

# Canadian Union of Public Employees

Submission to the

Standing Senate Committee on Social Affairs, Science and  
Technology

on

Bill S-252, Voluntary Blood Donations Act

January 2019

## **The Canadian Union of Public Employees**

The Canadian Union of Public Employees (CUPE) is Canada's largest union with 680,000 members across the country, in every province. CUPE represents workers in health care, emergency services, education, early learning and child care, municipalities, social services, libraries, utilities, transportation, airlines, and more.

CUPE and the Hospital Employees Union (the health care division of CUPE in British Columbia) represent 450 Canadian Blood Services workers in British Columbia, Alberta, and New Brunswick. They connect volunteer blood and plasma donors to Canadian Blood Services and help to protect the health of Canadians because they ensure the country's blood supply is safe.

### **Introduction**

Plasma contains proteins that are fractionated, or separated and converted, into pharmaceutical products to treat blood disorders, burns, and immune deficiency disorders. The plasma product that is used most commonly worldwide is intravenous immune globulin (IVIg), a critical, life-saving drug that treats primary immunodeficiency.

Outside of Quebec, Canadian Blood Services collects 100% of the plasma needed for transfusion by Canadian patients from voluntary, unpaid Canadian donors. However, it only collects enough plasma to meet 17% of the Canadian demand for IVIg. The remaining plasma is sourced from paid donors in the United States.<sup>1</sup>

Canadian Blood Services is waiting for Health Canada to approve its strategic plan to increase the collection of plasma needed for Ig-based products from voluntary, unpaid, Canadian donors. CUPE supports the plan and members who work for Canadian Blood Services are ready to translate the plan into action. Our publicly-funded and accountable non-profit blood system must remain under the control of Canadian Blood Services and Héma-Québec, and not fall into the hands of private shareholder interests.

### **The Krever Commission and Canada's Public Blood System**

From 1993 to 1997, the Krever Commission conducted an extensive inquiry into Canada's tainted blood crisis, in which 32,000 people were infected with HIV and Hepatitis C after they received contaminated blood and plasma products. This is the worst preventable public health disaster in Canadian history.

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<sup>1</sup> Canadian Blood Services, "Canadian Blood Services Proposes Ambitious Plan to Ensure a Secure Supply of Canadian Plasma for Immune Globulin," January 24, 2017, <https://blood.ca/en/media/canadian-blood-services-proposes-ambitious-plan-ensure-secure-supply-canadian-plasma-immune-globulin>.

The recommendations of the Krever Report led to the creation of Canada's public blood agencies, Héma-Québec and Canadian Blood Services. The report also established the principles upon which our public blood system is based:

- 1) Blood is a public resource
- 2) Donors should not be paid
- 3) Canada should be self-sufficient in blood and blood products
- 4) Access to blood and blood products should be free and universal
- 5) The safety of the blood supply system is paramount<sup>2</sup>

Krever's principles are globally-respected as providing the foremost direction on how to manage the safest public blood system. They serve the interests of the Canadian public because they ensure our blood system is strictly regulated and eliminate the profit-making incentives that contributed to the country's tainted blood tragedy.

### **Private, For-Profit Plasma Clinics Contravene Krever's Principles**

CUPE was disappointed when Health Canada granted licenses in 2014 and 2016 to Canadian Plasma Resources, allowing the company to establish and operate private, for-profit plasma clinics in Saskatoon, Saskatchewan and Moncton, New Brunswick. Health Canada granted the licenses despite warnings from Canadian Blood Services that it shouldn't do so.<sup>3</sup>

The establishment of private, for-profit plasma clinics directly contravenes the recommendations of the Krever Commission, as well as the Federal/Provincial/Territorial Memorandum of Understanding (MOU) on the creation of Canadian Blood Services. The MOU stipulates that the national blood system should maintain and protect its voluntary donor base and strive for self-sufficiency in blood and plasma.<sup>4</sup>

British Columbia, Alberta, and Ontario have passed *Voluntary Blood Donations Acts* that prohibit private companies from paying people for their blood and plasma. Quebec has had a similar law in place since 1994. The legislative action taken by these provinces is supported by the World Health Organization, the International Federation of the Red Cross and Red Crescent Societies, the European Blood Alliance, the International Society of Blood Transfusion, and the International Plasma and Fractionation Association. They all recognize that paying people for their blood threatens blood safety and decreases the voluntary donor base.

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<sup>2</sup> Horace Krever, "Commission of Inquiry on the blood system in Canada (Krever Commission)," <http://publications.gc.ca/collections/Collection/CP32-62-3-1997-1E.pdf>.

<sup>3</sup> Kelly Grant, "Ottawa Approved For-Profit Plasma Clinic Despite Warning From Canadian Blood Services," August 1, 2017, <https://www.theglobeandmail.com/news/national/ottawa-approved-for-profit-plasma-clinic-despite-warning/article35860933/>.

<sup>4</sup> Canadian Blood Services, "Executive Summary," [https://blood.ca/sites/default/files/Executive%20Summary\\_0.pdf](https://blood.ca/sites/default/files/Executive%20Summary_0.pdf).

## Increasing the Collection of Plasma Within Canada’s Public Blood System

In 2017, Canadian Blood Services provided Health Canada with an ambitious strategic plan “outlining how [it] will ensure a safe and secure supply of plasma needed to manufacture immune globulin (Ig) for Canadian patients.”<sup>5</sup> The objective of the strategic plan is to increase the domestic supply of Ig from 17 to 50% by 2024 through the establishment of as many as 40 new plasma collection sites and the recruitment of at least 144,000 new plasma donors.<sup>6</sup> The agency hoped the plan would be approved so two new collection sites could be opened by 2018; but this has yet to happen.<sup>7</sup> The delay is consequently hampering Canadian Blood Services’ capacity to increase the amount of plasma collected from voluntary Canadian donors for Canadian patients.

Moreover, the licensing of Canadian Plasma Resources by Health Canada has created a competitive environment in Saskatchewan and New Brunswick, making it more difficult for Canadian Blood Services to recruit blood donors. As a result, the number of unpaid, voluntary donors in these provinces has declined, especially among the 17-24 age group, the most desirable donors. The United States and Hungary (where it’s also legal to pay people for their plasma) have experienced the same outcome.<sup>8</sup>

In 2013, Héma-Québec implemented a strategy to increase voluntary plasma donations in the province of Quebec. It opened new collection centres and, in 2016, launched a new campaign to promote voluntary plasma donation. Between 2016-2017 and 2017-2018, the amount of plasma sent for fractionation that was collected from unpaid, voluntary donors increased by 9.7%. In 2018, Héma-Québec aimed to collect 95,000 litres of plasma, but far exceeded this goal, collecting 105,160 litres. From 2013 to 2018, Héma-Québec successfully increased Quebec’s plasma self-sufficiency for Ig-based products from 14.5 to 21.5%.<sup>9</sup> The success of Héma-Québec shows that initiatives undertaken within our public blood system to bolster plasma self-sufficiency are effective.

CUPE supports the strategic plan developed by Canadian Blood Services. If the plan is approved by Health Canada, CUPE is confident Canadian Blood Services will achieve the same success as Héma-Québec, and similarly increase plasma sufficiency across the rest of Canada. CUPE members who work for Canadian Blood Services care deeply about the agency’s mission, donors, and recipients. They are eager to support Canadian Blood Services’ strategic plan through the active role they play in creating positive donor experiences and helping to grow and retain the volunteer donor base.

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<sup>5</sup> Canadian Blood Services, “Canadian Blood Services Proposes Ambitious Plan to Ensure a Secure Supply of Canadian Plasma for Immune Globulin,” January 24, 2017, <https://blood.ca/en/media/canadian-blood-services-proposes-ambitious-plan-ensure-secure-supply-canadian-plasma-immune-globulin>.

<sup>6</sup> Ibid.

<sup>7</sup> Graham Sher, Letter to Denise Perret, January 23, 2017.

<sup>8</sup> Ibid.

<sup>9</sup> Héma Québec, “Héma Québec: 2017-2018 Annual Report,” [https://www.hema-quebec.qc.ca/userfiles/file/RA2017-2018/RA\\_2017-2018\\_EN\\_2.pdf](https://www.hema-quebec.qc.ca/userfiles/file/RA2017-2018/RA_2017-2018_EN_2.pdf).

## Why Parliamentarians Should Support Bill S-252

Canadian Plasma Resources has indicated it plans to open a total of 10 clinics in Canada by 2021. Prometics, an American-owned company, has applied to open an additional 8 clinics beginning in 2019.<sup>10</sup> There is nothing currently restricting Health Canada from granting these companies the licenses to do so.

If Health Canada allows more private, for-profit plasma clinics to open, it'll place Canadian Blood Services' voluntary donor base in further jeopardy. Furthermore, it will do nothing to help us increase our plasma self-sufficiency since the plasma collected by Canadian Plasma Resources does not remain in Canada for use by Canadian patients. Instead, it is sold to Biotest, a German-based fractionator owned by a Chinese investment group.<sup>11</sup>

In order to protect and promote the role that Canadian Blood Services was established to perform as our national blood authority and to safeguard the integrity of the Canadian blood supply, we need federal legislation that prohibits the practice of paying Canadians for their blood and plasma. Bill S-252 will protect the Canadian blood supply, ensure we grow our capacity to meet the needs of Canadian patients, and never again face another tragedy like the tainted blood crisis of the 1980s.

CUPE therefore recommends that Senators support Bill S-252 in order to:

- Improve Canada's security of supply in immune globulin (Ig). Canada must increase its capacity to collect enough plasma from voluntary, unpaid Canadian donors to meet the needs of Canadian patients. The World Health Organization has recommended that all countries achieve 100% voluntary, unpaid donation of blood and blood components by 2020. This recommendation is founded on evidence showing that voluntary, unpaid blood donors provide the safest blood.<sup>12</sup>
- Decrease our reliance on plasma products sourced in the United States. Currently, Canadian Blood Services purchases over 80% of the plasma-derived medication required by Canadian patients from the United States. If the supply from the United States was suddenly disrupted, cut off, or exposed to contamination, Canadian patients would not have a secure source of treatment readily available. To address potential threats, Canada must increase the amount of plasma it collects domestically for fractionation into Ig-based products. The only way to secure supply for Canadian patients is through our public blood operators: Canadian Blood Services and Héma-Québec.

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<sup>10</sup> Health Canada, "Protecting Access to Immune Globulins for Canadians: Final Report of the Expert Panel on Immune Globulin Product Supply and Related Impacts in Canada," May 2018, <http://www.cipo.ca/wp-content/uploads/2018/05/Protecting-IG-for-Canadians-Expert-Panel-FINAL.pdf>.

<sup>11</sup> Ibid.

<sup>12</sup> World Health Organization, "Towards 100% Voluntary Blood Donation: A Global Framework for Action," 2010, [https://www.who.int/bloodsafety/publications/9789241599696\\_eng.pdf](https://www.who.int/bloodsafety/publications/9789241599696_eng.pdf).

- Ensure that the law protects blood and plasma as public resources that cannot be bought or sold.
- Uphold the globally-respected principles established by the Krever Commission by keeping private, for-profit blood and plasma collectors out of Canada’s public blood system.
- Protect the integrity of Canada’s voluntary blood donor system. The examples of Saskatoon and Moncton show that private, for-profit plasma clinics reduce the number of voluntary plasma donors. There is a substantial risk they could also draw voluntary whole blood donors away from the public system as well. We need to safeguard our public blood system against this risk.
- Ensure national control over the blood and plasma that’s collected within Canada instead of losing these life-saving resources to foreign control. We need a blood system that is accountable to the Canadian public, not private shareholder interests.
- Protect donors and vulnerable populations from being exploited, since private, for-profit collection companies tend to open clinics in low income (and potentially higher risk) neighbourhoods.<sup>13</sup>

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<sup>13</sup> Liz Posner, “Medical Companies are Profiting from Harvesting Poor Peoples’ Blood,” December 14, 2017, [https://www.salon.com/2017/12/14/medical-companies-are-making-money-from-poor-peoples-blood\\_partner/](https://www.salon.com/2017/12/14/medical-companies-are-making-money-from-poor-peoples-blood_partner/).