

WHY SHOULD I DONATE BLOOD?

- The need for blood affects us all.
- Eight out of ten people need blood or blood products at some time in our lives.
- One out of every ten patients in hospital requires blood transfusion.
- The number of blood donations that patients receive depends on their medical condition.
- Although an average of three donations is transfused to a patient, some patients require many more.
- Blood is in constant demand for the treatment of patients involved in accidents, patients with anemia, malaria, cancer, or a bleeding disorder such as hemophilia.
- Many surgical operations would not be possible without the availability of blood.
- Blood may be needed during or following childbirth or for an exchange transfusion in newborn babies.
- The need for blood never stops.
- Blood donors save lives.
- Every blood donation gives the person who receives it a new chance at life.

WHO MAY DONATE BLOOD?

- Donors should be between the ages of 18 and 65, weigh at least 45 kg and not have donated blood within the previous 90 days.
- Not everyone can be a blood donor. This is designed to protect the health of the donor as well as the health of the patient who receives the blood.
- People who have certain medical conditions or who are taking certain types of medication are not permitted to donate blood.
- People whose sexual behavior places them at increased risk of transmitting infections through transfusion are also not permitted to donate.
- If any of the deferral criteria apply to you, or if for any reason you think that your blood may be unsafe to transfuse to a patient, you are advised not to donate.
- The mission of the blood transfusion service is to provide all patients with sufficient, safe, quality blood and blood products.
- If you are in any doubt about whether you should donate blood, please discuss it with a staff member.
- We know it can be disappointing if you are not able to give blood.
- However, we hope you will understand that our overriding responsibility is to ensure the safety of donors and the safety of the blood for patients. What do I get in return for my blood donation?
- Blood is donated voluntarily, freely and without payment or reward of any kind.
- Blood must only be donated in the spirit of altruism for patients who need blood or blood products as part of their medical treatment.
- Blood is donated as an act of goodwill towards a fellow human being, and nothing should be expected in return for giving this gift of life.
- What you do get in return is a physical and emotional sense of well-being and the knowledge that you have helped to save someone's life.
- We all hope that someone will do the same for us when we need a blood transfusion.

IS THERE A SUBSTITUTE FOR BLOOD?

- Blood is made up of different components and each component has its own important function.
- The main function of red blood cells is to carry oxygen to the tissues and remove carbon dioxide.
- The main function of platelets and the coagulation factors is to prevent and stop bleeding.
- Each one of these blood components has an important role, and any one of these components may be used in the treatment of patients with certain medical conditions.
- Substances designed to carry oxygen, such as a hemoglobin solution prepared from cattle's blood, are currently being evaluated.
- This is available in extremely limited quantities internationally.
- These oxygen carriers circulate in the bloodstream for a short period and are usually used only as an interim measure.
- In cases of trauma or during surgical operations, the volume of blood which is lost by the patient may initially be replaced with synthetic solutions (crystalloid or colloid solutions) such as normal saline. These solutions are not recognized as "blood substitutes" but are blood volume expanders. They do not carry oxygen.
- They are frequently used in the initial treatment of patients, for example in the ambulance or in the operating theatre, while blood is being obtained from the blood bank.
- There is no substitute for blood.
- When the patient's hemoglobin level, platelet level or coagulation factor level falls below a critical point, blood transfusion is the only option.
- Patients rely on voluntary blood donors to provide red blood cells, platelets and coagulation factors, to meet their medical needs.

WHAT DOES IT MEAN TO HAVE A RARE BLOOD TYPE?

- Every person has an ABO and rhesus blood group: i.e. group A, B, AB, or O and RhD negative or RhD positive.
- In addition to these ABO blood groups; people's red blood cells consist of many other antigens as part of their red cell structure.
- Occasionally, people have an unusual, specific red cell antigen.
- Alternatively, some individual's red cells lack an antigen which is common to most people.
- This would be recognized as a "rare" blood type.
- Some patients have antibodies against a specific blood type and in these circumstances, it may be difficult to find blood from a regular blood donor which is compatible with that of the rare type of the patient.
- Before every blood transfusion, compatibility tests are performed on the blood of the patient and on the blood of the donor, to ensure that the transfused blood will not cause any untoward reaction in the recipient.
- First-time blood donors are notified by mail of their ABO blood group and RhD type, after the blood has been tested in the BTS laboratory.

HOW DOES THE BTS MEET THE NEED FOR RARE BLOOD TYPES?

- If a patient who needs a blood transfusion is identified by the BTS as having an unusual blood type, blood that is compatible with that of the patient will be identified from the panel of regular blood donors.
- A panel of blood donors who have rare blood types has been compiled.
- This is the so-called “rare blood donor file”.
- Blood from donors on this panel can be obtained whenever needed.

IS THERE ANYTHING SPECIAL I NEED TO DO BEFORE DONATING?

- Eat at your regular mealtimes and drink plenty of fluid before you donate blood.
- Have a snack at least four hours before you donate, but do not eat too much right before the donation.
- Before you leave the blood donor clinic after your blood donation, have some tea, coffee or a soft drink to help replace the blood volume (approximately 450 ml) which has been reduced as a result of your donation.
- Avoid taking aspirin or aspirin-like anti-inflammatory medication in the 72 hours prior to your donation, because aspirin inhibits the function of blood platelets. If you have taken aspirin within this period, your blood platelet component cannot be transfused to a patient.

WHAT IS THE PROCEDURE WHEN I DONATE BLOOD?

- Firstly, you will be asked to provide personal details such as your name, address, age, weight, ID number and/or date of birth. A medical history is taken by means of a written questionnaire.
- These questions are designed to ascertain that it is medically safe for you to donate blood and that the recipient of your blood will not be harmed in any way.
- In addition, very personal questions relating to your mode of life and sexual behavior are asked to ascertain that you are not at increased risk of potentially transmitting infection through transfusion.
- People are asked to exclude themselves from blood donation if any of the deferral criteria apply to them.
- A finger prick test is performed to ascertain if your hemoglobin level is within a safe range for donation purposes.
- Potential donors will be permitted to donate only if this measurement is within the defined, acceptable range.
- If everything is in order you will proceed to donate your blood.

HOW LONG DOES THE DONATION TAKE?

- The procedure, which is performed by a trained, skilled health-care professional, takes approximately 30 minutes.
- You will give about 450 ml of blood, after which you will be advised to remain on the donor bed for a few minutes longer and then to take some refreshments.
- Plan to spend about half an hour to an hour at the blood donor center, for the entire process, depending on the number of donors.

DOES THE NEEDLE HURT THE ENTIRE TIME?

- No. There may be a little sting when the needle is inserted, but there should be no pain whatsoever during the rest of the donation.

HOW LONG WILL IT TAKE MY BODY TO REPLENISH THE DONATED BLOOD?

- Your body replaces the blood volume (plasma) within 24 hours.
- Red blood cells are replaced by the bone marrow into the circulatory system within about three to four weeks, while the lost iron is replaced over approximately six to eight weeks.

HOW WILL I FEEL AFTER THE DONATION?

- Most people feel great!
- Donors who know what to expect and have eaten regular meals, or have had a snack and fluids before donating, are usually fine.
- Most people who donate blood have no after-effects.
- You should drink extra fluids for four hours following your donation.
- A small number of people feel light-headed and others occasionally faint after donating.
- In the unlikely event that you feel faint, be sure to quickly lie completely flat.
- Lying flat, even if on the floor, with your legs elevated, will usually resolve any feelings of dizziness or light-headedness quite quickly and may prevent fainting.
- If you do not feel well after a blood donation, please contact the staff at your nearest blood donor center.

CAN I DONATE DURING MY MENSTRUAL PERIOD?

- Yes, if you are feeling well.

HOW SOON AFTER DONATING CAN I PARTICIPATE IN SPORT?

- After donation, it is best to have a snack and drink plenty of fluids over the next four hours.
- You can then resume routine sporting or training activity.
- It is advisable not to donate blood three to four weeks before participating in a major sporting event such as a marathon, or a competitive football match, where you intend to push yourself to the limit of your ability.
- In the unlikely event that you do feel faint, light-headed, or unwell during any sporting activities, you should immediately stop the activity and rest.
- Many active sports people are regular blood donors.
- People who frequently push themselves to their limit during their sporting activities should consider donating only platelets. In this situation the red blood cells are returned to the donor after the donation and the individual's oxygen-carrying capacity and performance are not compromised.

WHAT IS A "UNIT" OF BLOOD?

- A unit is about 350 ml or 450 ml of donated blood. The average adult has between four and five liters of blood in his or her body and can easily spare one unit.

HOW OFTEN CAN I DONATE BLOOD?

- You may donate either whole blood or a specific blood component such as blood platelets. Each type of donation requires a certain waiting period before you can give again.
- After a whole blood donation, a person must wait at least 90 days before donating again.
- The minimum interval between whole blood donations is 90 days.
- Platelet and plasma donors can donate more frequently.

IS IT POSSIBLE TO GET HIV/AIDS FROM DONATING BLOOD?

- No. You cannot get AIDS or any other infectious disease by giving blood.
- The materials used for your blood donation, including the needle, blood collection bag, tubes and finger prick needle are new, sterile, and disposable.
- These are used only once for your blood donation and then destroyed after use.

WHAT TESTS ARE PERFORMED ON MY BLOOD AFTER DONATION?

- A sample of your blood will be tested to determine your ABO blood group and RhD type.
- Other tests will be performed to detect certain transfusion-transmissible infections such as hepatitis B and C viruses, HIV and syphilis.
- Not every infection in a person's blood can be detected by these blood tests.
- It is therefore vitally important that people who may have been infected with a transfusion-transmissible infection do not, under any circumstances donate blood.
- After the tests have been performed, your blood will be used either as whole blood (transfused to one patient) or, after separation into its various components such as the red blood cells, platelets, and plasma components, to help several patients.

IF YOU TEST THE BLOOD THAT IS DONATED, WHY DO YOU HAVE SUCH A LENGTHY DONOR SELECTION PROCESS?

- Our duty is to provide a safe blood supply and the BTS needs your help to maintain these standards.
- Although all blood donations are tested for viruses, including hepatitis B, hepatitis C, HIV and syphilis, there is a period after a person first becomes infected with a virus during which the infection may not be detectable (this is often referred to as the "window period"). So, the person's blood could still transmit a disease if transfused to a patient, even though their tests were negative and there was no sign of infection at the time of donation.

WHY DO YOU ASK SUCH PERSONAL QUESTIONS DURING THE DONOR SELECTION PROCESS?

- A major component of our screening process is designed to identify those people who are at a greater risk of transmitting blood-borne infections.
- To safeguard the blood supply, it is imperative that these people do not give blood.
- All donor selection measures must meet stringent regulatory requirements.
- While the process is lengthy and may seem intrusive, it is absolutely necessary to safeguard the blood supply.