My name is Debra BenAvram and I am the Chief Executive Officer for AABB. One year ago, I stood before the Advisory Committee on Blood and Tissue Safety and Availability (ACBTSA) and shared AABB’s experience with the COVID-19 pandemic. My comments reflected – and continue to represent – the experiences of AABB’s diverse membership, including transfusion medicine professionals, accredited blood collectors and accredited hospitals.

AABB is pleased that the ACBTSA is exploring solutions and recommendations related to two of the significant challenges that I highlighted last year, including (1) the absence of real-time data on blood availability, utilization, and hemovigilance and (2) threats to the blood system supply chain. Today, AABB offers the ACBTSA three suggestions with respect to this effort.

First, AABB encourages the ACBTSA to ensure that its recommendations address opportunities to integrate the solutions, and the blood supply, into all preparedness and response policies. For instance, policymakers are working to translate lessons learned during the pandemic into policies for the future. Therefore, it would be beneficial for the ACBTSA to recommend that the Assistant Secretary for Health work with Congress, the Assistant Secretary for Preparedness and Response, and other policymakers to ensure that they incorporate considerations related to the status of the blood supply, as well as the complete blood supply chain, into each phase of disaster management, including during preparedness, response, recovery, and mitigation.

Second, the ACBTSA can promote the critical role of the blood system by making recommendations that encourage interagency collaboration related to solutions that may benefit multiple sectors of the public health system. In advance of this meeting and as part of AABB’s written remarks, we provided the Advisory Committee with the comments that the blood community submitted in response to HHS’ request for information related to a national public health strategy for the prevention and control of vector-borne diseases in humans. These comments highlight the blood community’s instrumental role in surveillance, screening, and testing for multiple infectious disease agents. Federal, state, and local public health agencies often leverage the expertise and capabilities of the blood community, and the solutions being explored by this Advisory Committee can benefit the broader public health system.

Third, we urge the Advisory Committee to include in its recommendations the resources needed to establish, implement, and maintain each solution. Investing in the blood supply will strengthen our nation’s preparedness and response capabilities as well as our public health and health care systems.
Similar to the ACBTSA, AABB is engaged in continuous efforts to understand the stressors that threaten the blood supply and to proactively offer solutions to mitigate their impact. By the time I addressed this group last August, the nation had already experienced a precipitous drop in the blood supply, a steep reduction of blood utilization, followed by a sudden increase in utilization. Since then, adversities beyond the pandemic have continued to jeopardize blood availability including: summer wildfires, hurricanes, severe winter storms, continued declines in blood collections, and recent increases in utilization. These events disrupted collections, created transportation difficulties, and complicated the ability to ensure that the blood supply was available when and where it was needed.

AABB is committed to working with the entire blood community to address the complex challenges that impact blood safety and availability. We commend the ACBTSA for its leadership in exploring solutions that can strengthen the resiliency of the blood supply and offer our support and assistance in advancing these important efforts.