

14th PAN ARAB
TRANSFUSION
MEDICINE
CONFERENCE
QATAR 2024



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وزارة الصحة العامة
Ministry of Public Health
دولة قطر - State of Qatar



30 November to 2 December 2024

Sheraton Grand Doha Resort & Convention Hotel,
Doha, Qatar

SINGLE DOSE - weight loss drug

QR 3500

pH <6.7 K+ > 10.5 pCO2 - 96

Adverse Effects

Immunomodulation

Infectious pathogens



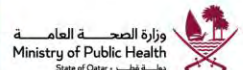
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“Not the best drug !!”



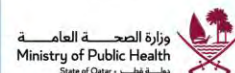
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Patient Blood Management – Hurdles

Dr. Biju Kurian

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Disclosure Statement

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- There is NO Conflict of Interest.
- There is no plagiarism or copyright infringement.
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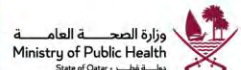
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Disclosure of COI

The scientific planning committee (SPC) :

Has reviewed all disclosed financial relationships of speakers, moderators, facilitators and/or authors in advance of this CPD activity and has implemented procedures to manage any potential or real conflicts of interest.

The SPC members

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Road Map

- Patient Blood Management
- Perception of Hurdles
- Expert View on Hurdles
- Solutions

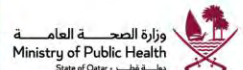
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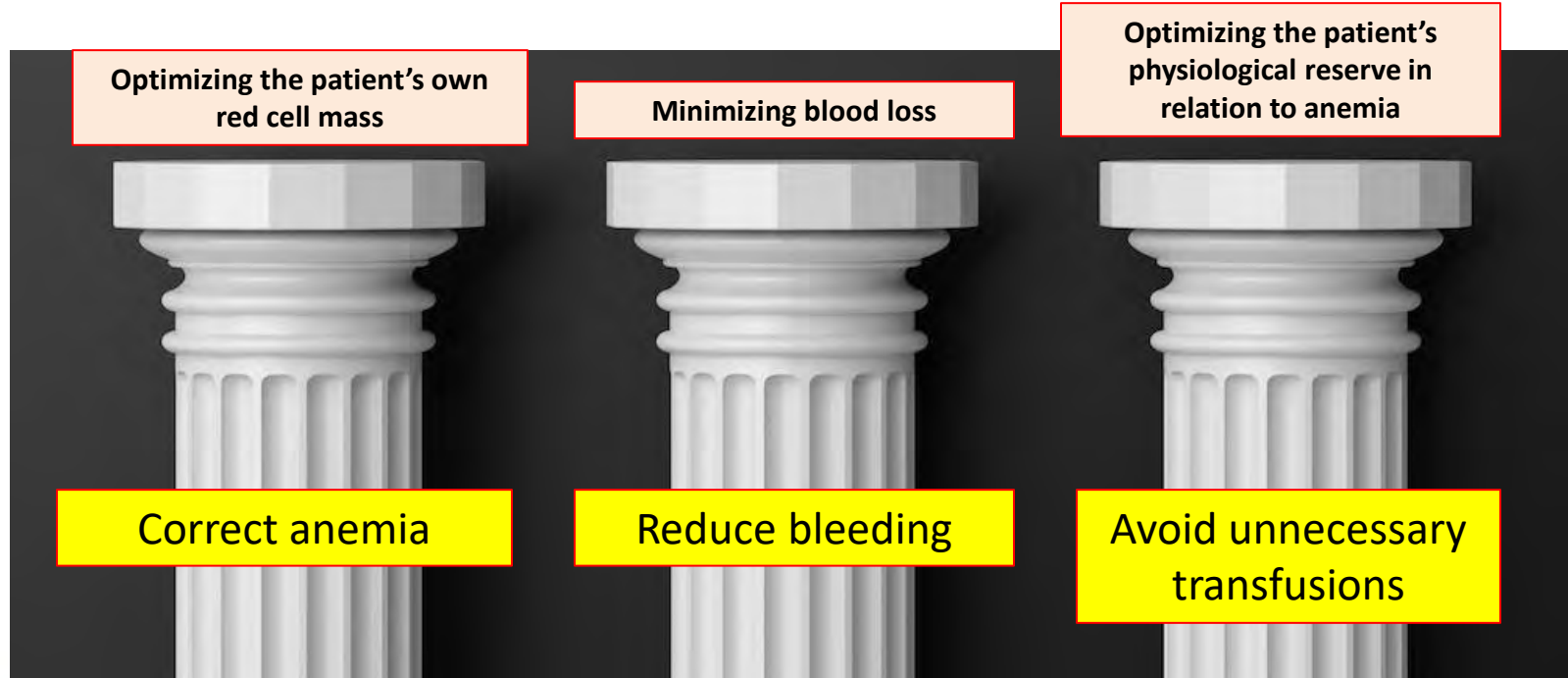
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Patient Blood Management



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Pillar 1

18 year old with a growing maxillary cyst
Hb - 7.2

Surgeon's plan

Admit a day before and transfuse two units

“not good PBM”

Senior Consultant

Can delay by 3-4 weeks

Hematologist

iv iron

Hb – 10.3 after three weeks

“good PBM”

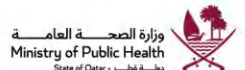
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Pillar 3

My daughter underwent major surgery

- Pre-op Hb 13.2
- EBL 900 ml
- Drain over 2 days 500 ml

Day 3 Hb 6.8

Surgeon's plan

- Transfuse two units

“not good PBM”

1st unit transfused

- When staff called for second unit
- BB consultant said NO
- Repeat Hb 8.1

“good PBM”

Oral iron

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Benefits of PBM

- 39% reduction in transfusion rates
- Statistically Significant reductions in:
 - Length of stay
 - Total number of complications
 - Overall mortality rate

Multimodal Patient Blood Management Program Based on a Three-pillar Strategy A Systematic Review and Meta-analysis

Althoff, Friederike C.*; Neb, Holger MD*; Herrmann, Eva PhD[†]; Trentino, Kevin M.[‡]; Vernich, Lee[§]; Füllenbach, Christoph PhD*; Freedman, John MD[¶]; Waters, Jonathan H. MD^{||}; Farmer, Shannon MD^{***,††}; Leahy, Michael F. MD^{‡‡}; Zacharowski, Kai MD, PhD*; Meybohm, Patrick MD*; Choorapoikayil, Suma PhD*

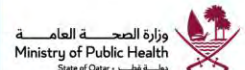
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Hurdles – local TC perception

- Staff awareness
- Culture
- Lack of manpower

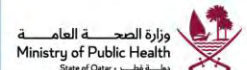
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Hurdles - literature

- Access to knowledge and information
- Knowledge and beliefs about intervention
- Tension for change
- Culture

Systematic review | [Open access](#) | Published: 17 January 2020

Overcoming barriers to evidence-based patient blood management: a restricted review

[Alana Delaforce](#) , [Jed Duff](#), [Judy Munday](#) & [Janet Hardy](#)

- Implementation strategies varied widely
- No conclusive evidence to suggest which implementation strategies are most effective

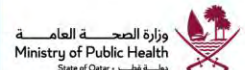
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Barriers

Making patient blood management the new norm(al) as experienced by implementors in diverse countries

[Axel Hofmann](#)^{1,2,#}, [Donat R Spahn](#)^{1,#}, [Anke-Peggy Holtorf](#)^{3,4,*,#}, PBM Implementation Group

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- Need to change work practice
- Need for collaboration and communication
- Lack of experience with PBM
- Feasibility to integrate PBM into current processes
- Strong belief in transfusion

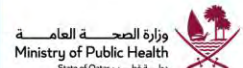
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Inhibitors

Making patient blood management the new norm(al) as experienced by implementors in diverse countries

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- Low awareness
- No funding for set up costs
- Education gaps
- Resistance against change
- Lack of interdisciplinary commitment

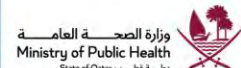
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Solutions – Implementation Science

CFIR

- *Consolidated Framework for Implementation Research*

ERIC

- *Expert Recommendations for Implementing Change*

StaRI

- *Standards for Reporting Implementation studies*

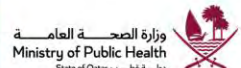
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Implementation Matrix

- Government Level
- Healthcare Level
- Training and Education Level
- Research Level
- Funder Level
- Patient Level

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Making patient blood management the new norm(al) as experienced by implementors in diverse countries

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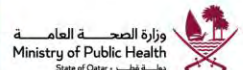
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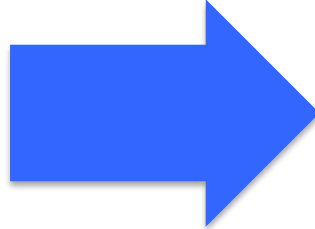


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Where to Where

“if you are going to transfuse, you might as well transfuse two units”



“why give two when one will do”

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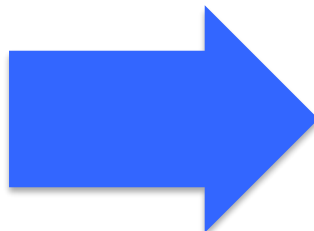


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Where to Where

*“product centered
culture”*



*“patient centered model
of PBM”*

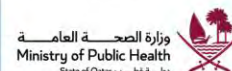
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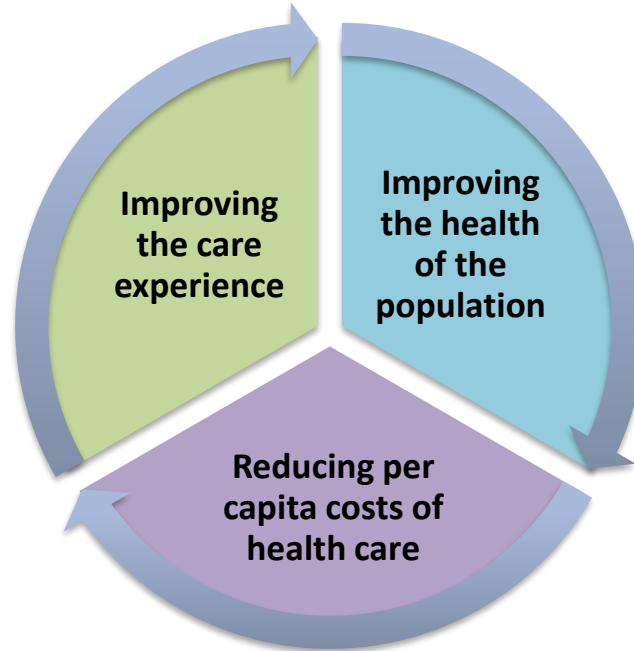
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Triple Benefits



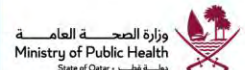
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Thank You

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