

# COVID-19 pandemic lessons for blood centers: Converting threat to opportunity

## Letter to editor

Corona virus pandemic caused by novel severe acute respiratory syndrome coronavirus (SARS-COV-2) has affected millions in the world.<sup>1</sup> This virus originated from Wuhan, China in December 2019 and after its transmission across the world it was called an epidemic by WHO.<sup>2</sup> Due to the spread of the virus in the world, the level of blood donations decreased in many countries. In some countries like Iran given the fact that a large portion of blood collections is allocated to regular blood recipients,<sup>3</sup> the decline in the blood inventory can significantly impact treatment of patients in regular need of blood.

The world was not ready for pandemic and this was also true in case of blood centers. The outbreak of this pandemic has brought about lessons for blood centers in the world. Blood establishments in the world with fixed blood collection centers especially in large cities should be replaced with mobile centers. In today world, the citizens residing in large cities cannot devote much time to participation in voluntary activities; therefore, it is necessary for blood centers to be reestablished and restructured in a way that citizens donate blood and blood components within the least time period and low cost. To avoid the negative impact of excitement on blood donors and retention of regular blood donors, we can use the community drives so that based on a predefined schedule and prior and precise information dissemination campaigns for the community residents, the drive would be hosted in the community.

The concept of inventory in blood centers are defined two pronged: blood inventory in blood transfusion cold chain and regular blood donors. Corona virus has shown that in the pandemic era there is the possibility for the inventory decline in blood cold chain of blood centers and then the shift should be made toward a sort of inventory which is more accessible. The military forces cause of appropriate organization and accessibility can be a good target for this sort of inventory. In some countries a part of the military are held by conscripts and this group because of their temporary presence cannot be relied on as living inventory members. Thus it is better that blood centers by communicating with permanent army cadet and maintaining their information confidential keep them reserved to be called on in urgencies.

Patient blood management can decrease inappropriate use of blood especially in elective surgeries<sup>4</sup> but in many countries this is not seriously implemented and alternative methods of allogenic blood transfusion are not introduced to patients. In pandemic situation, cancelations of elective surgeries and blood management in urgent surgeries play a significant role in making a balance between blood donation and use. Thus the importance of patient blood management, education to physicians about appropriate use of blood, and patient awareness raising activities about the right to decide on alternatives of allergenic blood can lead to a sudden drop in blood demand.

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Plasma therapy and the use of convalescent plasma is a method used in infection pandemics. Irrespective of disputes over its efficacy, during the pandemic it can create a national solidarity. The development of blood centers in the world has greatly been the outcome of national solidarity amid wars during which social capital including voluntary blood and plasma donors can expand; therefore, the reliance on voluntary blood and plasma donation in all eras particularly during corona pandemic and benefiting from people feeling of solidarity in a wide social problem can increase the culture of voluntary contribution. To this end, paying for COVID-19 convalescent plasma should be avoided and the demanded plasma be collected voluntarily. Blood centers based on the feeling of solidarity in society in the era of pandemic by building trust between blood centers and voluntary citizens should convert the threat of blood shortage into the opportunity of increasing regular voluntary blood donors.

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## Conflicts of interest

The authors declare no conflicts of interest.

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