from NBS.

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Document 2
Leach Bennett, Judie; Blajchman, Morris A; Delage, Gilles; Fearon, Margaret; Devine, Dana

**Proceedings of a consensus conference: Risk-Based Decision Making for Blood Safety.**

*Abstract:* Blood safety decision making has become increasingly complex, and a framework for risk-based decision making is, thus, needed. The purpose of this consensus conference was to bring together international experts in an effort to develop the foundations for such a framework. These proceedings are described with a view to making available to the transfusion medicine community the considerable amount of information and insight that was presented and that emerged through debate by the experts, panel members, and delegates.

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Document 3
Gohel, M S; Bulbulia, R A; Poskitt, K R; Whyman, M R

**Avoiding blood transfusion in surgical patients (including Jehovah’s Witnesses).**

Georgetown users check [Georgetown Journal Finder](#) for access to full text

Document 4
Bönig, H; Müller, M

**Donor safety comes first.**
Vox sanguinis 2011 Aug; 101(2): 175

Georgetown users check [Georgetown Journal Finder](#) for access to full text
Document 5
Rossi, F; Perry, R; de Wit, J; Evers, T; Folléa, G
How expanding voluntary non-remunerated blood donations would benefit patients, donors and healthcare systems?
Vox sanguinis 2011 Aug; 101(2): 176-7

Document 6
Petrini, Carlo; Farisco, Michele
Informed consent for cord blood donation. A theoretical and empirical study.
Blood transfusion = Trasfusione del sangue 2011 Jul; 9(3): 292-300
Abstract: Umbilical cord blood (CB) banking and therapeutic use raise several ethical issues: medical indications, legal framework, public versus private biobanks, autologous versus allogeneic use, ownership, commercialisation, quality assurance and many others. Surrogate informed consent is one of the most notable controversial ethical issues. The aim of this study was to analyse and compare informed consent forms for CB collection, storage and use in the 18 accredited biobanks of the Italian Network.

Document 7
Halkoaho, A; Pietilä, A-M; Vähäkangas, K
Ethical aspects in placental perfusion studies: views of the researchers.
Placenta 2011 Jul; 32(7): 511-5
Abstract: Within the EU-project NewGeneris human placental perfusion has been used for predicting fetal exposure to food carcinogens. Within the work package of ethical aspects of the research, we studied opinions of the researchers (n = 23) who carried out perfusions of human placenta. Data were collected by focus group interviews (n = 12) and an open-ended questionnaire (n =19 of which 8 were also attending the group session) from scientists representing 9 different nationalities. Both types of data were analysed together thematically and with data triangulation. Studied researchers considered communication between all stakeholders extremely important. Good communication was considered a prerequisite for the recruitment of mothers to donate the placenta, as well as for the process of getting the informed consent. Voluntariness, confidentiality and societal meaning were mentioned as important by all studied researchers. Educating the hospital personnel was regarded as essential in order to provide the best possible information to the mothers. The researchers also pointed out that cultural aspects should be respected, and that in Western thinking placenta is mostly considered as waste. Some researchers suggested that current guidelines and processes for obtaining informed consent should be reviewed also from a cultural perspective. With the development of biobanks, the use of human tissues, including placenta will most probably increase in the future, and the awareness of ethical considerations both in legislation and in practice need support. Thus, continuous effort for better research ethics is essential and requires research on research ethics.

Document 8
Fitzgerald, Mark C; Chan, Julie Y; Ross, Andrew W; Liew, Susan M; Butt, Warwick W; Baguley, David; Salem, Hatem H; Russ, Matthias K; Deasy, Conor; Martin, Katherine E; Mathew, Joseph K; Rosenfeld, Jeffrey V
A synthetic haemoglobin-based oxygen carrier and the reversal of cardiac hypoxia secondary to severe anaemia following trauma.
The Medical journal of Australia 2011 May 2; 194(9): 471-3
Abstract: We report a case of compassionate use of a haemoglobin-based oxygen carrier in a severely injured Jehovah's Witness patient, for whom survival was considered unlikely. Severe anaemia and cardiac hypoxia were reversed after slow infusion of this agent. No vasoactive side effects were associated with the treatment, possibly
due to the slow infusion, and the patient survived.

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**Document 9**

Weiskopf, Richard B

**Blood samples, repositories, and ethics.**

Transfusion 2011 May; 51(5): 1123-5; author reply 1125

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**Document 10**

Emmert, Maximilian Y; Salzberg, Sacha P; Theusinger, Oliver M; Felix, Christian; Plass, Andre; Hoerstrup, Simon P; Falk, Volkmar; Gruenenfelder, Juerg

**How good patient blood management leads to excellent outcomes in Jehovah's witness patients undergoing cardiac surgery.**

Interactive cardiovascular and thoracic surgery 2011 Feb; 12(2): 183-8

**Abstract:** The refusal of blood products makes open-heart surgery in Jehovah's witnesses (JW) an ethical challenge. We demonstrate how patient blood management strategies lead to excellent surgical outcomes.

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**Document 11**

Vamvakas, E C

**The ethics of wasting the donor's gift of buffy coat.**

Vox sanguinis 2011 Feb; 100(2): 256-7; author reply 258-9

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**Document 12**

Shin, Sue; Yoon, Jong Hyun; Lee, Hye Ryun; Kim, Byoung Jae; Roh, Eun Youn

**Perspectives of potential donors on cord blood and cord blood cryopreservation: a survey of highly educated, pregnant Korean women receiving active prenatal care.**

Transfusion 2011 Feb; 51(2): 277-83

**Abstract:** The aim of the study was to investigate the knowledge of cord blood (CB) and attitudes toward CB banking among high-potential donors (i.e., well-educated pregnant Koreans) because their voluntary donation is indispensable to the success of unrelated CB transplantation.

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**Document 13**

Boo, Michael; van Walraven, Suzanna M; Chapman, Jeremy; Lindberg, Brian; Schmidt, Alexander H; Shaw, Bronwen E; Switzer, Galen E; Yang, Edward; Egeland, Torstein; World Marrow Donor Association

**Remuneration of hematopoietic stem cell donors: principles and perspective of the World Marrow Donor Association.**


**Abstract:** Hematopoietic stem cell transplantation is a curative procedure for life-threatening hematologic diseases.
Donation of hematopoietic stem cells (HSCs) from an unrelated donor, frequently residing in another country, may be the only option for 70% of those in need of unrelated hematopoietic stem cell transplantation. To maximize the opportunity to find the best available donor, individual donor registries collaborate internationally. To provide homogeneity of practice among registries, the World Marrow Donor Association (WMDA) sets standards against which registries are accredited and provides guidance and regulations about unrelated donor safety and care. A basic tenet of the donor registries is that unrelated HSC donation is an altruistic act; nonpayment of donors is entrenched in the WMDA standards and in international practice. In the United States, the prohibition against remuneration of donors has recently been challenged. Here, we describe the reasons that the WMDA continues to believe that HSC donors should not be paid because of ethical concerns raised by remuneration, potential to damage the public will to act altruistically, the potential for coercion and exploitation of donors, increased risk to patients, harm to local transplantation programs and international stem cell exchange, and the possibility of benefiting some patients while disadvantaging others.
Document 18

Callum, Jeannie L; Rizoli, Sandro; Pendergrast, Jacob

Rapid laboratory testing for trauma patients: where a perfect result may not be in the best interests of the patient.

Transfusion 2010 Dec; 50(12): 2529-32

Georgetown users check Georgetown Journal Finder for access to full text

Document 19

Zielinski, Martin D; Park, Myung S; Jenkins, Donald

Appropriate evidence-based practice guidelines for plasma transfusion would include a high ratio of plasma to red blood cells based on the available data.

Transfusion 2010 Dec; 50(12): 2762; author reply 2763-4

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Document 20

Casas-Martínez, María de la Luz

[Bioethical analysis of pregnancy in Jehovah Witnesess and transfusion refusal]. = Análisis bioético del embarazo en testigos de jehová y el rechazo transfusional.

Cuadernos de bioética : revista oficial de la Asociación Española de Bioética y Ética Médica 2010 Sep-Dec; 21(73): 327-39

Abstract: In Mexico, Jehovah's witnesses present letters to their doctors that exonerate them in case of a patient's decease if hemotherapy was not applied. Although those letters have no legal validity in Mexico, this topic is a hot spot for debate, especially when dealing with competent adults. Bibliography exists, both pro and against this posture, but, an empty gap is observed in the case of pregnancy. With pregnancy, we doctors, find ourselves, both in the medical and ethical area, upon two patients: mother and son. Doctors have the same therapeutical responsibilities upon them. What alternatives would be presented in our country if the Jehovah's Witness transfusional negative was accepted, and we had a pregnant patient in the need of one? Juridically, the acceptance of an adult Jehovah's Witness thesis is included under the acceptance of moral objection, however: 1) Moral objection is not a general right, but exceptional, with a justified reason. 2) It cannot produce any possible harm to third parties. The conflict of interest mother/fetus in hemotherapeutical urgencies can be tackled under three possibilities: a) Total respect to mother's autonomy. Result: high death possibility for both mother and fetus. b) Not to respect mother's autonomy. Result: high life possibilities for mother and fetus. c) Respect mother's negative to be transfunded and to operate maneuvers for fetal rescue. Result: high death possibilities for mother and relative life possibilities for fetal life. The physician, when dealing with a pregnant woman, has a responsibility with two patients. As a first intention, the doctor should always offer a proper handle of the case, according to the pregnant patient's beliefs as much as possible, nevertheless he must never forget his compromise to the embryo's/fetus's life.

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Document 21

Devine, Karen

Risky business? The risks and benefits of umbilical cord blood collection.

Medical law review 2010 Autumn; 18(3): 330-62

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**Document 23**
Schrezenmeier, H; Seifried, E

**Buffy-coat-derived pooled platelet concentrates and apheresis platelet concentrates: which product type should be preferred?**
Vox sanguinis 2010 Jul 1; 99(1): 1-15

**Abstract:** There is an ongoing debate whether platelet concentrates (PCs) prepared from either whole-blood donations or by plateletpheresis are superior. Usage of these two product types varies greatly between countries and individual institutions. Some use mainly apheresis PCs; others prefer pooled PCs which are produced from whole-blood donations. This review summarizes the existing information on these product types. In the first part data on quality, efficacy and safety are reviewed. It is important to note that the issue cannot be answered just by comparing ‘the’ apheresis platelet concentrate versus ‘the’ pooled platelet concentrate. Other factors which determine the quality of a product, e.g. residual leukocyte count, plasma content, additive solution or storage period may be even more important. The focus of the debate should be shifted. It is much more needed to further improve the overall quality of PCs and to optimize treatment of thrombocytopenic patients than to concentrate on a single-edged view on just the preparation method. In the second part of this review we compare the product types from the donor's point of view. If PCs which are equally safe and effective can be obtained by various methods, ethics and the safety of the healthy volunteer donor tips the scales. The decision on the use of a particular product type should take into account all aspects of efficacy, side effects and availability of the product as well as the donor's perspective and the commitment to maximize the use of the valuable whole-blood donation.

**Document 24**
López, Rodrigo; Lema, Guillermo

**[Blood transfusions and Jehovah's Witnesses]. = Transfusión sanguínea y Testigos de Jehová: puntos a considerar.**
Revista médica de Chile 2010 Jul; 138(7): 922; author reply 923

**Document 25**
Schmidt, Alexander H; Platz, Alexander; Rutt, Claudia; Ehninger, Gerhard

**Making the case for private cord blood banking: mission failed! Comment to Hollands and McCauley, Stem Cell Rev and Rep 2009;5:195-203.**
Stem cell reviews 2010 Jun; 6(2): 234-6

**Document 26**
Sputtek, Andreas

**Re: Stem cells derived from cord blood in transplantation and regenerative medicine. Further phenomena.**
Deutsches Ärzteblatt international 2010 Apr; 107(16): 293; author reply 293-4
**Document 27**

**Attitudes to sharing personal health information in living kidney donation.**


**Abstract:** BACKGROUND AND OBJECTIVES: In living kidney donation, transplant professionals consider the rights of a living kidney donor and recipient to keep their personal health information confidential and the need to disclose this information to the other for informed consent. In incompatible kidney exchange, personal health information from multiple living donors and recipients may affect decision making and outcomes. DESIGN, SETTING, PARTICIPANTS, & MEASUREMENTS: We conducted a survey to understand and compare the preferences of potential donors (n = 43), potential recipients (n = 73), and health professionals (n = 41) toward sharing personal health information (in total 157 individuals). RESULTS: When considering traditional live-donor transplantation, donors and recipients generally agreed that a recipient's health information should be shared with the donor (86 and 80%, respectively) and that a donor's information should be shared with the recipient (97 and 89%, respectively). When considering incompatible kidney exchange, donors and recipients generally agreed that a recipient's information should be shared with all donors and recipients involved in the transplant (85 and 85%, respectively) and that a donor's information should also be shared with all involved (95 and 90%, respectively). These results were contrary to attitudes expressed by transplant professionals, who frequently disagreed about whether such information should be shared. CONCLUSIONS: Future policies and practice could facilitate greater sharing of personal health information in living kidney donation. This requires a consideration of which information is relevant, how to put it in context, and a plan to obtain consent from all concerned.

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**Document 28**

American Academy of Pediatrics. Committee on Bioethics

**Children as hematopoietic stem cell donors.**

Pediatrics 2010 February; 125(2): 392-404

**Abstract:** In the past half-century, hematopoietic stem cell transplantation has become standard treatment for a variety of diseases in children and adults, including selected hematologic malignancies, immunodeficiencies, hemoglobinopathies, bone marrow failure syndromes, and congenital metabolic disorders. There are 3 sources of allogeneic hematopoietic stem cells: bone marrow, peripheral blood, and umbilical cord blood; each has its own benefits and risks. Children often serve as hematopoietic stem cell donors, most commonly for their siblings. HLA-matched biological siblings are generally preferred as donors because of reduced risks of transplant-related complications as compared with unrelated donors. This statement includes a discussion of the ethical considerations regarding minors serving as stem cell donors, using the traditional benefit/burden calculation from the perspectives of both the donor and the recipient. The statement also includes an examination of the circumstances under which a minor may ethically participate as a hematopoietic stem cell donor, how the risks can be minimized, what the informed-consent process should entail, the role for a donor advocate (or some similar mechanism), and other ethical concerns. The American Academy of Pediatrics holds that minors can ethically serve as stem cell donors when specific criteria are fulfilled.

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**Document 29**

Caplan, Arthur

**Blood stains -- why an absurd policy banning gay men as blood donors has not been changed. [editorial]**


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[http://www.bioethics.net/journal/issues.php](http://www.bioethics.net/journal/issues.php) (link may be outdated)
Blood donation, deferral, and discrimination: FDA donor deferral policy for men who have sex with men.


Abstract: U.S. Food and Drug Administration (FDA) policy prohibits blood donation from men who have had sex with men (MSM) even one time since 1977. Growing moral criticism claims that this policy is discriminatory, a claim rejected by the FDA. An overview of U.S. blood donation, recent donor deferral policy, and the conventional ethical debate introduce the need for a different approach to analyzing discrimination claims. I draw on an institutional understanding of injustice to discern and describe five features of the MSM policy and its FDA context that contribute to its discriminatory effect. I note significant similarities in the 1980s policy of deferring Haitians, suggesting an historical pattern of discrimination in FDA deferral policy. Finally, I point to changes needed to move toward a nondiscriminatory deferral policy.

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http://www.bioethics.net/journal/issues.php (link may be outdated)

Sex and blood: a deeper exploration of discrimination in the FDA blood donor policy.

American Journal of Bioethics 2010 February; 10(2): 40-42

The expressive dimension of donor deferral.

American Journal of Bioethics 2010 February; 10(2): 42-43

Blood is a precious resource – does it really matter who donates it?

American Journal of Bioethics 2010 February; 10(2): 44-45

Blood donation and its metaphors.

American Journal of Bioethics 2010 February; 10(2): 46-47
Document 35
Wagner, John; Rowes, Jeff
Give these donors a bone.
New York Times 2010 January 8; p. A27

http://www.nytimes.com (link may be outdated)

Document 36
Bates, Imelda; Hassall, Oliver
Should we neglect or nurture replacement blood donors in sub-Saharan Africa?
Biologicals : journal of the International Association of Biological Standardization 2010 Jan ; 38(1): 65-7
Abstract: Lack of blood is common in SSA but quantification of the overall shortfall is hampered by a lack of evidence-based targets for blood collection. Despite recommendations that all blood donors should be voluntary and non-remunerated, replacement donors are common throughout sub-Saharan Africa (SSA). Voluntary donors are generally recruited through centralised systems whereas replacement donors are recruited by families and donate through hospitals. Blood from a centralised service is more expensive than from a hospital-based service due to the higher costs of donor recruitment, quality assurance processes and the maintenance of distribution networks. Information about the contribution of replacement donors to the blood supply is scanty and inconsistent but it is likely that they currently provide over half of the blood in SSA. WHO's guidelines for transfusion services deal exclusively with voluntary donors and neglect the substantial contribution made by replacement donors. Examples of how the supply and quality of blood from the replacement donors can be improved have been published but need to be evaluated and disseminated. Political will and open-mindedness to innovative ways to improve supply and safety of blood from all types of donors are essential to promote more evidence-based approaches to blood transfusion practice in low-income countries.

Document 37
Virt, G.
Bundesgesundheitsblatt, Gesundheitsforschung, Gesundheitsschutz 2010 January; 53(1): 63-67
Abstract: The regulation of the European Council and Parliament on advanced therapy medicinal products also includes therapies with human embryonic stem cells. The use of these stem cells is controversially and heavily discussed. Contrary to the use of adult stem cells, medical and ethical problems concerning the use of human embryonic stem cells persists, because this use is based on the destruction of human life at the very beginning. The regulation foresees, therefore, subsidiarity within the European Member States. Although there are no ethical problems in principle with the use of stem cells from the umbilical cord blood, there are social ethical doubts with the banking of these stem cells for autologous use without any currently foreseeable medical advantage by commercial blood banks. Also in this case subsidiarity is valid.
Document 38
Tay, Catherine and Sim Leng, Tien
BIOMEDICAL ETHICS AND MEDICAL LAW IN BLOOD TRANSFUSION PRACTICE: CASE SCENARIOS
Call number: KPP157.4 .T39 2010

Document 39
Fadel, Hossam E.
Cord blood banking: ethical considerations

Document 40
Cogdell, Kimberly J.
Saving the leftovers: models for banking cord blood stem cells
University of Memphis Law Review 2009 Winter; 39(2): 229-254

Document 41
Grinberg, Max; Chehaibar, Graziela Zlotnik
Medical conduct in a Jehovah's witness patient from the bioethics point of view.
Arquivos brasileiros de cardiologia 2009 Nov; 93(5): e85

Document 42
Retamales P, Avelino Sr.; Cardemil H, Gonzalo
[Benefits from the exercise of autonomy and informed consent: the example of Jehovah's Witnesses]. = Beneficios del ejercicio de la autonomia y consentimiento informado: Ejemplo de los Testigos de Jehová.
Revista médica de Chile 2009 Oct; 137(10): 1388-94

Abstract: The respect for self-determination has represented a great challenge for the medical community. This debate has resulted in laws, codes of ethics, international treaties, and administrative guidelines, all with the purpose of protecting such right. In the medical field, the "Convention for the Protection of Human Rights and Dignity of the Human Being with Regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine", known as the Oviedo Convention plays a crucial role. The doctrine of Informed Consent (IC) exists to enforce it. This principle is considered as law in some countries. In Chile, the IC is considered in the legal ordinance and in documents that are used as guidelines in the field of ethics. Jehovah's Witnesses invoke such precepts when they demand respect for their decisions. The present article outlines their position regarding blood transfusions and their contribution to the practice of bloodless medicine and surgery, which promotes the respect for patient's self determination. The experience of Jehovah's Witnesses has lead to a dignified treatment of the patient and has promoted a better participation in decision-making, focusing on the patient. All these benefits can be conveyed to other patients, resulting in the protection of the dignity of the individual.
Document 43
Toni-Uebari, Thelma K.; Inusa, Baba P.D.
The role of religious leaders and faith organisations in haemoglobinopathies: a review
Georgetown users check Georgetown Journal Finder for access to full text
http://www.biomedcentral.com/content/pdf/1471-2326-9-6.pdf (link may be outdated)

Document 44
Usanos, Rafael Amo
Los Bancos de sangre de cordón umbilical: aspectos biomédicos y bioéticos. = The banks of umbilical cord blood: biomedical and bioethical issues
Cuadernos de Bioética 2009 May-August; 20(69): 231-240
Georgetown users check Georgetown Journal Finder for access to full text

Document 45
Roehr, Bob; Brooks, Jay P.
Should men who have ever had sex with men be allowed to give blood? [debate]
BMJ:British Medical Journal 2009 March 7; 338(7694): 572-573
Georgetown users check Georgetown Journal Finder for access to full text
http://www.bmj.com (link may be outdated)

Document 46
Hurley, Richard
Bad blood
BMJ:British Medical Journal 2009 March 7; 338(7694): 568-570
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http://www.bmj.com (link may be outdated)

Document 47
Thornley, Ian; Eapen, Mary; Sung, Lillian; Lee, Stephanie J.; Davies, Stella M.; Joffe, Steven
Private cord blood banking: experiences and views of pediatric hematopoietic cell transplantation physicians.
Pediatrics 2009 March; 123(3): 1011-1017
Georgetown users check Georgetown Journal Finder for access to full text

Document 48
Dyer, Clare
**Document 54**

Bennett, Jeffrey A.

*BANNING QUEER BLOOD: RHETORICS OF CITIZENSHIP, CONTAGION, AND RESISTANCE*


Call number: **RM172 .B46 2009**

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**Document 55**

Copeman, Jacob

*VEINS OF DEVOTION: BLOOD DONATION AND RELIGIOUS EXPERIENCE IN NORTH INDIA*


Call number: **RM171 .C588 2009**

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**Document 56**

Fajjål, <Ådil a`kām al-taßarruf fi al-damm al-basharî wa-åthâruhu fi al-qanûn al-madanî wa-al-fiqh al-Islamî, dirâsah muqâranah (rulings pertaining to disposal of human blood and its impact in civil law and Islamic jurisprudence, a comparative study)*


*Abstract:* This book contains a comparative study of the rulings pertaining to disposal of human blood and its impact in both civil law and Islamic jurisprudence. Chapter titles are: reality of medical work and human blood in Islamic jurisprudence and civil law; disposal of human organs in Islamic jurisprudence and civil law; legal and sharia-based rulings pertaining to disposal of human blood; and medical liability involved in disposal of human blood from both legal and sharia perspectives.

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**Document 57**

Liu, Yinliang

*Investigation of the immature stage of the cord blood banks and their regulation in China*


*Abstract:* Cord blood banks (CBBs) collect umbilical cord blood and isolate therefrom the stem cells which may be transplanted into patients serving treatment of many kinds of serious diseases. As one kind of health resource, CBBs need regulation to guarantee its fair development and safe application. During the past decade, several CBBs have been established in China and related measures have been administered to regulate their establishment and manipulation. How about the actual situation of CBBs in China, including, how are they regulated and what are the problems with the CBBs in practice? Upon introduction to cord blood and the CBBs, this paper investigates the practical situation of the CBBs in China and their regulation, and explores the corresponding problems which need to be dealt with. It is held that the CBB system in China is still at an initial stage, not only for its establishment and operation, but for its regulation as well; and, therefore, justification of a more sustainable CBB system for a better development is needed in China.

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**Document 58**

Symvoulakis, Emmanouil K.; Vardavas, Constantine I.; Fountoul, Popi; Badami, Krishna G.; Eder, Anne F.; Hillyer, Christopher D.; Benjamin, Richard J.

*Adverse reactions to blood donations among adolescents [letters and reply]*

JAMA: Journal of the American Medical Association 2008 October 15; 300(15): 1759-1760

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Document 59
Jegede, Tina; Rawle, Heather
Informed consent for exchange blood transfusions in sickle cell disease.
Nursing Standard 2008 October 1-7; 23(4): 44-49

Document 60
Pollack, Andrew
For stem cells, a role on the battlefield

Document 61
Ballen, Karen K.
Umbilical cord blood banking

Document 62
Strom, Stephanie
Despite fines and promises, Red Cross falters with blood; years of problems in protecting the supply

Document 63
Samuel, Gabrielle N.; Kerridge, Ian H.; O'Brien, Tracey A.
Umbilical cord blood banking: public good or private benefit?
Medical Journal of Australia 2008 May 5; 188(9): 533-535

Document 64
Dyer, Owen
Collection of cord blood is to be regulated from July to reduce contamination of samples [news]
BMJ: British Medical Journal 2008 May 3; 336(7651): 981
Document 65
Ferguson, Eamonn; Farrell, Kathleen; Lawrence, Claire
**Blood donation is an act of benevolence rather than altruism.**
Health Psychology 2008 May; 27(3): 327-336

Document 66
Stein, Rob
**FDA faulted for approving studies of artificial blood; substitutes called too risky**
Washington Post 2008 April 29; p. A2

Document 67
Fisk, Nicholas; Atun, Rifat
**Public-private partnership in cord blood banking**
BMJ: British Medical Journal 2008 March 22; 336(7645): 642-644

Document 68
Goodman, Peter S.
**Facebook is extending its network to blood donations**

Document 69
Fox, Nathan S.; Chervenak, Frank A.; McCullough, Laurence B.
**Ethical considerations in umbilical cord blood banking.**
Obstetrics and Gynecology 2008 January; 111(1): 178-182

Document 70
Stem cells from umbilical cord blood probably now form one of the most commonly banked types of human tissue. Originally stored for the treatment of haematological disorders these stem cells have now been found to be more versatile, even pluripotent, with potential for use in the treatment of a broader range of disorders and diseases and may be particularly valuable in cell therapy and regenerative medicine. This has led to the promotion of private storage of cord blood cells for autologous or family use and a rapidly growing private sector involvement. There is a growing tension between public and private banking and a number of ethical issues continue to be debated involving questions of regulation and quality assurance, ownership and commercialisation, and patenting. This paper aims to investigate some of these issues.
Document 76

Floyd, Katherine L.

Health: newborn umbilical cord blood bank, Code Sections
Georgia State University Law Review 2007 Fall; 24(1): 211-222

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Document 77

Kharaboyan, Linda; Knoppers, Bartha Maria; Avard, Denise; Nisker, Jeff

Understanding umbilical cord blood banking: what women need to know before deciding [editorial]
Women's Health Issues 2007 September-October; 17(5): 277-280

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Document 78

Reddy, Deepa S.

Good gifts for the common good: blood and bioethics in the market of genetic research
Cultural Anthropology 2007 August; 22(3): 429-472

Supported by: NHGRI-funded population; based on fieldwork on "Indian and Hindu Perspectives on Genetic Variation Research"

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Brooks, Jay P.; Ferrell, Joan E.

Legal and ethical considerations in the transfusion of infected or untested autologous blood.

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Franklin, Ian M.

Is there a right to donate blood? Patient rights; donor responsibilities
Transfusion Medicine 2007 June; 17(3): 161-168

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Anderson, Andrea

Emergency trials of blood substitutes skirt ethical questions [news]
Nature Medicine 2007 June; 13(6): 652

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Roux, Françoise A.; Sai, Pierre; Deschamps, Jack-Yves
Some ethical issues regarding xenotransfusion.
Xenotransplantation 2007 May; 14(3): 217-221

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Umbilical cord blood banking and the RCOG
Lancet 2007 March 31-April 6; 369(9567): 1077

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Choudhury, L.P.; Tetali, S.
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