



ABOUT YOUR **blood** transfusion

What is a blood transfusion?

A blood transfusion is a medical procedure prescribed by a physician in which blood donated by one person is given to another person. Failure to receive a blood transfusion when it is needed can lead to serious medical complications.

Blood can be transfused “whole” (that is, without separating the plasma and red cells), but this occurs rarely. Usually, a component or combination of components is transfused. Blood components include:

- **Red cells:** For treating trauma and anemia.
- **Platelets:** For treating patients with low platelet counts caused by chemotherapy, severe coagulation disorders, or abnormal platelet function caused by medications, or in conjunction with some open heart surgical procedures.
- **Plasma:** For clotting factors.
- **Cryoprecipitate:** For replacement of specific clotting factors such as fibrinogen and von Willebrand factor.

*Julie V.,
Recipient*

 **Community
Blood Center**
Save a Life. *Right Here, Right Now.*

Who provides blood for transfusions?

Community Blood Center accepts only blood from volunteer blood donors. This helps ensure the safety of the blood supply. Each week, Community Blood Center must collect more than 2,500 units of blood to meet the needs of patients in area hospitals. The blood and platelets are collected at Community Blood Center neighborhood donor centers and at community blood drives.

Safety is a top priority

Blood and components are carefully prepared and extensively tested to ensure they are as safe as reasonably possible. Community Blood Center supplies almost all of the blood and blood components used in the area. Before donating blood, each volunteer donor must answer a number of questions about his or her health. These questions identify and prevent donations from people who pose a risk for transmitting infectious diseases.

The bags and needles that come in contact with donors are used only once and then discarded.

What tests are done to ensure the safety of the blood supply?

Before blood leaves Community Blood Center, it undergoes multiple tests. Blood that tests positive for an infectious agent is destroyed and the donor is notified of the results.

Each unit is tested for:

- **Infectious agents:** syphilis, hepatitis B and C, human T-cell lymphotropic viruses I and II, human immunodeficiency viruses 1 and 2 (AIDS viruses), and West Nile Virus. Some blood is tested for cytomegalovirus (CMV) to provide a screened inventory for bone marrow transplant patients, low-birth-weight newborns and others at high risk for this virus. Donors are tested once for antibodies against T. Cruzi (the parasite causing Chagas Disease.)
- **Blood groups:** ABO and Rh types, and blood group antibodies.
- **Crossmatch:** Before donated blood is given to a patient at a hospital, the hospital does a crossmatch to be certain the donor's and patient's blood are compatible.

What are the risks of transfusion?

In spite of rigorous testing, there are still risks associated with a transfusion. These risks are detailed on the next panel and are based on statistics available in 2010.

Autologous and directed donations are alternatives to the volunteer blood supply. There is no risk of viral infection from autologous donations, but misidentification errors, circulatory overload and bacterial contamination risks still remain. Approximately one in 17,000 autologous donations and one in 198,000 routine donations result in a donor reaction that requires hospitalization.

Infectious Agent Risks

Infectious Agent Risks	Risk of Infection Per Unit
Hepatitis A	one in 1,000,000
Hepatitis B	one in 400,000
Hepatitis C	one in 1,600,000
HIV (AIDS)	one in 2,000,000
HTLV	one in 3,000,000
Chagas Disease	Rare
Creutzfeldt Jakob Disease (CJD)	no reports from transfusion in the U.S.
Bacterial Infection	red cells = 1 in 1,000,000 platelets = 1 in 75,000
Malaria	< one in 4,000,000
West Nile Virus	Rare
Babesia	Rare
Dengue	Rare

Non-Infectious Serious Hazards of Transfusion

Non-Infectious Serious Hazards of Transfusion	Risk Per Unit
ABO incompatibility	one in 38,000
Anaphylaxis	one in 70,000
Acute Lung Injury	one in 15,000
Circulatory Overload	varies by patient
Iron Overload	risk begins at 20 units or more

The table above cites the risk per unit. In practice, patients receive an average of three units of blood per transfusion episode.

References:

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Administrative Offices & Donation Center

4040 Main Street

Kansas City, MO 64111

816.753.4040 Toll Free: 888.647.4040

Neighborhood Donation Centers in Missouri

Blue Springs Center

1124 W. 40 Highway, Blue Springs,
MO 64015

816.224.0875

Gladstone Center

7265 N. Oak Trafficway, Gladstone,
MO 64118

816.468.9813

St. Joseph Center

3122 Frederick, St. Joseph, MO
64506

816.232.6791 Toll Free: 800.725.6791

Neighborhood Donation Centers in Kansas

Olathe Center

1463 E. 151st St., Olathe, KS 66062
913.829.3724

Overland Park Center

Times Square Shopping Center
10568 Metcalf Ave., Overland Park,
KS 66212

913.383.6800

Topeka Center

800 SW Lane, Topeka, KS 66606
785.233.0195 Toll Free: 800.279.5943

For More Information

If you have any questions after reading this brochure, please discuss them with your physician or contact Community Blood Center at

1-888-647-4040.

Schedule your next donation online at

www.savealifenow.org