

Need for Motivation of Plateletpheresis Donors: A Tertiary Care Cancer Center Experience from Eastern India

Sir,

Blood donor motivation is an integral part of blood transfusion service. The National and State Blood Transfusion Councils, with support from various non-government organizations carry out extensive work for donor motivation and retention.^[1] However, these kind of motivational activities in the community are mostly directed toward whole blood donation.

In this era of component therapy, apheresis plays a vital role in planning of transfusion therapy for patients especially those suffering from cancer. Apheresis is a procedure where blood is withdrawn from a donor, separated into components, one (or more) of the components is retained and the remaining constituents are recombined and returned to the individual. When such a procedure is applied to extract platelets from a donor it is called plateletpheresis and the platelet unit derived from such procedure is called a single donor platelet (SDP).^[2]

As a part of a tertiary care cancer center, we had to deal with numerous SDP requisitions daily. These were mainly

meant for patients for whom stem cell transplants were planned and also those suffering from chemotherapy related thrombocytopenia. Usually these patients were from overseas countries and had no donor pool available with them. Therefore, the responsibility lay on us to motivate and recruit donors for plateletpheresis.

The total number plateletpheresis requisitions received during the 1 year period (August 2011-August 2012) were 282. The number of plateletpheresis procedures done was 276. Rest 6 patients had to be managed by random donor platelets. Out of 276, 269 were male donors (male: Female = 38.4:1). A total of 34 donations were voluntary from the staff and rest 242 were replacement donations. All the patients received same group SDP except four patients, where plasma from SDP was reduced before transfusion to prevent adverse reactions [Table 1].

Donor recruitment for plateletpheresis to meet the huge demand from the clinicians was not an easy task. However constant counseling of patient's relatives and friends and motivation of the staff helped us to achieve the goal. The main hindrances faced during donor recruitment were:

- The people who would come to donate were totally ignorant about the procedure
- When explained about the procedure, the donors were usually reluctant to volunteer for platelet donation because it is time consuming (ranges from 60 to 150 min)^[2]
- Donors were apprehensive regarding the remaining blood components being transfused back. They were afraid that it might carry infections
- Donors were also apprehensive regarding lowering of their own platelet count after donation and feared that it might lead to bleeding.

Table 1: The total number and distribution of plateletpheresis donations during the period of study

Month	Voluntary donation	Replacement donation	Total donations	Number of same group donor	Number of different group donor	Change in group	Any procedure
August-11	2	0	2	2	0		
September-11	3	2	5	4	1	O+ transfused to A+	Reduction of SDP plasma
October-11	0	7	7	7	0		
November-11	0	13	13	12	1	O+ transfused to A+	Reduction of SDP plasma
December-11	1	12	13	11	2	O+ transfused to A+	Reduction of SDP plasma
January-12	9	17	26	26	0		
February-12	8	25	33	33	0		
March-12	2	36	38	38	0		
April-12	1	34	35	35	0		
May-12	5	16	21	21	0		
June-12	1	17	18	18	0		
July-12	1	30	31	31	0		
August-12	1	33	34	34	0		
Total	34	242	276	272	4		

SDP: Single donor platelet

The above observations led us to think that most blood donors are not aware of SDP donation and plateletpheresis procedure. Hence, motivational activities should be directed toward platelet donation also. Plateletpheresis is a need based procedure and hence platelet donations cannot be accepted randomly at any time. However, voluntary blood donors can be targeted and motivated to donate SDP whenever required. The advantages of platelet donation over whole blood donation should be stressed upon. The regular voluntary blood donors should be made aware that there is no or minimal blood loss in this procedure and they are fit to re-donate after 15 days.^[3] It should also be highlighted that this procedure yields a higher quality product, reduces multiple donor exposure and causes fewer donor reactions due to return of fluid.^[3]

The principles of donor recruitment may be short term, i.e. to recruit SDP donors to meet the immediate need.^[1] This is usually done in most of the centers practicing plateletpheresis. However without any long-term planning to recruit donors of tomorrow, a culture of voluntary blood donation in the community cannot be developed. Thus, short term and long-term programs should go hand in hand.^[1] Such kind of long-term strategies, if incorporated in routine donor motivational programs, will help to enlighten the people regarding the procedure of plateletpheresis and also help the transfusion service to acquire SDPs when required.

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