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NATIONAL HAEMOVIGILANCE PROGRAMME

P A Francis, Wednesday, October 30, 2013, 08:00 Hrs [IST]

Blood and blood products continue to save millions of lives every year and improve the life expectancy of patients suffering from deadly diseases. These products are also necessary to support complex medical and surgical procedures in public and private hospitals. But all the patients requiring blood do not have access to safe blood in India and in many developing countries. The demand for blood transfusion, at the same time, has increased manifold in recent times with a steep rise in road accidents and spread of life style diseases. Around 92 million units of blood are collected globally every year and out of that almost 50 per cent of these blood units are collected in developed countries. Adequate and reliable supply of safe blood can only be assured by a stable base of regular, voluntary and unpaid blood donors. Voluntary and unpaid blood donors are also the safest group as the prevalence of blood borne infections is lowest among these donors. In India, there are currently more than 2300 licensed blood banks and the Union health ministry is providing technical and financial support to around 1230 of the public and charitable blood banks. Apart from this, there are certain private medical practitioners, who are collecting blood for their patients without any adequate facility for storage, collection and testing. These collected blood samples are not usually fully tested for communicable diseases.

The Union health ministry has been attempting to regulate activities related to blood collection and transfusion besides making good laboratory practices mandatory for the blood banks for some time now. In December last, the ministry launched the national haemovigilance programme to ensure safety and efficacy of blood transfusion from donor to recipient. Since its implementation in December, 106 centres including 90 medical colleges and 16 hospitals were brought under the programme and are being monitored by the National Institute of Biologicals, the coordinating agency for the programme. Now, NIB has drawn up a plan whereby it intends to extend the programme to the remaining 270 medical colleges and 2528 blood banks during 2013-15. In 2015-16, it may establish a Centre of Excellence for Haemovigilance in a bid to create a global knowledge platform. And by 2016-17, efforts will be made to ensure all of India's medical colleges and blood banks adhere to the haemovigilance programme where it would track blood collection, follow-up blood transfusion in patients and report blood reaction related incidents. These medical colleges will collect data in respect of adverse reactions and maintain the Transfusion Reaction Reporting Forms which would be transmitted to NIB. Launching of haemovigilance is an excellent initiative considering the fact that the quality of blood and blood products in many blood banks in the country today is not of standard quality. Success of the haemovigilance programme, however, depends on how effectively NIB will be able to coordinate out this nationwide task.

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