

# **EDITORIAL: A PLEA FOR A TRULY NATIONAL BLOOD TRANSFUSION SERVICE**

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The discovery by Landsteiner in Vienna in the year 1900 of blood groups opened up not only an exciting but also a life-saving technique for human blood transfusion. Work in this field progressed step by step, and today blood transfusion throughout the world has become an essential part of a hospital service, required for all major surgical procedures, for specialised areas such as cardiothoracic surgery, to save lives of persons involved in accidents, in complicated cases of childbirth, neonatal jaundice and many other conditions. The use of blood and blood products in diseases such as thalassaemia, bleeding diseases, leukaemia and other blood diseases has greatly improved the quality of life in patients suffering from these conditions. Today, component therapy has become the corner-stone of modern blood transfusion practice. Not more than 20% of blood collected is used as whole blood in most developed transfusion services, the rest being processed into components such as cryo-precipitate, platelet-rich plasma, platelet concentrates, packed red cells, fresh frozen plasma, as well as fractionated blood products such as albumin and gamma globulin.

In Malaysia, the idea of establishing a national blood transfusion service was formulated more than 14 years ago. The first step was taken in 1972 when the framework of such a service was organised. The Blood Services Centre at the General Hospital, Kuala Lumpur, became the headquarters of the service. The methodology, rules of work, stationery, record-keeping and other technical aspects were quickly updated, and standardized throughout the country.

National seminars were organized. Laboratory technologists and doctors received training both at WHO-sponsored courses and at the centre.

However, the Blood Services Centre soon afterwards came under the General Hospital administration and was regarded as a small part of the General Hospital Service in which capacity it had to compete with all other less complex, less demanding 'supporting' services for all its requirements. The Blood Services Centre endeavoured to keep up with the latest trends in the practice of clinical blood transfusions, promoted blood component therapy, established haemophilia, diagnostic and management facilities but it became administratively a hospital-based transfusion service. At the same time it had to undertake and assume the responsibilities of a national referral and training centre without adequate facilities of staffing, equipment and space.

As there are no haematologists in any of the peripheral hospitals except in Penang, there is poor communication and co-ordination and therefore inadequate development of the nationally organized service. The lack of such a service is being acutely felt today. The frequent reports of shortages of blood does, to a great extent, reflect the true picture in most hospitals. More public education is necessary to encourage ordinary citizens to come forward to donate blood. What is becoming apparent with the establishment of an increasing number of private as well as public hospitals, is the lack of centralization, especially in areas of high population density such as

in Kuala Lumpur. Establishment of small blood banks in peripheral and private hospitals leads to fragmentation of the service; therefore, higher expenditure and inefficient usage of blood, inability of small blood banks to provide blood components, competition for blood donors, artificial shortages of specific blood groups and an inability to provide adequate blood of rarer types and lack of uniformity in standards of cross-matching, etc., especially between private and public sectors. But at present these mini-blood banks are providing an invaluable service, especially to the private sector.

A lot is talked and written about incentives for blood donors, prevention of professional donors and lack of availability of blood. These problems cannot be overcome unless the blood banks in the country are well run and co-ordinated and are able to provide enough blood to both the public and private hospitals under a **TRULY NATIONAL BLOOD TRANSFUSION SERVICE**. Such a national blood transfusion service should be able to cope with the demands of the increasing number of private hospitals in the country. This would mean increased administrative and technical staff, and such an organization should be an independent body and not a department of the General Hospital. Some of the private hospitals are running mini-blood banks because they do require blood for emergency surgery, and for routine surgical and medical conditions. It will be useful to have some form of control over the qualification and training of personnel working in blood banks, both in the

government and private hospitals. This responsibility cannot be left to the most junior technicians any more. If the sale of blood has to be abolished, it is very essential that the private hospital blood banks should receive the full support and total co-operation of the National Blood Transfusion Service. It is not enough to just bring out legislation to ban the sale of blood without being able to provide blood to patients who are in dire need. Such a legislation may be difficult to implement in any case. It can only be implemented if the National Blood Transfusion Service can provide, freely and quickly, blood to the public and private hospitals whenever it is required. This is unlikely to be achieved in the near future. At the moment this co-operation is limited to special occasions only. If the public is educated on the life-saving nature of their gift of life, and we can develop a truly National Blood Transfusion Service, then and only then can we correct the perpetual shortage of blood to the government and private hospitals. Our country will also be able to keep up with the high technological developments that are taking place in the various fields of blood transfusion. Thus, we can make blood and its products available to our citizens in all parts of the country.

It seems a pity that the good concepts formulated not so long ago, which established the beginnings of a National Blood Transfusion Service, has been allowed to become confused and ambiguous. It is time that serious thought be given and collective efforts be made to strengthen the core and framework of this essential service.