What if I have worries about receiving a blood transfusion?

If you have any concerns you should discuss these with your Doctor or Nurse.

How will I feel during my blood transfusion?

Most people do not feel anything whilst receiving a blood transfusion. You will be observed at regular intervals; if you begin to feel unwell during or shortly after your blood transfusion, you should inform a member of staff immediately. Some people may develop a temperature, chills or a rash. These reactions are usually mild and are easily treated with Paracetamol, or by slowing down the blood transfusion.

Fortunately, severe reactions to blood are extremely rare. If they do occur, staff are trained to recognise and treat these.

Symptoms of a reaction







Chills





Flushing





rash





Racing Pulse bone aches

temperature

If you feel unwell within 24 hours of a blood transfusion, tell your Doctor or Nurse immediately.

What to do after your transfusion?

After your transfusion has finished, the drip will be taken down. Staff will continue to monitor you to ensure you have not had any adverse reaction.

If you are interested in finding out more about blood transfusion and have access to the Internet, you may find the following websites useful:

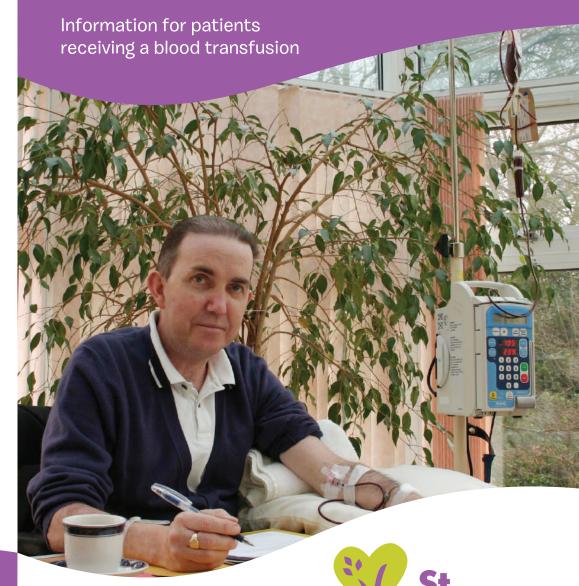
NHS Choices: www.nhs.uk/Conditions/Blood-transfusion/Pages/Introduction.aspx

NHS Blood and Transplant: www.nhsbt.nhs.uk/what-we-do/blood-transfusion/

This leaflet has been adapted from the NHS Blood and Transplant "Will I need a blood transfusion?"

St Gemma's Hospice: 0113 218 5500 Website: www.st-gemma.co.uk

Blood Transfusion



0113 218 5500 www.st-gemma.co.uk

Registered Charity No. 1015941

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Will I need a blood transfusion?

Like all medical treatments, a blood transfusion should only be given if it is essential. Your Doctor will balance the risk of you having a blood transfusion against the risk of not having one. Ask your Doctor or Nurse to explain why you might need a blood transfusion.

Why might I need a blood transfusion?

Blood transfusions are given to replace blood loss and treat anaemia. Anaemia is a reduction in the number of red cells in the blood. These cells are essential for carrying oxygen throughout the body. If the level of red blood cells in your blood is low, you may become very tired and feel lacking in energy. You may also feel breathless. This is because the amount of oxygen being carried around your body has decreased.

Many illnesses such as cancer can cause anaemia, either as a result of the illness itself or as a side effect of treatments such as chemotherapy. Most people can cope with losing a moderate amount of blood without needing a blood transfusion and this loss can easily be replaced with other fluids. Your body will make new red blood cells over the following few weeks. However, if larger amounts of blood are lost, a blood transfusion may be the only way of replacing blood rapidly. A blood transfusion may also be needed to treat severe bleeding, for example during or after an operation.

Is a blood transfusion my only option?

Certain medical conditions causing anaemia may be managed by treating the cause rather than by giving a blood transfusion. In other circumstances, it may be more appropriate to try and reduce the symptoms associated with anaemia with medications or other therapies rather than undergoing a blood transfusion. If you are told you need a blood transfusion, you should ask why it is necessary and whether there are any alternative treatments. You do have the right to refuse a blood transfusion, but you need to fully understand the consequences of this before doing so.

Reactions to blood transfusions are very rare. A small number of people do experience a delayed reaction to a blood transfusion.

Are blood transfusions safe?

The biggest risk from receiving a blood transfusion is being given the wrong blood.

You must be correctly identified to make sure that you get the right blood transfusion. Wearing an identification band with your correct details is essential. You will be asked to state your full name and date of birth, and the details on your identification band will be checked before each bag of blood is given.

If you have previously been given a card which states that you need to have blood of a specific type, please show it as soon as possible to your Doctor or Nurse and ask them to tell the hospital transfusion laboratory.

Compared to other everyday risks the likelihood of getting an infection from a blood transfusion is very low. All blood donors are unpaid volunteers. They are very carefully selected and tested to make sure that the blood they donate is as safe as possible.

The risk of getting hepatitis from a blood transfusion is currently about 1 in 500,000 for hepatitis B and 1 in 30 million for hepatitis C. The chance of getting HIV infection or HTLV (a virus which infects white blood cells) is about 1 in 5 million.

Although the risk of getting variant Creutzfeldt-Jakob Disease (vCJD) from a blood transfusion is probably low with a single blood transfusion, the risk of any infection will increase with additional blood transfusions. Each year, approximately 2 million units of blood are transfused in England and there have been just a handful of cases where patients are known to have become infected with vCJD from a blood transfusion.

How will my transfusion be given?

A blood transfusion is usually given through a tiny tube directly into a vein in the arm. Each bag of blood can take up to four hours, but can be safely given more quickly if needed.

You may be given more than one bag of blood during your transfusion.

What will happen?

Planning for the blood transfusion

If your Doctor or Nurse feels you may benefit from a blood transfusion, you may be asked to attend an Out-Patient blood transfusion assessment clinic at the Hospice. In some cases, patients are admitted to the Hospiice In-Patient Unit where they will undergo thorough assessment of symptoms and blood transfusion may be considered in addition to other options.

At this assessment you will have the chance to discuss the reasons for blood transfusion, possible alternatives to blood transfusion and the blood transfusion process with a Hospice Doctor. The Doctor will ask some questions about your health, existing medical conditions and whether you have other symptoms that may require assessment.

This decision to transfuse is based on several factors including:

- The likely benefits of blood transfusion as well as consideration of any risks involved.
- Whether you have existing medical conditions such as heart failure
- If you have had previous reactions to blood transfusions and require closer monitoring

The Doctor will take a sample of blood that will be sent to the laboratory to enable the correct blood to be matched ready for your transfusion.

You will be contacted at home to notify you when there is a bed available. In some circumstances, your St. Gemma's Clinical Nurse Specialist or Doctor may arrange for you to be directly admitted to the In-Patient Unit rather than attending the assessment clinic.

Attending for a blood transfusion

You will be assessed by a Doctor prior to your transfusion. Please bring any medication you are taking with you for them to see. You will also be asked to sign a consent form.