Ensuring Transfusion and Transplantation Safety During Blood Shortages

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National Blood Supply – NBCUS 2004 Data

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- Shortages
  - 42% decrease in the total number of surgical procedures postponed (952 in 2001, 546 in 2004)
  - Shortages less frequent, but when they did occur they were more acute
  - Among hospitals reporting unmet blood needs, mean number of days of unmet nonsurgical blood need increased significantly from 2.1 days in 2001 to 19.27 days in 2004
Blood Supply – Day-to-day Picture

- Periodic regional shortages
  - Typically local, seasonal and corrected within a few days through collections and imports
- No national shortages
Task Force’s Strategies to Meet Blood Needs

- National organizations work together to:
  - Monitor supply
  - Move blood from one region to another when needed
America’s Blood Centers, American Red Cross and Blood Centers of America collect daily supply data

National groups working together, through AABB Interorganizational Task Force, to provide HHS with joint data.
Critical Supply Data

- Total RBCs plus
  - O pos and O neg
- Expressed as “days of supply” on regional center shelves
- At least weekly
- Reported on national basis
Moving Blood

- ABC, ARC, BCA and NBE move blood from region to region on daily basis.
- During disasters, AABB Interorganizational Task Force on Domestic Disasters and Acts of Terrorism coordinates movement of blood into affected areas.
- Task Force no longer believes our community needs a national blood reserve.
Barriers to Meeting Blood Needs

- Logistics – transportation, fuel, communications
- Regulatory restrictions (e.g., during pandemic)
- Need to control usage – Triage
- Overall mass-casualty constraints
Conclusion

- Blood community can monitor supply and share data with HHS and then, with logistical support, move blood to affected regions when needed.
- Continued need to increase overall supply to 7 days