

PAHO / WHO Report on the Status of the Americas Regional Action Plan for Access to Safe Blood 2014 - 2019

Blood programs meeting Dec 10 2020

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PAHO



Pan American
Health
Organization

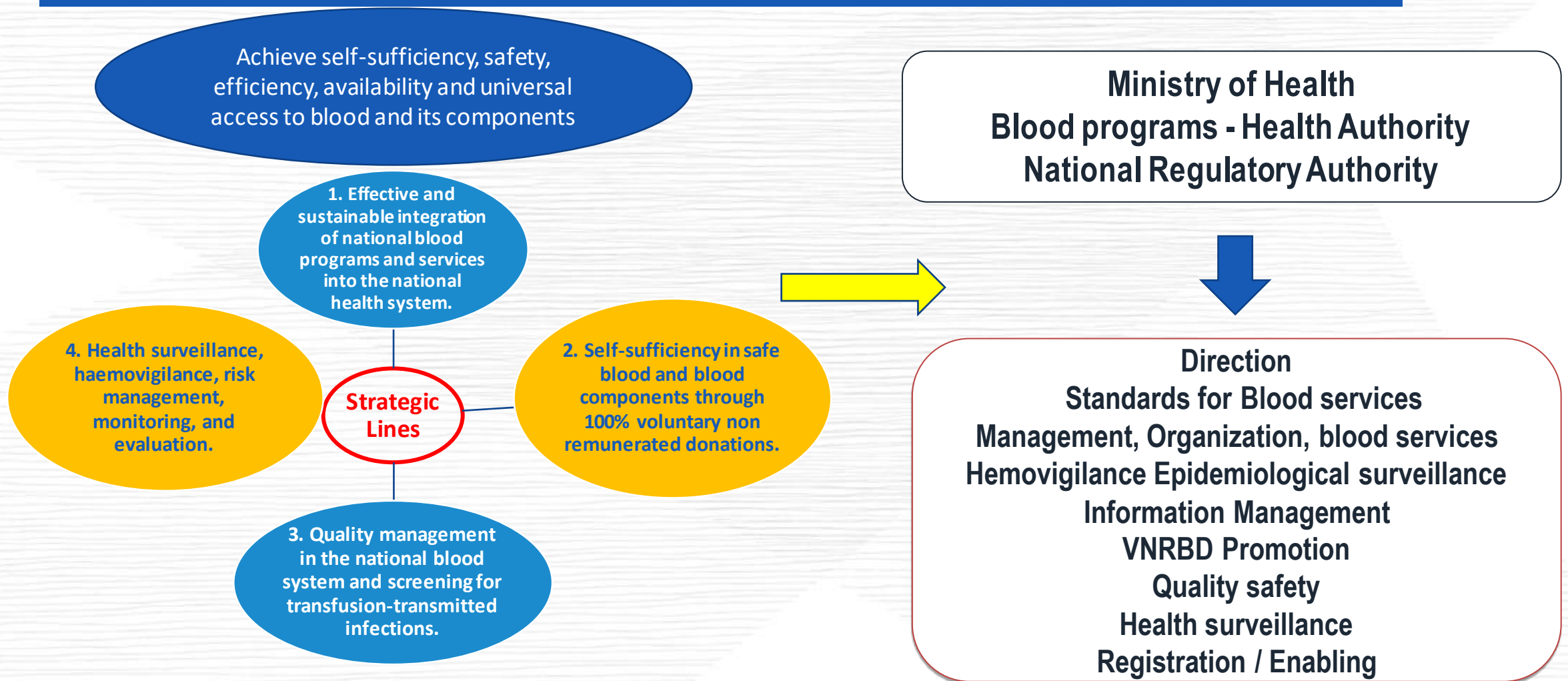


World Health
Organization
Americas

Content

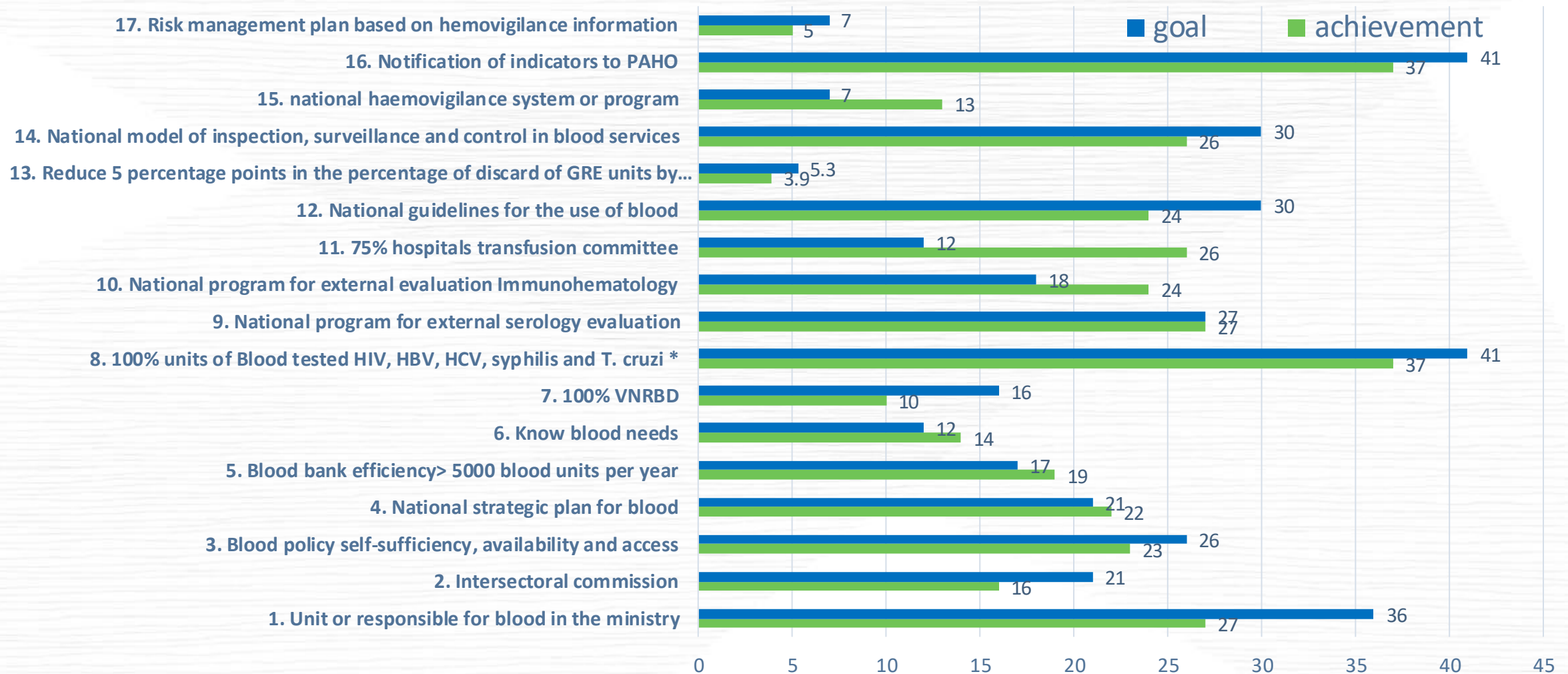
- Regional Plan Report to the Directing Council of PAHO / WHO
- Analysis of some indicators, access to safe blood, transfusion safety, rational use
- Survey Analysis Report on Blood Decrease in Times of COVID-19
- Conclusions

Plan of Action for the Universal Access to Safe Blood 2014 - 2019



Model Blood Law, PAHO 2001

Performance of the indicators of the Regional Plan for Access to Safe Blood 2014 - 2019



Safe Blood Supply

SUPPLY OF BLOOD
FOR TRANSFUSION IN
LATIN AMERICAN
AND CARIBBEAN
COUNTRIES

2016-2017

- **1. Access**

- **Affordability**
- **Reasonable cost**
- **Availability**

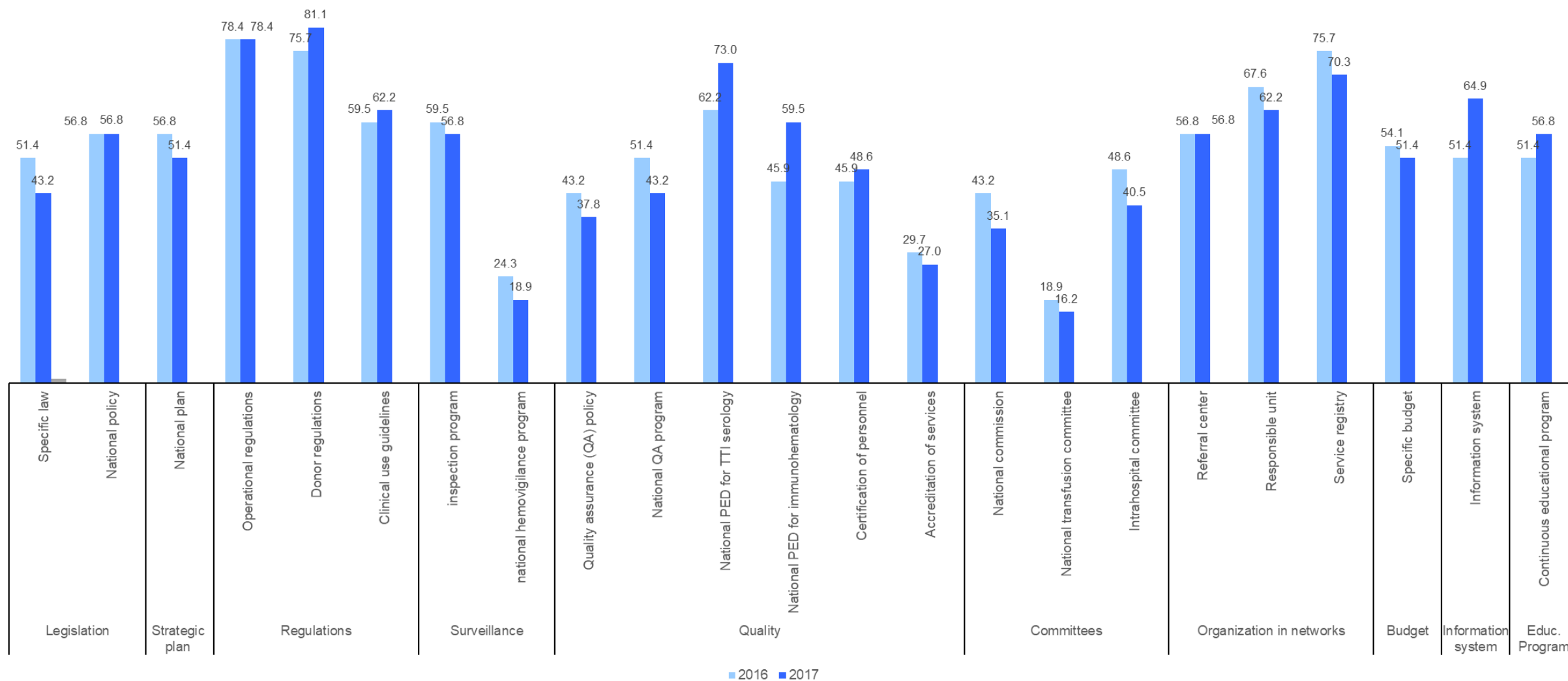
- **2. Safety - Quality**

- **Donors**
- **ITT screening-markers**
- **Quality**
- **Inspection vigilance and control**

- **3. Use of blood and components**

- **Use: Units per patient**
- **Adverse effects**
- **HV**

Governance mechanisms for blood transfusion, Latin America and the Caribbean 2016 - 2017



Access - Safe Blood Supply

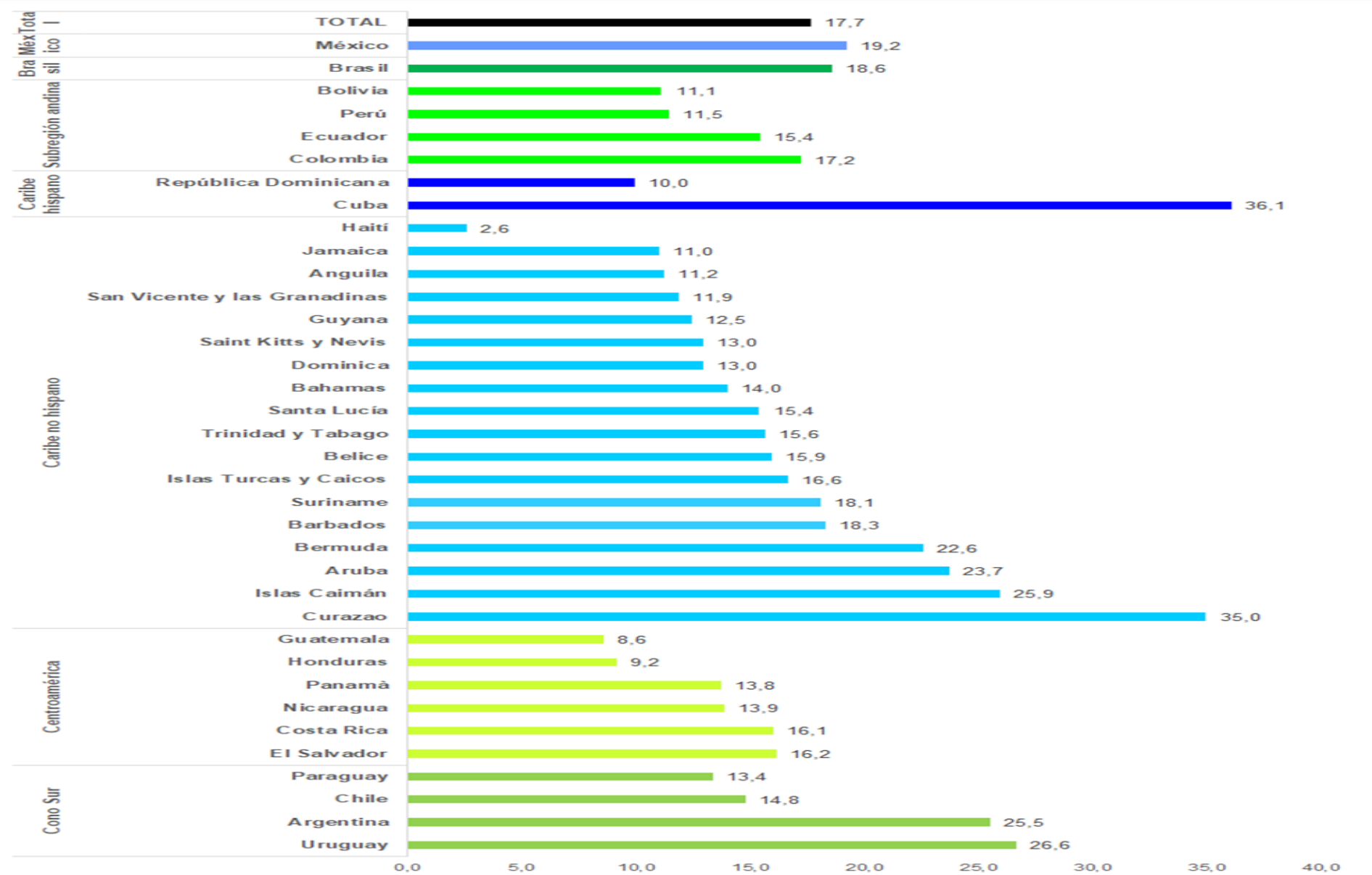
○ 1. Access:

Access to blood products, including equitable availability and affordability, is imperative to safeguard public health.

However, there is a significant imbalance between higher-income and lower-income countries in access to safe, effective and quality-assured blood products.

- Affordability
 - Availability
 - Reasonable cost

Number of blood donations per 1,000 inhabitants, by country and PAHO subregion, 2017



Donation rate per 1,000 inhabitants, by income level and population, 2017

Income level	Population 2017	% Population 2017	% Donation 2017	Rate 2017
High	71120617	11,3	14,8	21,9
Medium High	482553673	81,8	81,3	17,8
Medium Low	31935302	5,1	3,7	12,1
Low	10749642	1,7	0,3	2,6
TOTAL	596359234	100	100	17,7

EFFICIENCY OF BLOOD PROCESSING

Country	Number of Units Collected	Number of Collection Centers	Number of Processing Centers	Annual Processing By Bank	Daily Processing By Bank (260 Days)
AIA	191	1	1	191	1
TCA	466	1	2	233	1
CYM	1,555	3	3	518	2
KNA	570	1	1	570	2
DMA	961	1	1	961	3
VCT	1,307	1	1	1,307	5
BMU	1,603	1	1	1,603	6
BHS	5,596	3	3	1,865	7
ABW	2,513	1	1	2,513	10
LCA	2,776	2	1	2,776	11
BRB	5,243	1	1	5,243	20
CUW	5,665	1	1	5,665	22
BLZ	6,092	7	1	6,092	23
TTO	21,483	7	3	7,161	28
GUY	9,755	5	1	9,755	38
SUR	10,082	1	1	10,082	39
HTI	28,018	1	1	28,018	108
JAM	32,029	10	1	32,029	123
CARIBE	135,905	48	25	115,621	445

82 USD

51 USD

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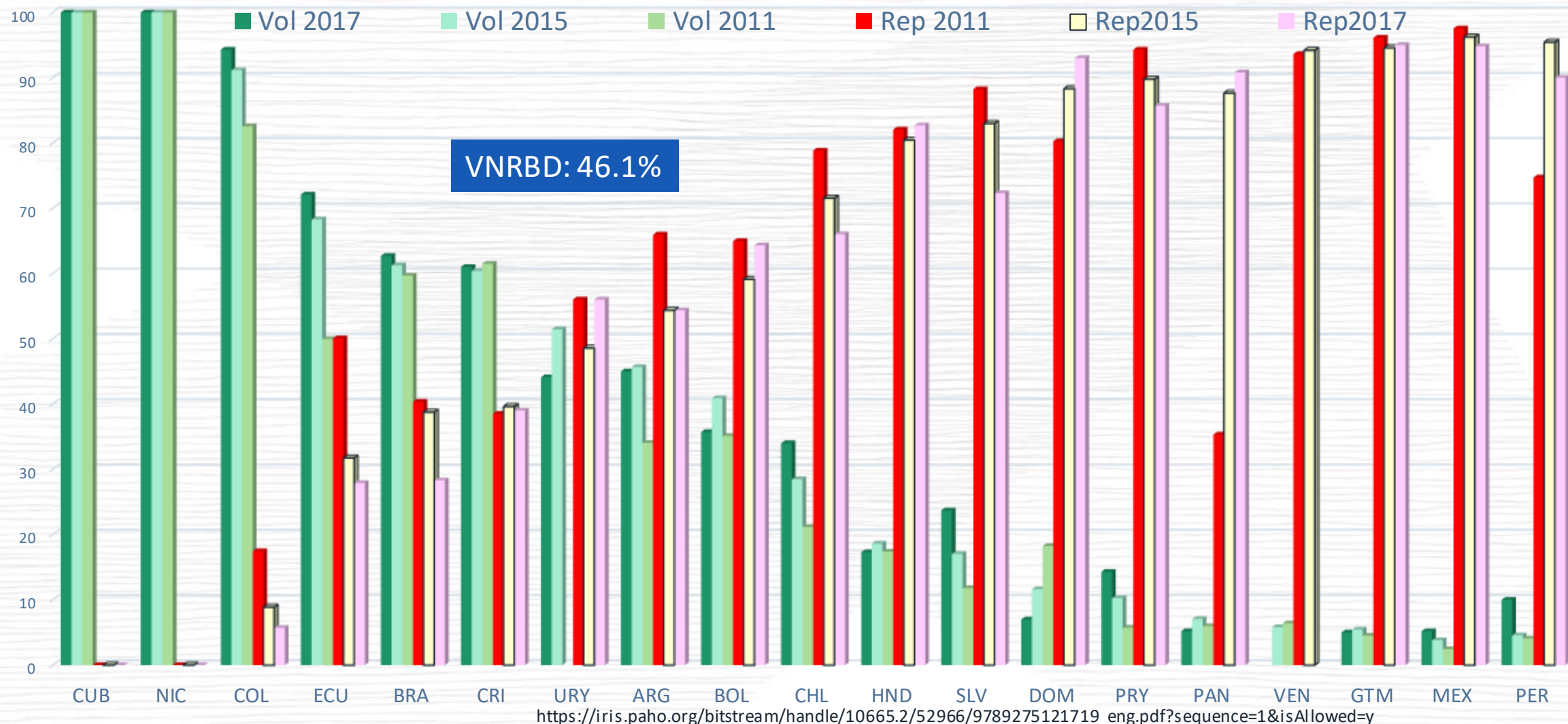
Safe Blood Supply

○ 2. Safety - Quality :

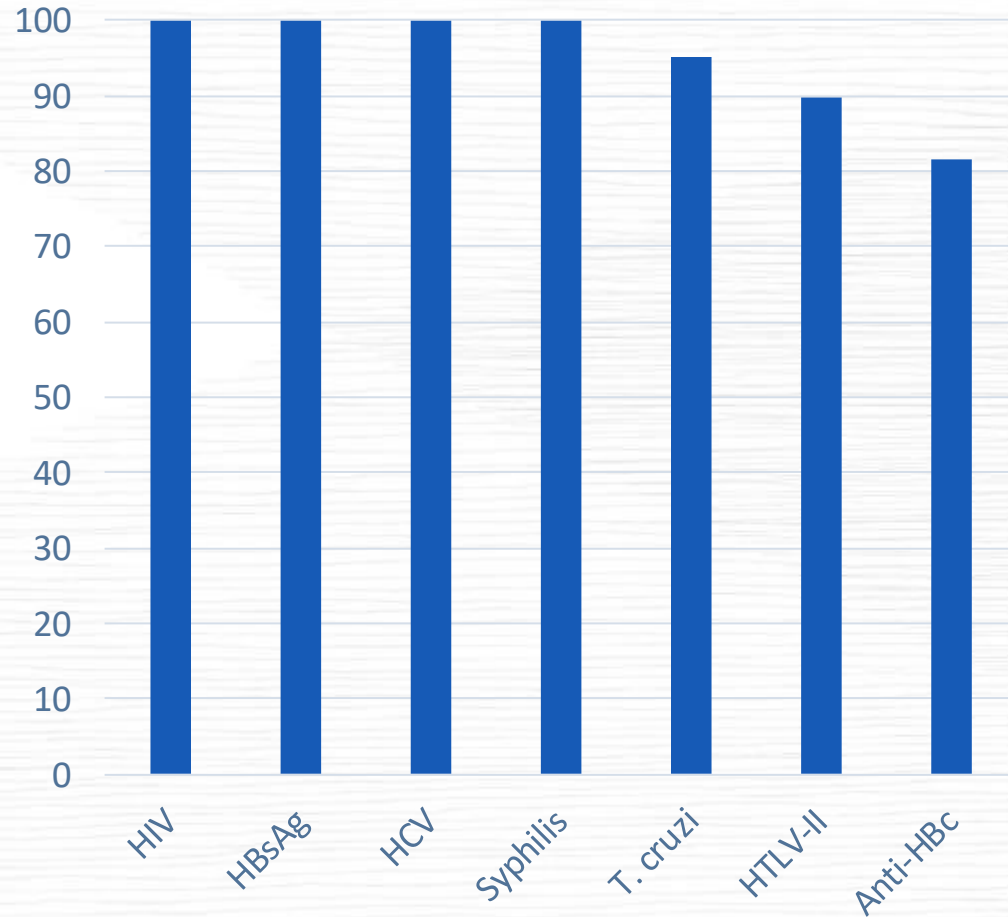
Selection of low-risk donors and serological screening for agents susceptible to transmission by transfusion, coupled with standardized procedures are essential strategies to safety, efficacy and quality of blood.

- **Donors**
- **ITT screening - markers**
- **Quality**
- **Inspection vigilance and control**

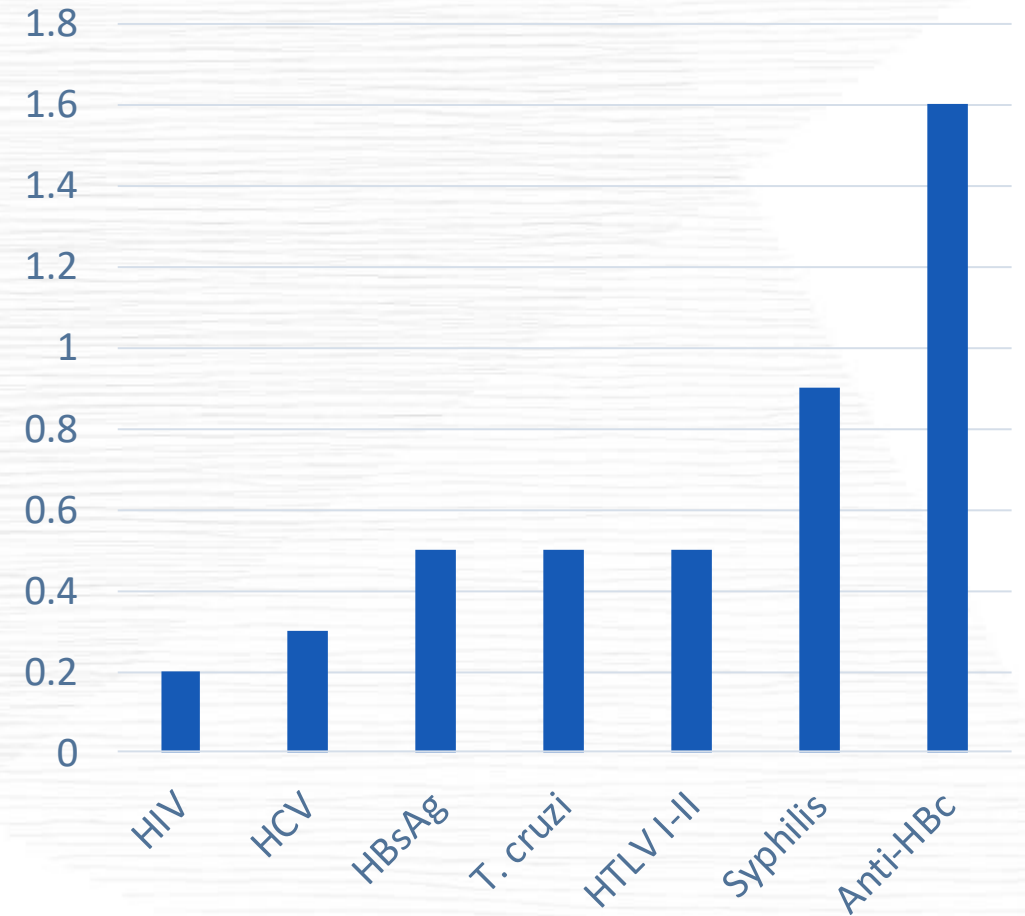
Percentage Voluntary Donation, Latin America 2011 - 2017



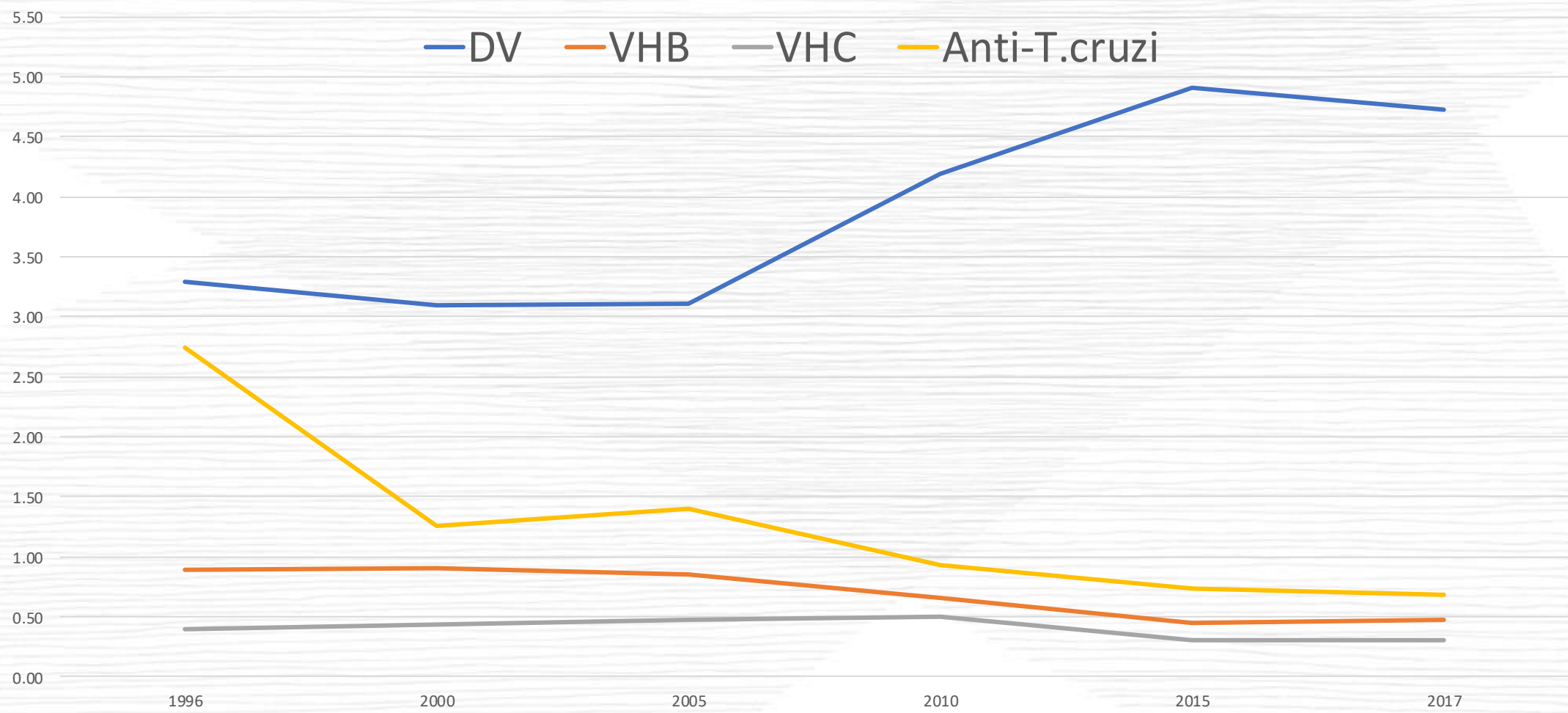
Average by region of coverage in screening tests for ITT, Region 2017



Region average of prevalence (reactivity) for ITT markers, Region, 2017

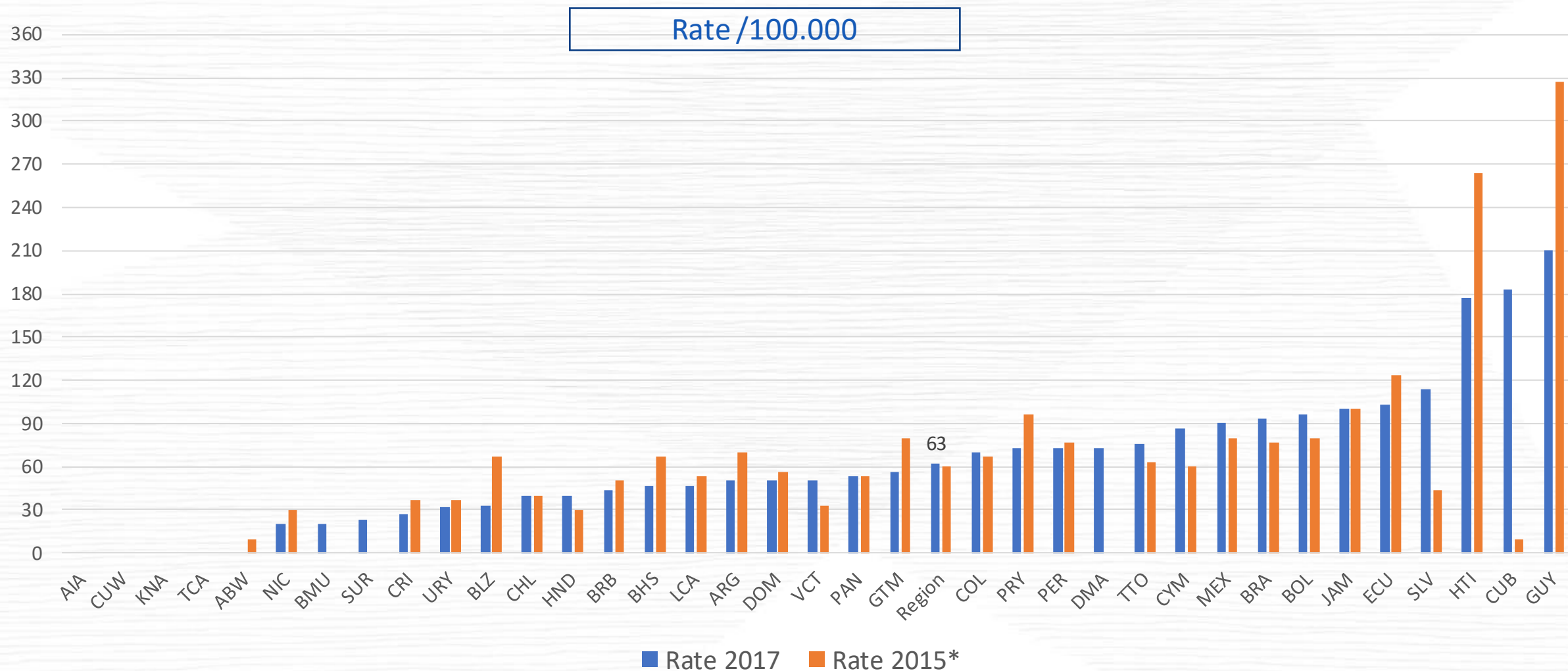


Voluntary Donation Versus Percentage Reactivity to HBV - HCV - Anti-T. cruzi. Region PAHO 1996 - 2017



https://iris.paho.org/bitstream/handle/10665.2/52966/9789275121719_eng.pdf?sequence=1&isAllowed=y

Estimated HIV positivity rate, Latin American and Caribbean Countries 2015 - 2017



Safe Blood Supply

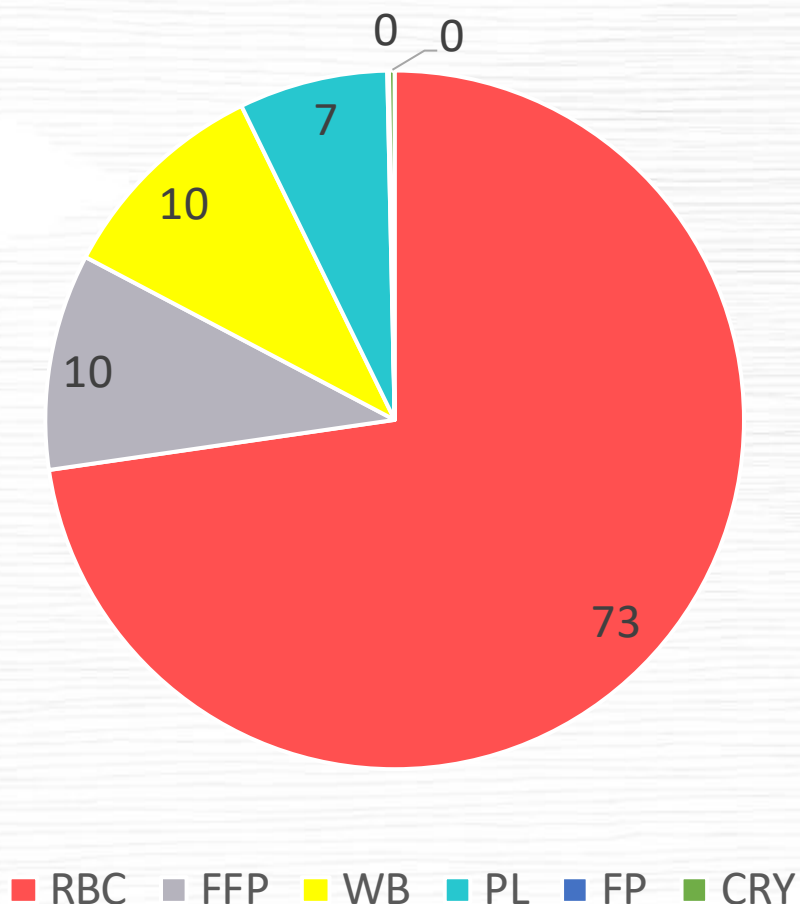
- **3. Rational use of blood and components**

WHO: There is Rational Use of Medicines (URM) “when patients receive the appropriate medication for their clinical needs, in the doses corresponding to their individual requirements, for an adequate period of time and at the lowest possible cost for them and for the community”.

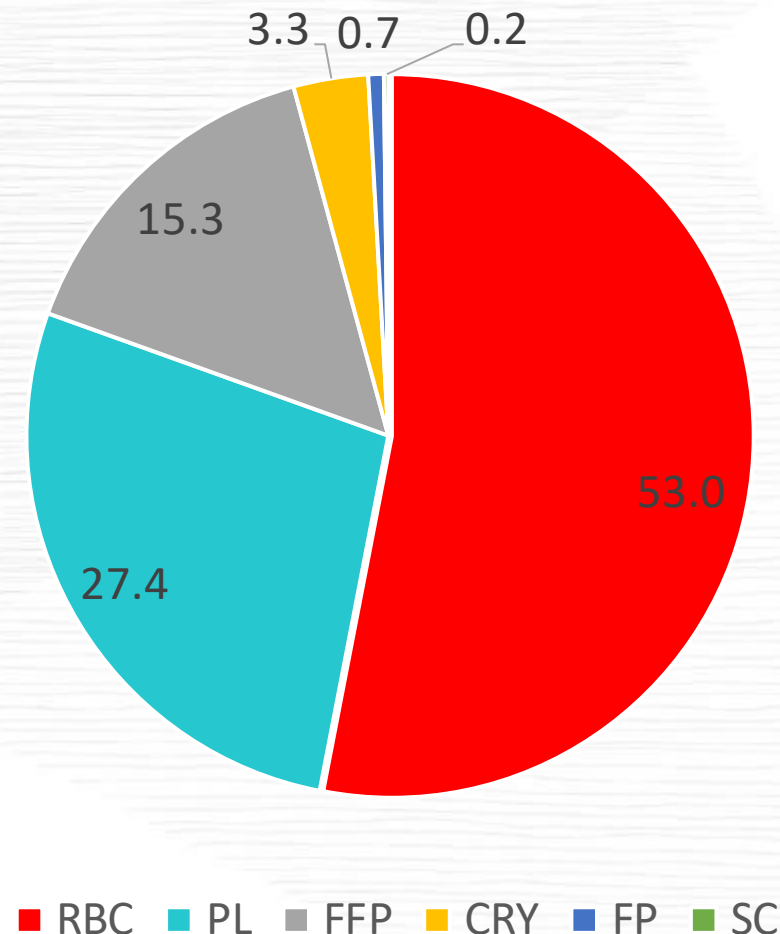
- **Use: Units per patient**
- **Adverse Effects - HV**

Percentage distribution of components transfused, Caribbean and Latin America countries, 2017

Caribbean

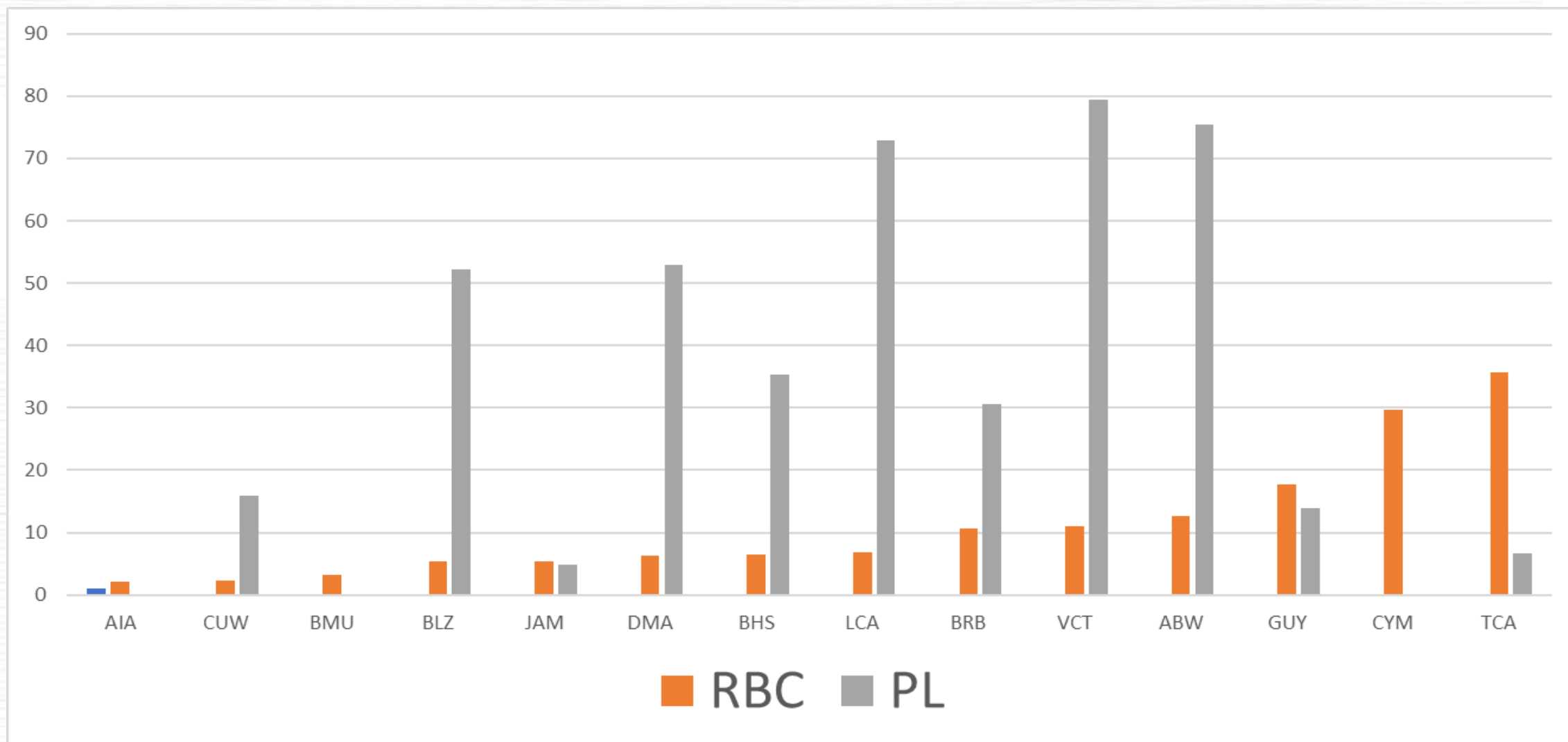


Latin American

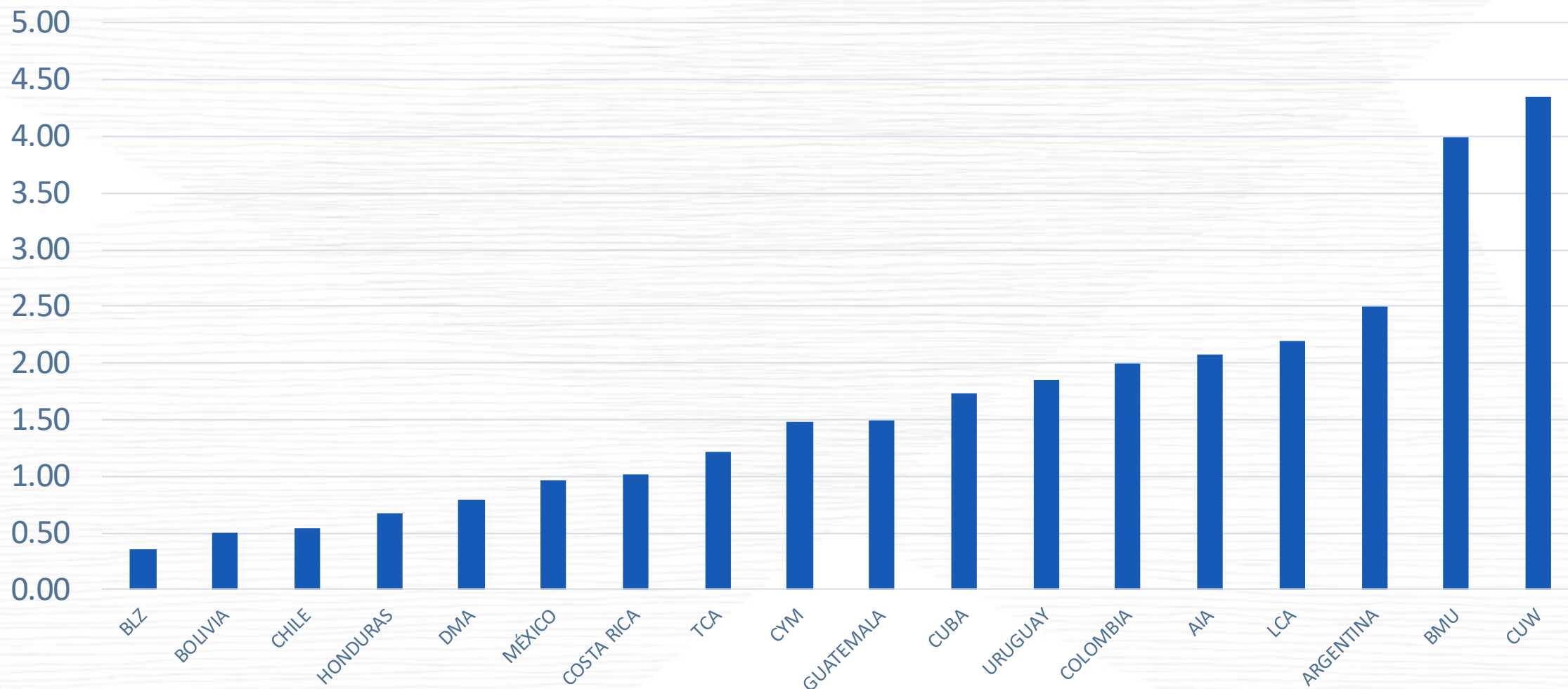


Percentage of GRE and Platelet Discarded Units by Country, Caribbean Countries, 2017

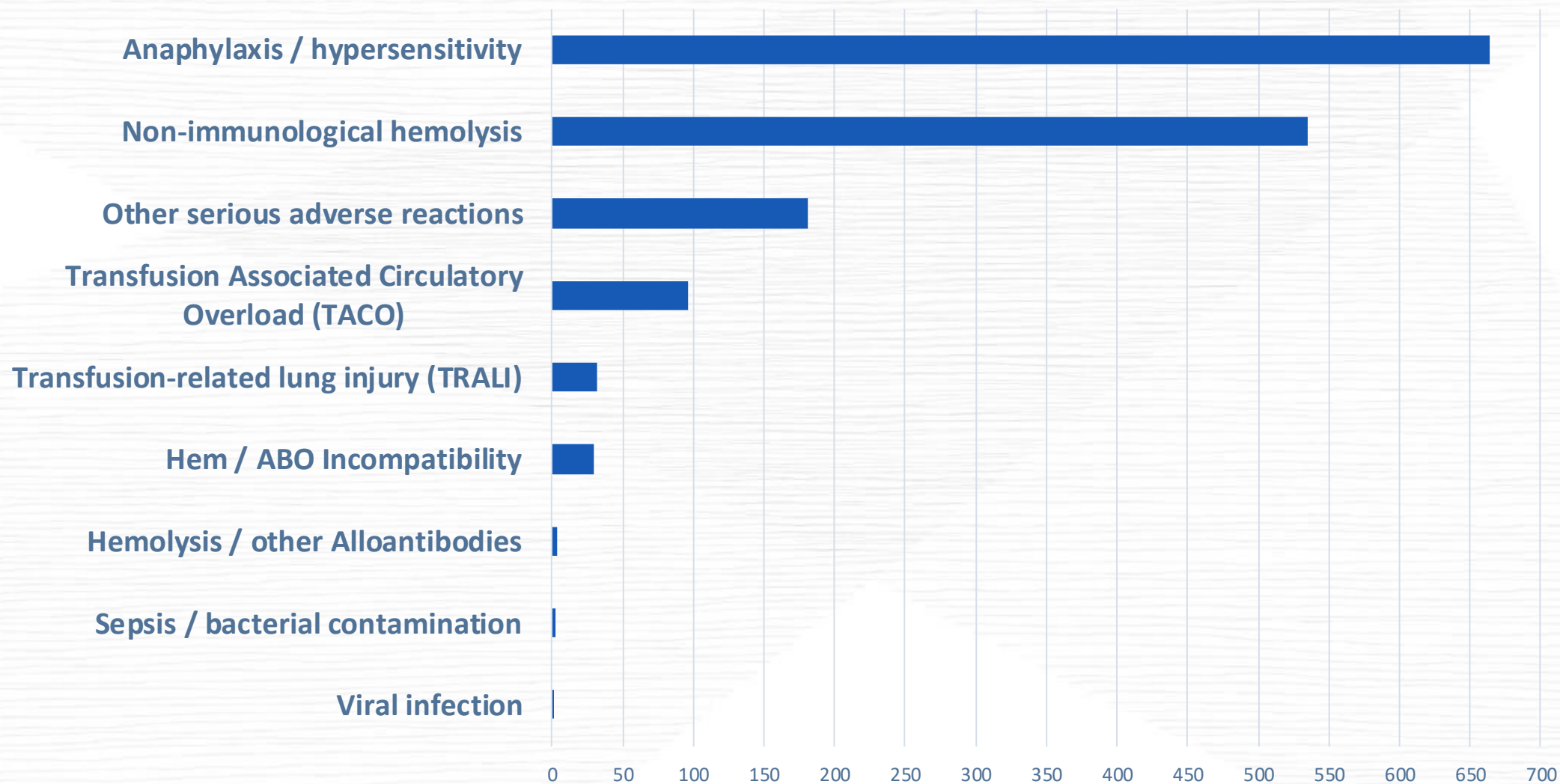
18



Number of units of red blood cells transfused per patient, Latin America and the Caribbean countries, 2017



Hemovigilance - Adverse Reaction Transfusion, Latin American and Caribbean countries, 2017



Impact of COVID-19 in blood services

Decrease in blood reserves in recent months Pandemic start until May ... 2020

1. Have blood reserves decreased in recent months? For this answer, donations versus consumption or needs covered should be compared with 2019. (This is because in the pandemic the donation is low, but also the needs).
 2. Is there data available or public that evidences this situation?
 3. Have there been shortages with critical consequences for patients due to lack of blood?
 4. What specific activities were developed to meet the blood needs?
-
5. 7 countries responded. Almost 70% of the management of Region

Measures taken by blood services

Measures Regarding Donation

Invitation to donate

- Massive media
- Call to donors - database
- with patient support

Collection

- Extension of hours
- Donor Appointments
- Extramural collections: in residential areas, churches, clubs, schools
- Replacement Donation

Donors

- Transportation for the donor
- Mobility passes or authorizations for donors

Measures regarding blood management

Recommendations

- COVID-19 Donation Guidelines
- Prescription - Use
- Permanent monitoring of reserves
- COVID-19 situation

Mobilization of blood:

- Blood redistribution
- Exchanges
- Cooperation urgent cases

Decrease in blood reserves in recent months Pandemic start until May 2020



Percentage Decrease	# Countries	Voluntary Donation	Processing / Bank / annual
> 40%	2	< 60%	< 6.000
> 20% - 40%	2		
< =20%	2	> 60%	> 8.000
NR	1	< 10%	

1. Voluntary donation
2. Blood service capacity: large collections – extramural
3. Information system
4. National Blood Program monitoring
5. Dialogue and support with other health authorities

Conclusions

- Important achievements in blood quality, safety and access indicators in Latin America and the Caribbean.
- Countries with governance and implementation of transfusion safety chain strategies have better performance in access, VNRRBD, quality, prevalence of ITT and surveillance)
- Blood availability related to income level
- Voluntary donation is in advance 46.1%. Voluntary repetitive donation is still very low. 100% coverage for HIV, HBsAg, HCV, syphilis.
- Countries with heterogeneous percentages of reactivity and in their relationship VNRRBD with reactivity and positivity to ITT markers
- Health surveillance, HV and monitoring processes showed less development in the region.
- Transfusion safety is increasing, due to the increase in VNRRBD, screening and low reactivity to infectious markers

Thank you



Reflections

- How is access to safe blood by income level related to efficiency and costs, at the country or regional level?
- How are reactivity and positivity rates related to selection of volunteer donors and repeat donors?
-
- Who are blood recipients?
- How to relate the existence of information systems in the blood services with the availability of national information.