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23rd conference standards and individual approaches in clinical Transfusion Medicine

The conference was organised by the Russian transfusionist association and national Pirogov medical & surgical center and was held from December 13 to 15, 2017. The conference was attended by over 150 specialists from Russia, Belarus, Ukraine, Germany, Netherlands and Japan.

Opening the conference, professor Eugene Zhiburt informed the audience about new Russian national statistics: in 2016 1.196.633 patients (0,82 % of the population) received 3.221.608 blood component transfusions with a total volume of 983.946,2 litres. Head transfusionist of the Russian MoH assistant professor Tatiana Gaponova informed the audience that during the coming year, the technical regulations on blood safety will be replaced by the relevant rules, which presume:

- 100% donor blood NAT testing for HIB, HBV and HCV;
- reduction of plasma quarantine time from 180 to 120 days;
- digital storage of blood service data during 30 years;
- each donor typing for A, B, RhD, C, c, E, e and K;
- platelet cryopreservation;
- plasma lyophilisation;
- pathogen inactivation of plasma (including pooled plasma) immediately after collection with the permission of its immediate clinical use;
- non-ABO compatible transfusions of platelet concentrate in additive solution transfusions;
- increasing storage of platelets up to 7 days.

Professor Mikhail Zamyatin presented the Protocol for the administration of blood products, as well as other medications for restoring the coagulation potential of the haemostatic system, while providing emergency treatment to patients taking anticoagulants for a long time.

The protocol extends to the following clinical situations:

1. Scheduled surgery.
2. Bleeding (spontaneous or caused by trauma, injury or other known causes) in patients receiving anticoagulants.
3. The need to perform an emergency patient, receiving an anticoagulant, a traumatic procedure or other intervention associated with an increased risk of bleeding.
4. Suspected overdose or poisoning with anticoagulants

Ufa regional blood bank shared the information about equal clinical effectiveness of one or double units of platelets pathogen-reduced by UV-amotosalen. Already five regions of Russia (Baskortostan, Yakutiya, Vladimir, Tomsk and Smolensk) deliver omly pathogen-reduced platelets.

Toshio Mazda, as a key foreign speaker, told that in 1985 Japan used a lot of albumin; it derived 3.84 million litres of plasma. This is a quarter of the albumin products in the world. Japanese population was only 1/50 in the world. For this reason, Japan was criticized by the WHO. The Japanese government established guidelines for appropriate use of albumin and FFP. Now albumin usage decreased 1/3. However, self-sufficiency rate of albumin is still only 60%. IVIG and factor VIII derived from plasma is almost 100% self-sufficiency

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now. However, factor VIII from the plasma is only 12.5%; almost all haemophilia patients use recombinant factor VIII.

ABO blood group ratio is A:O:B:AB = 4:3:2:1. It is a similar ratio with Moscow population. Since 1999, the mini-pool NAT, 500 samples pooling for the screening of three viruses, HBV, HCV and HIV was implemented; thereafter, in 2000 the pool size was reduced to 50 samples, and to 20 samples in 2004. With the aim to further improve the safety, the NAT system changed to the single/individual NAT in 2014. Despite being HBs-antigen negative, anti-HBc positive and anti-HBs negative or weekly positive blood are not used for transfusion. If anti-HBs titer is high, the blood is allowed to transfusion.

Specific of Japan is anaphylaxis caused by haptoglobin, due to haptoglobin deficiency is 1/3,000 in Japanese.

Blood transfusion should be different from each country. For examples, blood type is different; allo-antibody screening cell have to include Dia in Japan and Mia in Southeast Asian countries. Mongoloide have to be careful for haptoglobin deficiency. Our goals are to make blood products more safety and more effective. Exchange information between countries is important for progress of sciences.

The next conference in Moscow will be held on 13rd of December, 2018. All colleagues are welcome.