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Vascular Endothelial Cell Markers and Serum Ferritin in Platelet and Blood Donors

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referral advice and refer to specialist services in a timely manner. The need for more systematic monitoring of replies will be reviewed.

Methods: Files for donors managed from 2011 to 2013 were examined for proportion of GP forms returned, whether referral had been made, and whether to a specialist liver centre.

Results: A majority of forms (>70%) were returned in a timely manner for both hepatitis B and C over this period. There was a large variation in referral patterns ranging from local gastroenterology services to tertiary liver centres.

Conclusion: Although the majority of forms were returned, some individuals were not referred, or only after prompting by NHSBT, so more systematic monitoring of replies is required in future. NHSBT should provide clearer guidance for GPs about where to refer and what constitutes a 'specialist centre'. A significant minority of donors appear not to receive specialist follow up after being found to have hepatitis B or C infection, representing a public health issue as these people have the potential to transmit infection to others and are at risk of long term health problems.

PO10

Response Rate of Blood Donors after Notification of Reactive Test Result on Their Blood Samples

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Introduction: Adequate and safe supply of blood and blood components is a crucial part of blood transfusion services. Blood donors with reactive screening test results are informed by letter and telephone call, and are requested to come for the counseling either at the blood center or ICTC. It has been realized that most of the notified donors either do not respond at all or do not follow up after their first visit to blood bank.

Aim of the Study: This study was undertaken to see the response of reactive voluntary blood donors after they were notified of their status by phone calls or letters. **Material and methods:** We evaluated reactive donations during the period of 2 year (January 2010 to December 2011). Blood Donors with reactive test results were notified and their response rates were evaluated at various levels.

Results: 416 donors (0.87%) were found to be reactive for different markers. 249 of 416 reactive donors (59.8%) responded positively to the notification calls and attended counselling. Response was highest for HBV reactive donors (154/225 i.e. 68.4%) as compared to other reactive donors. After their first visit, around 6% donors could not be contacted further and lost to follow up. 50 donors (22.3%) did not continue their treatment and 2 (both hepatitis B) were confirmed negative. Therefore at 6 months of follow up, only 182 (43.7%) donors were continuing/completed their treatment.

Conclusion: Response rate of reactive blood donors in developing countries is quite low. These results suggest poor health care knowledge and a poor understanding regarding the screening tests.

PO11

Vascular Endothelial Cell Markers and Serum Ferritin in Platelet and Blood Donors

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The aim of this protocol was to perform a prospective analysis of prothrombotic and iron status markers to assess the coagulation and haematinic effects of regular, anticoagulated extracorporeal circulation – using a Trima Accel blood cell separator. First time male whole blood donors, who never donated platelets or whole blood, were used as the control group.

Samples from 31 regular male plateletpheresis donors (Group A) and from 14 first time male whole blood donors (Group B) were tested pre- and immediately post donation, and immediately pre next donation, for ferritin, Protein C, fibrinogen, vWF Ag, sP-selectin, sE-selectin and ADAMTS-13. An additional 33 regular male plateletpheresis donors (Group C) and 17 first time male whole blood donors (Group D) had serum ferritin levels checked at baseline.

The single significant difference between Groups A and B predonation, was Group B had higher serum ferritin levels ($P < 0.05$).

Group A had a lower mean predonation protein C level than the postdonation value ($P < 0.001$): postdonation protein C was higher than the follow-up ($P = 0.007$). In Group B, the mean predonation protein C value was higher than postdonation ($P = 0.001$).

Group A had higher predonation serum ferritin than at follow up ($P = 0.005$). Group B showed no significant difference in serum ferritin between any of the three time point measurements ($P > 0.05$). Ferritin $< 20 \mu\text{g L}^{-1}$ was found in 6/64 (9%) of Group A and C and only 1/31 (3%) of Group C and D. This would support the value of serum ferritin measurement in regular plateletpheresis donor welfare management.

Decreased protein C levels in whole blood donors postdonation and increased protein C levels in plateletpheresis donors postdonation suggest that coagulation is a dynamic process *in vivo* with a balance maintained between production and consumption. These results also indicate that protein C is a significant marker of vascular endothelial activation.

PO12

Female Gender Participation in the Blood Donation Process in a Resource Poor Settings: Case Study of Sokoto in North Western Nigeria

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Background: One of the biggest challenges to blood safety particularly in Sub-Saharan Africa is accessing safe and adequate quantities of blood and blood products. The present study was designed to investigate the level of female gender participation in the blood donation process in Sokoto, North Western Nigeria.

Materials and Methods: In this present retrospective study, we investigated the level of female gender participation in the blood