

The Plasma File and Victor Boudreau

The case against a for-profit plasma collection clinic (*Canadian Plasma Resources*) in Moncton, New Brunswick

New Brunswick Health Coalition

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Victor Boudreau ignores the views of experts and favors a business model

1. The experts view : Blood and plasma are public resources and not commodities

Expert organizations such as Justice Krever's Report on Canadian tainted blood, the *World Health Organization* and *Canadian Blood Services* have clearly made the point that blood and plasma are public resources which should not be collected from paid donors:

It is recommended that the Canadian blood supply system be governed by five basic principles:

- a) Blood is a public resource.
- b) Donors of blood and plasma should not be paid for their donations, except in rare circumstances.
- c) Whole blood, plasma, and platelets must be collected in sufficient quantities in Canada to meet domestic needs for blood components and blood products.
- d) Canadians should have free and universal access to blood components and blood products
- e) Safety of the blood supply is paramount.¹

The *World Health Organization* in its 2012 report: *Expert Consensus Statement on achieving self-sufficiency in safe blood and blood products based on voluntary non-remunerated blood donation (VNRBD)* stated:

Blood, plasma and cellular components and other therapeutic substances derived from the human body should not be considered as mere ``commodities``. Donated blood that is provided voluntarily by healthy and socially committed people is a precious national resource.²

It goes on defining what is a voluntary non-remunerated blood donation :

Voluntary non-remunerated blood donations (VNRBD) means that a person gives blood, plasma or cellular components of his-her own free will and receives no payment for it, either in the form of cash, or in kind which would be considered as substitute for money. This could include time off work other than that reasonably needed for the donation and travel. Small token, refreshments and reimbursement of direct travel costs are compatible with voluntary non-remunerated donation.³

¹Commission of Inquiry on the Blood system in Canada (Krever report), Volume 3, Part IV page 1047, recommendation no 2, November 1997

² http://www.who.int/bloodsafety/transfusion_services/WHO_Expert_Consensus_Statement_Self-sufficiency.pdf?ua=1

³ Ibid.

In its May 5, 2016, news release, the *Canadian Blood Service* clearly stated :
"Canadian Blood Services does not and will not pay donors for blood, plasma or any other kind of donation."⁴

2. Canadian Plasma Resource view : Blood and plasma are commodities to be exploited like any other commodity. For them it is a business and the loyalty of "providers" need to be cultivated in the same way as for any other business :

At Canadian Plasma Resources, [...] To show our appreciation, we provide our donors with a Donor Value Card which is credited after each donation. The Donor Value Card is a non-transferrable VISA card that can be used universally wherever VISA is accepted. [...]

On your first donation, you are considered an applicant donor. After your second donation, if you pass all screening steps and your test results from the first and second donations are acceptable, you become a qualified donor. At the end of your second donation, a Donor Value Card will be issued to you, credited with your compensation amount for your first and second donations. Most people that meet the basic donor eligibility criteria can become a qualified donor.

Once you are a qualified donor, your compensation will be credited onto your Donor Value Card on the day of each subsequent donation. A qualified donor can donate plasma once a week at the most. You will receive up to \$50 per donation.⁵

3. A single accountable national system is essential.

Following the contaminated blood scandal, Justice Krever proposed a single national system for the collection of blood and blood products :

3. It is recommended that Canada have a national system for the collection and delivery of blood components and blood products.

4. It is recommended that the core functions of the national blood supply system be performed by a single operator and not be contracted out to others.⁶

These recommendations gave birth to *Canadian Blood Services*, which replaced the *Canadian Red Cross*.

⁴ <https://blood.ca/en/media/canadian-blood-services-does-not-and-will-not-pay-donors>

⁵ <http://giveplasma.ca/become-a-donor/compensation/>

⁶ Commission of Inquiry on the Blood system in Canada, Volume 3, Part IV, pages 1049 and 1050, November 1997.

The importance of the blood supply requires the system to be publicly administered and to be made accountable to the public. This is stressed by recommendation 10 of the *Justice Krever's Report* and by the *Canadian Blood Services* :

10. It is recommended that the blood supply system be publicly administered by a national blood service, a corporation to be created by an Act of Parliament.⁷ Long-term security of the plasma supply for Ig (immune globulin) can only be achieved through increased plasma collection by the publicly funded and publicly accountable not-for-profit blood system operated by Canadian Blood Services. (Our emphasis).⁸

4. Canadian Plasma Resource is not accountable to the public. It is a for-profit company. Like any other private business it is accountable only to its shareholders.

Why is it Victor Boudreau does not see the difference?

5. Human blood is too precious to be treated as a commodity. As stated above by the *World Health Organization* : "Donated blood that is provided voluntarily by healthy and socially committed people is a precious national resource."

A plasma collection system based on paid donors will have a negative impact on blood and plasma collection based on voluntary donors (voluntary non-remunerated blood donors - VNRBD). According to the *World Health Organization* :

There are concerns that sufficient safe donations and sustainable supply, availability and access to blood and blood products based on VNRBD may be compromised through the presence of parallel systems of paid donations.⁹

The experience in Saskatoon has shown the impact blood business has had on the numbers of VNRBD. In an interview with CBC on December 21, 2016, *Canadian Blood Service* CEO, Dr. Graham Sher confirmed that donor numbers had dropped in that city :

We've begun to see some early impacts of having this private, for-profit enterprise operate in our jurisdiction," Sher said. "It is early evidence, but it's certainly consistent with what other countries are seeing when you see large-scale ramp-up of the paid plasma industry side by side with the blood industry. We in Canada are at risk, if we don't collect more of our own plasma, that we're not going to be able to access the global supply of these plasma drugs," he said.

⁷ Canadian Blood Services press release January 24, 2017

⁸ <https://blood.ca/en/media/canadian-blood-services-proposes-ambitious-plan-ensure-secure-supply-canadian-plasma-immune-globulin>

⁹ http://www.who.int/bloodsafety/transfusion_services/WHO_Expert_Consensus_Statement_Self-Sufficiency.pdf?ua=1

Dr. Sher went on to explain why access to the blood supply by Canadian patients requires the system to be public : "We have to collect more plasma, control it, and keep it in Canada for Canadian patients, which the private industry is not obligated to do. They will sell to the highest bidder."

From an economic standpoint, it was to be expected that paid plasma clinics would harm voluntary donation. As noted by Michael Decker who was an adviser to the Kreyer Commission, and a former deputy Health minister in Ontario, in reaction to the Saskatoon venture :

As an economist I'm not surprised that once you allow paid plasma donation in, it's going to undercut the volunteer sector¹⁰.

Victor Boudreau should also be concerned with the impact paid-plasma clinics has had on voluntary systems in both Germany and Austria. In those countries, the public system could only get 1 out of 6 donors back after they got used to selling their blood plasma.¹¹

This is a simple equation. One donor lost to a private paid-parallel system, means one donor lost to save the life of a Canadian.

What is it our health minister, doesn't understand?

6. It is becoming more and more obvious that two segments of the population are at risk of being exploited by paid-plasma companies: young students and people living in poverty. `

Canadian Plasma Resource, in 2013 when it was attempting to establish its business in Ontario confirmed it would target university students :

The company, however, says it hopes to target university students- that is, if it gets the green light to open from both the federal and provincial governments¹².

According to the *World Health Organization* :

Payment for the donation of blood (including donations of plasma and cellular components) not only threatens blood safety, it also erodes community solidarity and social cohesion that, on the contrary, can be enhanced by the act of voluntary non-remunerated donation. By placing an onus on underprivileged populations in need of money, it also compromises the development of a voluntary, non-remunerated blood donor system.

¹⁰ <http://www.cbc.ca/news/health/plasma-canadian-blood-services-1.3906721>

¹¹ <http://www.europeanbloodalliance.eu>

¹² interview done by Isabel Teotonio for The Star.com, April 22, 2013, *Hemophilia Ontario opposed to paid plasma clinics*

Victor Boudreau does not seem to care much about social cohesion and solidarity and is apparently not concerned by the exploitation of underprivileged segments of the population. He rationalizes that in the United States it is legal to pay people to sell their blood plasma.¹³

Why does our minister of health pay little heed to the fact that many of those donors are impoverished and participate in a system which in the USA has been coined as “plasma farming”.

Why does Victor Boudreau want plasma farming in New Brunswick?

7. The security of our blood supply requires a concerted effort across the country. Presently, *Canadian Blood Services* collects enough blood and plasma to meet the needs of Canadians for transfusion. However, it has not previously collected enough to be able to produce plasma-derived drugs.

Therefore, *Canadian Blood Services* made public in its January 24, 2017, news release, a plan to increase its Canadian plasma supplies:

Canada is self-sufficient in plasma for transfusions. However, we only collect enough plasma to meet about 17 per cent of the demand for Ig, a critical lifesaving drug. Our goal is to increase Canada’s plasma sufficiency for Ig to 50 per cent. This would mean half of the Ig used by Canadian patients would be made from Canadian plasma.

What will this look like? By 2024, this could mean as many as 40 new plasma collection sites collecting more than 600,000 litres (more than 866,000 units) of plasma per year. Upwards of 144,000 new plasma donors will be needed annually to collect the significant additional volume of plasma the plan calls for.¹⁴

The existence of a competitor for plasma donors goes against CBS’ new plan to work towards self-sufficiency

Moreover, the plasma collected by Canadian Plasma Resource would not be used to meet our needs because Canadian Blood Services clearly stated it would not buy plasma from Canadian Blood Resource.¹⁵

Consequently, all the plasma collected privately from the veins of Canadians will be sold on international markets and will not help us, in any way, become self-sufficient.

It is important to note that New Brunswick contributes, like all of the other provinces, to funding *Canadian Blood Services*;

Ontario, Québec and Alberta have all banned paid plasma in order to protect our national public blood system.

Why isn't Victor Boudreau following suit?

¹³ <https://www.youtube.com/watch?v=AF9X9UzPLNQ>

¹⁴ <https://blood.ca/en/media/canadian-blood-services-proposes-ambitious-plan-ensure-secure-supply-canadian-plasma-immune-globulin>

¹⁵ Press release, May 5, 2016, Canadian Blood Services.

Who does our minister of Health listen to?

Experts and the governments of Québec, Alberta and Ontario have come to the conclusion that the security of our blood supply is impeded by the for-profit plasma collection. They are joined in that conclusion by a multitude of organizations and individuals from all segments of the population. (see <http://bloodwatch.org/whos-against-paid-plasma/>)

But it seems that our minister of Health does not share their concern and for some reasons wants to go it alone. Why?

Indeed. Why doesn't he listen and account to New Brunswickers who have spoken up through their representative organizations :

Association de bibliothécaires, professeures et professeurs de l'Université de Moncton, Etienne Dako, président.

Association des Universités du 3^e âge du NB (AUTAUNB), Benoit Duguay, président

Association francophone des aînés du NB, Jean-Luc Bélanger, Executive-Director.

Association of University of New Brunswick Teachers, Allan Reid, President.

Canadian Federation of Students, Brittany Dixon, NB Representative.

Canadian Labour Congress, Alex Furlong, Atlantic Regional Director.

Canadian Union of Public Employees, NB Division, Danny Léger, President.

Coalition for Seniors and Nursing Home Residents, Cecile Cassista, Executive Director.

Comité de justice sociale des Religieuses NDSC, Stella Arseneau, responsable.

Conférence Mère Teresa de la Société St-Vincent de Paul, Thérèse Caissie, présidente

Conseil des sociétés culturelles du NB, Marie-Thérèse Landry, directrice-générale.

Égalité en santé, Hubert Dupuis, président

Fédération des étudiants et étudiantes de l'Université de Moncton, Roxann Guérette, présidente.

John Howard Society of NB, Bill Bastarache, Executive-Director

Justice and Solidarity Committee, Moncton Diocese, Dianne Léger, coordinator.
Maison de Nazareth, Luc doucet, président

Mount Allison Faculty Association, Andrew Irwin, President.

NB Common Front for Social Justice, Pauline Richard, Co-Chair.

NB Council of Hospital Unions, Norma Robinson, President.

NB Council of Nursing Home Unions. Wayne Brown, President.

NB Federation of Labour, Patrick Colford, President.

NB Federation of Union Retirees, Alex Grimaldi, President.

NB Nurses Union, Paula Doucet, President.

NB Seniors Citizens Federation, Léonard LeBlanc, President.

New Brunswick Union, Susie Proulx-Daigle, President.

Regroupement féministe du NB, Nellie Dennene, Executive-Director.

Société de l'Acadie du NB, Kevin Arseneau, President.

Société des enseignantes et enseignants retraités francophones du NB
(SERFNB), Roger Doiron, président

United Way of Greater Moncton and Southeastern NB, Debbie McInnis,
Executive Director

*Plasma, just like whole blood, is a public resource that must be safeguarded for
Canadians. Long-term security of the plasma supply for Ig can only be achieved
through increased plasma collection by the publicly funded and publicly
accountable not-for-profit blood system operated by Canadian Blood Services.
News release, January 24, 2017, Canadian Blood Service*

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