How are BSH Guidelines produced and how should they be used?

Dr Sue Robinson
Consultant Haematologist
Guy’s and St Thomas’ NHS Foundation Trust
BSH changes

- Re-organisation

Moving on

A five-year organisational strategy for the British Society for Haematology

Prepared by
Linda Laurance & Associates

March 2016
Key strategic aims

Make BSH membership a must for haematology consultants, trainees, nurses and biomedical scientists, and strengthen membership engagement in all the Society’s activities.

Maintain and build on areas where the Society has already gained a reputation for excellence: guidelines and education.

Transform the Annual Scientific Meeting into the go-to event for all UK haematology professionals.

Strengthen the voice of haematology at national and international levels.

Make sure the Society is fit for purpose in terms of sustainability and resource management.
Education and Grants
Events

January 25th, 2018
PAEDIATRIC HAEMATOLOGY STUDY DAY
This one day course is available to all haematology trainees, specialty doctors as well as general practitioners.

Location: Royal College of General Practitioners

Details

February 28th, 2018
TRANSFUSION IN PRACTICE, BIRMINGHAM
Practical, interactive teaching designed to improve transfusion practice for the non-specialist.

Location: Postgraduate Centre Birmingham

Details

March 26th, 2018
TRANSFUSION IN PRACTICE, BIRMINGHAM
Practical, interactive teaching designed to improve transfusion practice for the non-specialist.

Location: Postgraduate Centre Birmingham

Details
News

Novel lymphoma therapy in development
Scientists are working on a new way of eliminating abnormal T-cells in T-cell lymphoma. Professor Andrew Sewell and colleagues at Cardiff University, UK, searched for a new method of targeting cancerous cells without destroying h...
6 hours ago

Final call for abstracts - ASM Crucible session
The deadline for abstract submissions for the Crucible session at the BSH Annual Scientific Meeting 2018 is Thursday 30 November 2017. All doctors in training are eligible to submit up to 300 words on the theme ‘How do haematolo...
2 days ago

Timing critical in antifibrinolytic treatment for acute severe haemorrhage
£4m for stem cell transplant trials
Apply for the 2018 Healthcare Science Awards
NHS Blood and Transplant partner with MOBO Awards to launch B Positive Choir
7 days ago
7 days ago
7 days ago
7 days ago
BSH Guidelines
revised process
About Us

The British Society for Haematology (BSH) has been bringing haematology professionals together since 1960 to transform the care we provide to patients. With over 1700 members worldwide, we are the largest UK organisation concerned with haematology and the only society to cover all aspects of the specialty.

Listening
Our members work together to share ideas and knowledge, and to champion and strengthen haematology practice.

Learning
Together we help shape the future of haematology by providing access to resources, events and education that support your professional development.

Leading
Bridging the gap between research and practice, our guidelines raise the standards of clinical and laboratory practice.
Three styles of guideline:

- **BSH Guideline**
  - Evidence-based guideline developed following a professional literature search and a review of the evidence by the writing group.

- **BSH Good Practice Paper**
  - Used to recommend good practice in areas where there is a less robust evidence base.
  - Degree of consensus or uniformity is likely to be beneficial to patient care.

- **BSH Position Paper**
  - Adoption and adaptation of a non-UK evidence-based guideline for use in the UK.
GUIDELINES

The administration of blood components: a British Society for Haematology Guideline


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DOI: 10.1111/bmh.12881 View all e-prints
Cited by (CrossRef): 0 articles  Check for updates  Citation tools

METHODOLOGY

This guideline was compiled according to the BSH process at http://www.bsh-h.org.uk/guidelines/. The Grading of Recommendations Assessment, Development and Evaluation (GRADE) nomenclature was used to evaluate the levels of evidence and to assess the strength of recommendations. The GRADE criteria can be found at http://www.gradeworkinggroup.org.

This guideline represents the minimum requirements for the safe administration of blood component transfusions. These are intended to provide the foundations for organisations to build on when developing their own local policies and guidelines. However, it should be recognised that the more complex the procedures are, the more open to error they become.

Literature review details
Guidelines

Transfusion for Fetuses, Neonates and Older Children

Appropriate transfusion of fetal and paediatric patients of all ages is vital in order to balance transfusion benefits against risks. These risks include transfusion of an incorrect blood component due to errors such as mistaken patient identity, or unpredictable acute transfusion reactions (Stainsby et al, 2008). Recent studies suggest that a significant percentage of paediatric transfusion recipients receive only one transfusion during their admission (Sporim et al, 2008; New et al, 2014), raising the possibility that some may be avoidable. Specialised components are available for transfusion to different paediatric patient groups and for different clinical indications.

Plasma components have been imported for all patients born on or after 1st Jan 1996 in order to reduce the risk of transfusion transmission of variant Creutzfeldt-Jakob disease (vCJD; see section 7). Additional component safety measures are applied for fetal and neonatal patients, who are particularly vulnerable recipients because of their small size and developmental immaturity and who also have the longest potential lifespan. The clinical section focuses largely on aspects relating to transfusion indications and administration, whereas the laboratory section contains most of the information relating to pre-transfusion testing and component selection.

Date: 15 April 2016

Go to full guideline  Download audit template
Guidelines on the horizon

- Haemato-oncology
  - Management of primary CNS lymphoma
  - Chronic Myeloid Leukaemia
- Haemostasis and Thrombosis
  - Thrombosis and haemostasis in paediatric malignancy
  - Use of TEG and TEM in clinical practice
- General Haematology
  - Hydroxycarbamide in children and adults with sickle cell disease
  - Diagnosis and management of polycythaemia
  - G6PD
- Transfusion
  - Updated irradiation guidelines
  - Transfusion and haemopoietic stem cell transplants
Joint BSH and BBTS Good Practice Papers
It’s your turn

- How do you use the BSH Guidelines?
- How useful are they?
- How could they be improved?
Why get involved?

- Passionate about best care
- Quality, Leadership, Data
- Challenge and Variety
- Contribute and influence best transfusion practice
- Representation of peers from within the NHS
- Networking – building bridges, multidisciplinary, friendships
How can you get involved?

- Suggest a Topic
- Join a Writing group
- Join a Task Force
- Join the Sounding Board

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