



Tilkynning frá Blóðbankanum

www.blodbankinn.is, sími 543 5507

4.2.2013

Hvítkornasíun rauðkornaeininga - Upplýsingar frá Blóðbankanum

Frá og með lokum janúar 2013 eru allar rauðkornaeiningar sem framleiddar eru í Blóðbankanum við Snorrabraut hvítbornasíaðar (leukofiltration; prestorage leukoreduction; universal leukoreduction). Þessi breyting felur í sér mikinn heilsufarslegan ávinning fyrir sjúklinga og skapar jafnframt hagræðingu. Á næstu vikum verður sett upp framkvæmdaáætlun fyrir samskonar ferli fyrir blóð sem safnað er í starfsstöð Blóðbankans á Akureyri.

Á síðustu árum höfum við innleitt framleiðslu hvítbornasíaðra blóðhluta fyrir ákveðna hópa sjúklinga. Þetta eru td. sjúklingar með illkynja blóðsjúkdóma, sjúklingar sem bíða líffæraígræðslu og öll börn undir 18 ára aldri. Samtals hafa þetta verið upb. 25% allra framleiddra rauðkornaeininga. Aðrir sjúklingar hafa fengið rauðkornaeiningar sem innihalda hvítborn, í sumum tilvikum með tilheyrandi aukaverkunum. Um margra ára skeið hafa allar blóðflögueiningar verið hvítbornasíaðar.

Vegna heilsufarslegs ávinnings fyrir sjúklinga hefur sambærileg ráðstöfun verið gerð síðustu 15-20 árin í mörgum löndum s.s. Bretlandi, Frakklandi, Þýskalandi, Sviss, Kanada og Bandaríkjunum, auk margra Norðurlandanna. Þessi framkvæmd hefur fest sig í sessi sem mikilvæg öryggisráðstöfun til hagsbóta fyrir sjúklinga. Það er því klárlega tímabært að stíga þetta skref hér á landi.

Ávinningur sjúklinga vegna notkunar á hvítbornasíuðum blóðhlutum.

- Hvítbornasíun kemur að miklu leyti í veg fyrir hitahækkun sem aukaverkun eftir blóðinngjöf (febrile non-hemolytic transfusion reaction).
- Notkun á hvítbornasíuðum blóðhlutum dregur úr myndun mótefna gegn vefjaflokkasameindum (HLA mótefna). Þessi mótefni geta komið fram hjá sjúklingum sem þurfa mikið magn blóðhluta s.s. vegna blóðsjúkdóma. Þau geta m.a. valdið ónógri hækkun á blóðflögum við blóðflögugjöf og aukið líkur á höfnun líffæragræðlings.
- Hvítbornasíun dregur úr líkum á CMV smiti með blóðhlutum, þar sem CMV veiran er aðallega til staðar í hvítum blóðkornum. Þetta hefur þýðingu í tilvikum ónæmisbædra sjúklinga sem eru í aukinni áhættu fyrir CMV sýkingar.
- Allmargar rannsóknir hafa gefið vísbendingar um betri bata hjá sjúklingum sem fá hvítbornasíaða blóðhluta í hjartaskurðaðgerð í samanburði við sjúklinga sem fá ósíaða blóðhluta.
- Hvítborn í blóðhlutum geta valdið ónæmisbælingu hjá sjúklingum og í kjölfarið aukið tíðni almennra sýkinga hjá þeim. Með notkun á hvítbornasíuðum blóðhlutum má draga úr tíðni sýkinga eftir skurðaðgerðir og þannig etv. stytta legutíma og forðast óþarfa álag og kostnað vegna sýkinga.
- Ákveðnar vísbendingar eru jafnframt til staðar um að ónæmisbæling vegna hvítborna í blóðhlutum geti valdið aukinni tíðni á endurkomu fastra æxla eftir aðgerð. Með hvítbornasíun má þannig hugsanlega lækka endurkomu slíkra æxla eftir aðgerð.
- Hvítbornasíun blóðhluta dregur úr skemmdum á rauðum blóðkornum við geymslu (storage lesion) og hefur þar af leiðandi margvíslegan ávinning fyrir sjúklinga.

Með notkun á hvítbornasíuðum blóðhlutum skapast margvísleg hagræðing á LSH:

- Færri aukaverkanir verða eftir blóðinngjöf.
- Einfaldar vinnuferli við þöntun blóðhluta og birgðahald.

Þetta mikilvæga framfaraskref hefur ekki í för með sér aukinn rekstrarkostnað á Landspítalanum, en getur þess í stað leitt til sparnaðar vegna færri aukaverkana og sýkinga.

Sveinn Guðmundsson, yfirlæknir Blóðbankans
sveinn@landspitali.is

Sjá meðfylgjandi (1) lista vísindagreina og (2) útlit merkinga á blóðpokum.



Gagnlegar vísindagreinar um hvítkornasíun blóðhluta:

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Merking blóðhluta
Hvítkornasíað rauðkornaþykki

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