AIMS For a better birth...

Blood Money

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The UK Cord Blood Bank was launched on October 13th 2000 at a meeting in London. The first and only private cord blood bank in the UK, it is offering to store, for a fee, the umbilical cord blood, taken from the placenta shortly after delivery of a baby. The company describes its service as the ultimate form of health insurance: in storing cord blood, parents are ensuring life-saving treatment is available for their child should he or she need it.

The cover of the company's brochure, showing a baby's hand grasping the index finger of an adult, is emblazoned with the slogan 'Begin their life with a helping hand'. What it doesn't, but should, say is, 'Watch out: people are open to exploitation when the profit motive drives health care'.

Umbilical cord blood contains stem cells, unspecialised cells with the potential to differentiate into different types of body tissue. Stem cells can be derived from several different sources: some adult tissue such as bone marrow, some fetal tissue, early embryos and umbilical cord blood.

The older the source, the more difficult it is to unlock the potential to develop into other kinds of tissues. Stem cells from embryos are called 'pluripotent' because they hold the greatest potential of differentiating into many different kinds of tissue. The next best source is fetal tissue followed by umbilical cord blood.

Stem cells are sometimes transplanted into patients suffering from certain diseases of the blood and immune system such as leukaemia. The UK Cord Blood Bank's brochure claims the risk of needing a stem cell transplant is one in three hundred. When this statistic was challenged at the launch meeting, a representative of the company retracted it and accepted the risk is far lower, around one in twenty thousand.

This statistic still exaggerates the risk to children: the chances of a child succumbing to some of the conditions mentioned in the brochure are extremely remote as they arise mostly in middle and old age. Further evidence of how few children need a stem cell transplant was provided in the response to a question asked in Parliament in November 1999 in which it was stated that since 1996, six children had received cord blood transplants in the United Kingdom. Clearly, given the very slim chance of having an affected child, the company is encouraging pregnant women to worry - and pay - unnecessarily.

Umbilical cord blood is relatively easy to harvest. The company provides customers with a kit and instructions for the midwife on how to use it. Drugs cannot be given in labour as these may enter the cord blood. Blood is extracted either while the placenta is still in utero or after it has been expelled, in which

case, it has to be suspended. A courier collects the container which is delivered to the company for immediate storage. There is an initial fee of £125 which covers administration and the cord blood collection kit. Laboratory processing, shippage and the first year's storage costs come to a further £370.

Subsequently, parents will be charged an annual payment of £75 for rental of storage space. Anyone who falls behind with payments will be dealt with by a credit agency. According to a representative of the company, in these cases, cord blood will not be thrown out. However, there is no guarantee the company will remain in business. The UK Cord Blood Bank is an off-shoot of the New England Cord Blood Bank Inc, a family-run US company. Its directors are members of several US medical societies, but these do not have the capacity to oversee or regulate anyone or anything in the UK.

Women should be told, there is no need to go private. Cord blood is collected by and provided free to patients by the National Blood Service, part of the NHS. In the past few years, around £4million has been invested in the service, the London Cord Blood Bank which is based at Edgware, and a smaller unit in Newcastle.

In some respects, these banks are more expensive to run than commercial operations because 'donated' cord blood must be tissue typed, a relatively expensive procedure, so that it can be matched to potential recipients. Where cord blood is banked with commercial organisations for private use, tissue typing is unnecessary: donor and recipient are one and the same person.

NHS cord blood banks rely on voluntary donations, something which is not yet routine in maternity units. Relatively few donors are needed for a cord blood bank to work. In the US, the National Institutes of Health in the US have calculated that 20,000 samples of cord blood would ensure that almost everybody who needed a transplant in the US would find a match.

Recently, the London Cord Blood Bank said it planned to collect and store 10,000 units over the three years. A world-wide agency can facilitate 'matching' or recipients and donors. Shortages can arise where the would-be recipient is black or of minority ethnic status because they are less likely to be donors and more likely to be recipients. In an effort to promote donation amongst women who are black or of minority ethnic status, the London Cord Blood Bank is targeting maternity units.

The ethos of publicly owned cord blood banks is worth fighting for. They are a national resource, like the blood transfusion service. Donors are altruistic: people give voluntarily for the benefit of others, and in the hope that others will donate blood so that it will be available should they need it. This ethos has been enshrined within the NHS. A commercial cord blood bank encourages selfishness; in this era of privatisation, it threatens highly prized services.

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