

PLEASE SCAN FOR THE LOCATION



Mankhool, Kuwait Road, Al Mankhool - Dubai

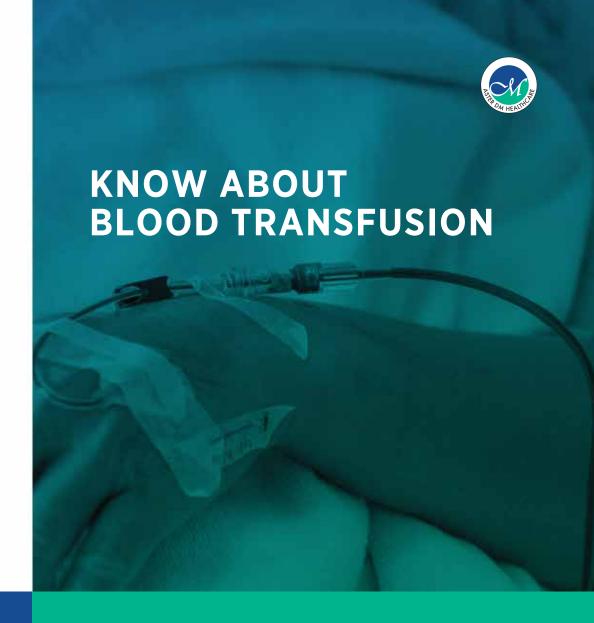
DEPARTMENTS

Accident & Emergency · Anesthesiology · Cardiology · Clinical Nutrition

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Internal Medicine · Laboratory Services · Neurosurgery · Ophthalmology

Obstetrics & Gynaecology · Orthopedics · Patient Affairs







A blood transfusion occurs when a person receives human blood through an intravenous (IV).

Human blood is made up of many components. Three main components of blood may be transfused.

- 1. RED BLOOD CELLS RBC carry oxygen throughout the body. All of the body's organs (especially the heart, lungs, brain, kidney) need oxygen to work properly.
- 2. PLATELETS Platelets are small sticky cells that the body needs to start blood clotting mechanism, and this mainly prevents or stops bleeding.
- **3. PLASMA** Plasma is the fluid component of blood. It is mostly water but also has a number of proteins that help blood to clot.

WHO NEEDS A BLOOD TRANSFUSION?

- You may need a blood transfusion because of illness, surgery, or injury.
- A blood transfusion may be given because of a shortage of red blood cells in the blood.

either because the body is not making enough of them or because of blood loss.

- Sometimes the bone marrow, which produces blood cells, fails to work properly and is unable to make enough of them. This may be due to disease or as a result of treatments, such as chemotherapy.
- Haemolytic anaemias like thalassemia and sickle cell anaemia
- Bleeding disorders due to thrombocytopenia or haemophilia

WHAT ARE THE BENEFITS OF BLOOD TRANSFUSION?

- Blood transfusion can save a patient's life and limit the complications of severe blood loss.
- Blood transfusion benefits patients by treating or preventing following situations.
- A lot of bleeding can lead to a seriously low haemoglobin level and cause damage to body organs due to a lack of oxygen. If bleeding continues the platelets and plasma volumes are also decreased. Then, blood cannot clot, and bleeding will not stop.

WHAT IS NEEDED BEFORE TRANSFUSION?

 You will have a blood test to determine your blood type. This is necessary to know what kind of blood your body will accept and to match it to the donor blood.

WHAT ARE THE RISKS OF BLOOD TRANSFUSION?

• Blood products are very carefully cross-matched to the patient's blood type. But sometimes, it's difficult to obtain fully cross-matched blood products. In rare occasions transfused blood can also have effects on your immune system. Side-effects could include: IMMEDIATE / DELAYED AND NON-IMMUNOLOGIC

IMMEDIATE

• Haemolytic transfusion reaction-Immune destruction of red cells occurs due to the incompatibility of transfused red cells to the recipient's plasma

- Immune mediated platelet destruction-Due to the allo antibodies in the recipient
- Febrile Non-Haemolytic reaction-Temperature rise of more than 1 Degree or 2 F during or 4 hours after transfusion
- Allergic reactions- Occurs due to mild or self-limiting urticaria which usually responds to antihistamines.
- Anaphylactoid/Anaphylactic reactions –
 May present with Hypotension / Nausea /
 Vomiting / Diarrhoea / Abdominal pain /
 Severe dyspnoea / Laryngeal edema /
 Bronchospasm
- TRALI-Transfusion related acute lung injury-Acute onset of Hypoxemia and non- cardiogenic pulmonary edema occurring within 6 hours of blood or blood component transfusion in the absence of other causes of acute lung injury or circulatory overload.

DELAYED

- Mainly occurring due to the previously transfused red cell all immunised patients in whom antigens on transfused red cells provoke anamnestic production of antibody.
- Iron overload Occurring due to chronic repeated transfusions.
- Alloimmunisation to antigens of red cells/white cells/platelets/plasma may occur unpredictably after transfusion
- PTP-Post transfusion purpura occurs dramaticsudden and self-limited thrombocytopenia
- TAGVHD-Transfusion associated graft Vs host disease – Is rare but with a fatality rate of 100% due to the overwhelming infection in the setting of pancytopenia

NON-IMMUNOLOGIC COMPLICATIONS

- TTI-Transfusion transmitted infections-Transmission of Virus/Bacteria/Parasites/vCJD
- Bacterial sepsis
- TACO-Transfusion associated circulatory overload-Complication of blood transfusion leading to the cardiogenic pulmonary oedema occurring due to the excessive volumes of blood and blood product transfusion.
- -Hypothermia-Occurs due to rapid infusion of cold blood and blood products
- Metabolic Complications-May accompany large volume transfusions especially in neo-nates s and patients with liver/Kidney disease.

Few other risks of transfusion-transmitted disease for each unit of blood are:

- HIV (AIDS) about 1 in 4 million
- Hepatitis C about 1 in 3 million
- Hepatitis B about 1 in 1.2 million
- West Nile Virus about 1 in 1 million

All blood units are carefully screened to exclude any transmissible pathogens as far as possible.

