

Volume 1 Issue 2 January 2011



Report For Workshop On Blood Components: In June 2010, Sankalp India Foundation, ISBTI Karnataka and NIMHANS had organized a Workshop

on Blood Components.

Find a report on the workshop on Page 3



Importance Of Hemoglobin Test Before donating Blood: Dr Sundar, a senior blood transfusion specialist and the chief of blood banking services at NIMHANS Bangalore

 $highlights\,the\,importance\,of\,the\,Hb\,Test.$

Turn to page 3 to read his views



Remembering The Tsunami: Volunteers of Sankalp India Foundation held a silent vigil to remember the countless lives that were lost during the Tsunami.

Turn to Page 4 to read more on the event.

Hello,

Happy New Year!

After publishing 42 issues of Sankalp-E-Patrika, the monthly electronic newsletter from Sankalp India foundation, we are extremely excited to bring out a paper edition of the newslette, the Sankalp Patrika. We plan to keep this newsletter as a refreshing doze of information, education and motivation for people who are related to the cause of voluntary blood donation.

Enhancing quality and increasing participation will be the main focus areas. In order to achieve this ambitious goals we have the highly enabling support of people who have served the cause of blood all their lives.

The newsletter will enable a rich interaction between the community and the experts. It will provide an opportunity for the community related to voluntary blood banking to share their knowledge and experiences. It will serve the need to keep the readers abreast with the initiatives and efforts that Sankalp India Foundation is putting in to 'Give Life A Better Chance'.

Good things can happen only when the good people work together. We welcome your constructive criticism and feedback for the Sankalp Patrika. We also welcome your articles on contemporary and informative topics related to Blood.

We would like to take this opportunity to thank the the experts who have contributed articles and the sponsors for enabling this publication.

Happy reading!

- Editor



The Initiative For Better Blood Banking

Sankalp India Foundation has been existing as a blood donor organization for the past 7 and a half years now. Time and again, it has had to redefine it's ways of working so as to put the best practices and methods available ito improve the services it offered both to the common man and the people from the blood banking community.

Sankalp's Blood Donation Organization worked majorly in 3 diverse areas related to blood - Working towards providing timely help during blood emergencies, Networking of blood banks to have a statewide helpline number for blood in Karnataka and Organizing safe, quality oriented blood donation drives. With these working wings, the organization had been able to work with the best specialists and from the medicos banking community. These blood experiences have greatly helped in shaping the organization's perspective of blood banking practices and methodologies.

specialists.

Sankalp India Foundation would pick up topics and studies that are both relevant and practical to modern day blood banking and look to conduct learning programmes, studies on these topics. Each such initiative will be headed by a senior blood transfusion specialist and look to work in a time bound manner. Also, one volunteer from Sankalp India Foundation will be closely involved in order to understand and assist the expert.

One of the first activities that will be driven under the banner of IBBB will be a workshop that will be held in June 2011. Through this medium, Sankalp wishes to call on all blood banks to participate and contribute in the success of IBBB.

Another program that has been kicked off under the banner of the IBBB is a study on various types of reactions faced by donors after having donated blood and the causes



After having shifted gears from Bangalore to Karnataka, the challenge with Sankalp was to provide a platform for sharing of knowledge and information among the blood banking workforce in the 150+ blood banks across the state. Sankalp India Foundation is pleased to announce the arrival of this platform - The Initiative For Better Blood Banking (IBBB).

IBBB now is officially the 4th working wing under Sankalp Blood Donation Organization. Formed with a sole purpose of improving blood banking practices in the our country by embracing latest technological advances and adopting various improved solutions to address challenges faced in blood banking, IBBB will focus on both theoretical and practical learning.

IBBB will work towards conducting workshops, seminars, scientific studies, sharing of useful general updates in blood banking practices through frequent interactions with the best transfusion

for the same. In blood donation drives, volunteers from Sankalp will be looking to capture a complete profile of the donor and along with inputs from the doctor who handled the pre donation counseling, coming down to the near accurate reason for a reaction after donating blood should be possible. A profiling of all such reactions encountered would be carried out under appropriate guidance of a senior blood transfusion specialist. Bangalore in order to try and identify the most common reasons and then work towards mitigating such risks.

This IBBB venture will be highly effective to improve quality in blood banking provided members from the blood banking community participate and co-operate in these activities Sankalp India Foundation requests all blood banks to join hands for better, safer, effective and quality focused blood banking.

The important thing is not to stop questioning. - Albert Einstein

Another Life Saved ... Another Story To Tell ...

In April 2010, volunteers of Sankalp had to go through an arduous experience in trying to find blood for a patient in Davangere. A volunteer who worked on this blood request expressed some feelings in the following manner.

One more blood request was catered! One more life was saved! The volunteers of Sankalp had one more story to tell!

A lady from Davanagere needed blood of the Bombay negative group. Nature acts in strange ways! Remove the Rh and H antigens from O positive blood- the most common group, and you'll have Bombay negative group blood- the rarest blood group possible! The possibility of finding this group donor is one out of twenty five thousand, biologically! Practically, most don't even know their blood groups- so finding a donor was no less than locating a pin in a football ground! The volunteers took it up as a fresh new challenge-something they had never faced before!

The volunteers collected the necessary details from the patient's husband, Ravi. The patient, Veeramma, had complexities with her fallopian tube and was bleeding continuously. Ravi had come to Bangalore in search of a donor. There a doctor suggested him to contact Sankalp India Foundation- a voluntary youth organization that works for the cause of blood. The volunteers were set to work immediately. They were scanning age-old databases, consulting doctors and blood

bank officers. The best possible option was to find a donor in or around Davanagere and ask him to donate. Finally the volunteers were able to track three donors in Bangalore. Two of them were unavailable. The third lady, Pramilla, was out of station!

Interestingly, once upon a time, Pramilla had complications during her pregnancy-that is when she realized how rare her blood was! Since then, years had passed, and she had been helping people around her by donating blood. Her husband had created an exhaustive database of these patients who belonged to the Bombay negative blood group! Thankfully, he agreed to share the database with the young volunteers. Each person from the database was approached. Most contacts were unavailable. One of them, Yusuf, was in Chennai.

Meanwhile, Veeramma's condition was worsening and Ravi was getting restless. It was getting increasingly difficult for the volunteers to control the situation, especially when so much of trust was laid on them. The volunteers had come in touch with other organizations as well - but nothing helped. Finally, their 24 hours of continuous effort boiled down to two options- first, Yusuf had to be convinced to donate in Chennai, second, Pramilla had to come to Kundapur (near Udupi) to donate blood. The latter option seemed more feasible at the moment. The volunteers set off to make traveling arrangements for

Ravi.

Within an hour, Ravi left in a bus, leaving behind the proud and smiling volunteers who shook hands and hugged each other as they walked back! One more blood request was catered! One more life was saved! The volunteers of Sankalp had one more story to tell!

Note- Considering the interest of the patient and concerned people, the names of the characters have been changed.



ADVANCE REPUBLIC DAY
WISHES TO OUR READERS
FROM ALL THE
VOLUNTEERS OF
SANKALP INDIA
FOUNDATION

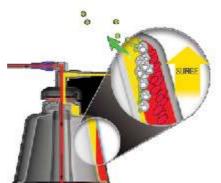
Apheresis – A solution to multiple ailments



Apheresis, a technology very commonly used today in most of the blood banks and healthcare institutes, was a little known practice a few years back in the country.

With a vision for the need of such technology in the country, Span Healthcare, in 2005 formulated a mission to serve the community by partnering

with the care-givers and bringing home leading edge technologies that can enhance the standards of medical practice in India. Looking forward for accomplishing this mission, Span Healthcare partnered with Haemonetics, USA; a globally renowned blood management company with world class blood component separation systems.



the automation of blood donation operations.

Some of the key features of MCS+ that makes this machine unique and a preferred choice among the healthcare professionals:

✓ Portability (less than 26 kg in weight) – thus making it very convenient to carry to the donor or patient's side depending upon the need and the prescribed procedure.

✓ Single arm access: The Apheresis donor is pricked only once on only one arm for maximum convenience of the donor.

The patented "Lantham bowl-surge" technology & the "time saver" robust mechanics of the equipment makes the procedure time shortened, thus adding further comfort to the blood donor, along with highest quality platelet yield.

In comparison with whole blood random donor platelets (RDP), single donor platelets (SDP) offer several significant advantages:

- Provides a consistent dose for transfusion.
- Delivers less risk of bacterial contamination.
- Exhibits less cellular activation.
- Ensures better platelet recovery rates and longer survival.
- Decreases risk of infections, allergic reactions and platelet alloimmunization for patients.

No wonder this compact yet robust machine processed more than 4 million Plateletpheresis procedures in Asia Pacific in last 5 years.

In India, in 2010, at least 60,000 apheresis procedures were processed on more than 240 MCS+ machines across the country to save the patients suffering from dengue and other clinical ailments

Call Toll Free 1800 425 0360

From supporting Single Donor Platelet /Plasma collections (Donor focus) to providing Therapeutic Plasma Exchanges (TPE), harvesting PBSCs from patients/donors, managing total leukocyte reduction, therapeutic platelet reduction, therapeutic autologous erythro-apheresis etc, (Therapy focus), this equipment has acquitted itself remarkably well.

MCS+, the latest version of Apheresis machine from haemonetics,

known commonly for plateletpheresis, has eventually evolved into a mobile collection system with multi-component platform, which

offers a complete portfolio of protocols for the collection of

platelets, red cells, plasma, and combinations of these.

The versatility of this system enables blood collection organizations throughout the world to implement a complete and economical solution for

Apart from dengue outbreak, platelet apheresis is extensively used in cancer patients on chemotherapy, to replenish their blood coagulation usually system destroyed by the therapeutic drugs and irradiations.



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Be a first rate version of yourself, not a second rate version of someone else - Judy Garland

The Importance of Hemoglobin Test - Dr Sundar

Testing of blood donors for hemoglobin before donation is very important to determine whether the donor, males or females, is fit to donate blood. Drugs & Cosmetic Act permit blood banks to collect blood only when the donor has hemoglobin level of 12.5 am/dl. That means no blood bank should take blood from the donors who has hemoglobin less than 12.5 gm/dl. donor should undergo hemoglobin test every time he/she donates blood. If any of the blood banks violates this rule, they can be punished.

The basic concept is that we should not deprive or harm the donor and at the same time, should benefit the recipient that is patient. No harm is done to the donor if he has 12.5 gm/dl and has a weight of 45 Kgs or And, hemoglobin of above. 13.5 g/dl is required for a donor to donate 2 units of red cells by apheresis method.

That means no blood bank should take blood from the donors who has



hemoglobin less than 12.5 gm/dl. And, donor should undergo hemoglobin test every time he/she donates blood. If any of the blood banks violates this rule, they can be punished.

Scientifically speaking a donor having minimum hemoglobin of 12.5 gm/dl can tolerate removal of 1 gm of hemoglobin along with one unit of blood (350 or 450 ml). This loss is regained to the donor within a month period. But, however, to give adequate time for recovery, a minimum of 3 months, is given to the donor for recovery and next donation.

If a donor has hemoglobin more

than 16 gm/dl, he may be suffering from polycyethemia meaning excess red cells and hemoglobin. Excess red cells lead to thicker blood. This condition is technically called hyper-viscosity. Thicker blood does not flow well into the micro-circulation.

Polycythemia may be a prelude to blood cancer. Hence, blood collected from polycythemia is not used for transfusion. Blood banks doing quantitative test counsels the donor to consult a physician.

Hemoglobin test method: There are several methods available. The simple method is by specific gravity method by using copper sulphate solution adjusted to specific gravity of 1.053, which corresponds to 12.5 g/dl. This method is especially useful in blood donation camps where there is large number of donors. However, this method will not detect exact level of hemoglobin. It can detect only whether blood has 12.5 gm/dl or not. Hence, it is a semiquantitative method. So, it cannot detect polycythemia and there are chances of blood from polycythemia patient going to the patient.

Cyanmethoglobin method is accurate but time consuming. It is suitable in blood banks and when there is less number of donors to attend.

Portable and handy equipments are available, which uses strips pre-coated with reagent. The blood is applied over to the strip and then inserted in to the equipment. Within a minute there will be a digital display of the result. The donor gets the satisfaction of knowing his/her hemoglobin level on the spot. Only disadvantage of this method is it is costly. Slowly blood banks are switching over to this method.

A Report On The Workshop On Blood Components

The Workshop on Blood Components was organized by ISBTI Karnataka, Blood Transfusion Centre NIMHANS and Sankalp India Foundation on 18-19th June 2010 at NIMHANS Convention Centre, Bangalore. The inauguration of the workshop was graced by the presence of eminent dignitaries including Prof. Shankar, the vice chancellor of NIMHANS, Dr. Jayakeerthy, Dr. Soubhagya Puttaram, Dr. Ramesh, and Dr. Chandrashekar

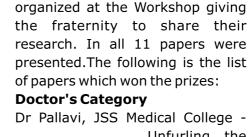
SESSIONS

The choice of topics for the program was made with heavy emphasis on the learning needs of the blood transfusion technologists along with the blood bank officers in mind. The senior and most qualified members of the fraternity were requested to take up the scientific sessions. While the best n the state came together, the event also incorporated an opportunity to learn from the best practices elsewhere. Dr. Rajyadhaksha from Tata Institute of Cancer Research Mumbai was invited to talk about quality control of blood components.

The study material for the sessions was made available to the delegates in advance so that they can focus on learning rather than trying to make notes.Dr Rajyadhyaksha's talk on Quality Control of Blood Components served as a triggering point for the quality consciousness to set in.

The workshop was unique in the

sense that the afternoon sessions were dedicated to the practical demonstration of the subject matter learnt in the morning. The delegates found this opportunity greatly useful. NIMHANS blood bank was the venue for the



Dr Pallavi, JSS Medical College -

Unfurling the Rational Use of Platelets in Dengue

Technicians Category

Deepa D, Manipal Blood Bank Shivanna N, NIMHANS, **Quality Control**



demonstrations.

The two major demonstrations were:

1. Demonstration of Blood Components: Packed Red Cells, FFP, Platelet Rich Plasma, Platelet Concentrate, Cryoprecipitate - Mr. Shivanna N (Technologist, NIMHANS, Bangalore)

2. Demonstration of Platelet apheresis and Plasmapheresis - Mr. Abdul Wazir (Chief Technologist, Manipal Hospital, Bangalore)

When asked about the most valuable aspect of the workshop, 30% delegates indicated the apheresis demonstrations. At the same time a lot of appreciation for the practical demonstration of the conventional methods to separate components was also seen.

The paper presentation event was

ARRANGEMENTS

The food arrangements for the workshop were made from a high quality and well known vendor "Nandini", which was much appreciated by the delegates who rated the arrangement as excellent (3.51/4.Rooms for the delegates were reserved at the air conditioned guest house at NIMHANS days before the workshop. High quality multipurpose folders with attractive handles were chosen to house the study material that was given to the delegates. The kits were armed with handouts of all presentation and the necessary stationary for the delegates. The delegates rated the kits as good with an overall aggregate rating of

3.08/4.

SPONSORS

The support and participation of the industry in the workshop was exemplary. A total of 7 sponsors contributed towards making the event successful. The financial contribution enabled and fueled the implementation of the vision of quality for the workshop

VALEDICTORY

Dr Sundar started the closing ceremony by interacting with the delegates in order to better understand their experience. He also expressed immense happiness and satisfaction at the presence of the blood banking community in one place oriented towards improving the learning. Rajat Kumar Agarwal shared more information about Sankalp India Foundation and at the same time, took the delegates through the planning and execution of the workshop. He also delivered the vote of thanks to ISBTI, NIMHANS, the scientific committee, the faculty, the delegates, the sponsors, the vendors and all other people involved in the workshop.Dr Shivaram lauded the efforts put in by Sankalp Volunteers and shared some lighter moments beside encouraging participation from the delegates for future programme. Dr Vishwanath announced the prize winners and Dr Soubhagya Puttaram gave away the prizes to the winners.

Sankalp Volunteers Remember The Tsunami

celebrating Christmas, there was a small group of people standing at a prominent crossroad in Bangalore with placards reminding people of the anniversary of the Tsunami on the evening of 25th December 2010. Sankalp India Foundation organized the event - ' Remembering the Tsunami' to mark the 6th anniversary of the worst disaster of our times and at the same time reinforce the pledge to act to provide relief to the disaster victims at the earliest after the disasters."

Disasters, either man-made or natural have frequently tormented our country. Time and again, earthquakes, floods, fires etc have come back to haunt and make lives miserable. Take for example, this tragedy in 2004. On the 26th of December 2004, a ghastly giant in the Indian Ocean rocked many countries including our very own India. On that day the killer Tsunami wrecked havoc in Tamil Nadu, Pondicherry, Andaman and Nicobar Islands, Kerala and Andhra Pradesh killing thousands and leaving countless people homeless. The few minutes of the raucous battering of sea waves was so hard and severe that till date people are left with rebuilding their lives. Perhaps, disaster relief preparedness in a vast country like India has slowly become one of the most essential needs.

While the whole world was busy **SANKALP AS A DISASTER** celebrating Christmas, there **RELIEF ORGANIZATION**

Within 36 hours of hearing the news about the Tsunami, Sankalp was at the area of destruction. What met the eyes at the scene of disaster was something which cannot be described in words. Thousands of bodies were lying piled up, and there was nobody there to even remove these dead bodies. Sankalp's participation

possible time when trauma and suffering are at their peak. This clear idea in Sankalp made the organization become prepared to provide relief to disaster hit areas at the time when it is most required in the best possible way. Since the inception of the DMMG wing, the organization has reached out to people during the Tsunami in 2004, the Kashmir earthquake in 2005, floods in Tamil Nadu, Kosi floods in Bihar in 2008, floods in



in this disaster sowed the seeds of Disaster Mitigation and Management (DMMG) wing in the Organization, which was till then primarily a full fledged blood donation organization.

Although disasters are mostly unpredictable and nearly unavoidable, Sankalp's idea for the DMMG wing's working was to ensure that Sankalp would participate and help in the disaster hit areas in the earliest

Karnataka and Andhra Pradesh in 2009 and during the terrorist attacks/bomb blasts at Mumbai, Jaipur, Hyderabad, and Bangalore.

SANKALP'S IDEA OF PREPARING FOR DISASTER

Sankalp India Foundation is on a mission to be fully equipped and prepared to provide disaster relief, be it in terms of human resources or resources to be provided during relief. With clearly defined protocols, trainings and mock drills of disaster hit scenarios, the Volunteers of Sankalp have specialized teams ready for the situation. When the news of the disaster reaches Sankalp, a code-red protocol is announced to all the volunteers. Volunteers are then required to confirm their participation in the relief mission. With the available volunteers, many respective teams are formed and all the protocols are followed which were already decided upon. Furthermore, we are carrying out a rigorous exercise to identify better and faster means of procuring and delivery of resources.

These strategies have proved themselves too. Take the case of the flood relief in Karnataka in October 2009 for example. "Our training and discussion sessions helped me clearly identify the areas of problems, the people to approach to understand the situation and make a good initial survey of the magnitude of the tragedy. It helped me formulate clear action items and get back to my team at Bangalore with relevant inputs" says Amit Sedai, who rushed to Raichur in less than 48 hours of the ravaging floods. Clearly the training, discussion and mock sessions have made an impact on the confidence, mental strength and the vision of volunteers while taking up both on field and off filed work during disasters.

YOU TOO CAN HELP IN DISASTERS!

Do you have an intention to help out during disaster relief? Are you looking for a way to participate? Here is your chance. Sankalp India Foundation is calling on individuals who wish to contribute. It could be people from medical community, students, professionals, or for that matter any individual who wants to join in to make a difference. You could also join us as a volunteer during disaster relief or contribute financially in the event of a disaster.

Call 9880132850 or drop a mail to sankalp.admin@gmail.com to see how you can help.

Participate

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