Receiving a blood transfusion

Why would my child need to receive blood?

A blood transfusion may be needed if your child’s blood or specific blood parts are at dangerously low levels. A transfusion can replace what is missing. Blood parts include cells within the blood, such as red blood cells, white blood cells, and platelets, as well as the liquid part of the blood—plasma. Your child’s doctor determines the amount and type of blood product that is given based on your child’s need.

What is done to ensure that blood is safe?

Our nation’s blood supply is kept safe in many ways. Volunteer donors give blood, but they must be healthy. They are asked many questions before donating to be sure they do not have common risk factors for diseases that can be transmitted by blood. The blood that is donated undergoes extensive testing. These tests check for signs of infection with hepatitis, HIV (the virus that causes AIDS), HTLV (a virus that may cause disease in the blood or nervous system), and syphilis. If the blood passes these tests, it also will be tested to ensure it is compatible with the blood of the patient who will receive it.

What are the risks of blood transfusion?

If blood or blood parts are needed for treating a patient’s condition, the risks of not receiving blood can be great and even life-threatening. Even so, risks do exist for receiving a blood transfusion, as they do for all medical therapies. Some patients may have reactions to transfusions. Typically, these cause mild symptoms, such as fever or a skin rash. In rare cases a reaction may be severe. Contracting a disease, such as hepatitis or West Nile Virus, can occur through blood transfusion, but it is rare. Many people are concerned about developing an HIV (AIDS) infection from a blood transfusion. Donor centers began testing blood for HIV in 1985, and the tests used have improved several times since then. It may help to know that the chance of getting HIV from a blood transfusion is about 1 in a million. Ask your child’s doctor if you have more questions about blood transfusion risks.

Are there choices other than receiving blood from the community blood supply?

Yes. There are options other than receiving blood from volunteer community donors. In some cases an older child may serve as his own blood donor (autologous blood). Typically, this is only done by otherwise healthy patients who will undergo a procedure, such as surgery, where a need for blood is expected. This type of donation is usually not an option for a patient at St. Jude due to the frequency of transfusions and the various treatments a patient may receive. Sometimes, it is possible for friends or relatives to donate blood for your
Receiving a blood transfusion

child. These directed donations are not always possible. And, the blood donated by community volunteers has been found to be just as safe.

How can I make sure that blood will be available if needed?

During the past several years, blood shortages have become more frequent. It is important that healthy people donate blood if they are able to do so. Millions of units of blood are used in the United States each year. The patients at St. Jude Children’s Research Hospital need about 12,500 units of blood per year. To help ensure that blood is always available at St. Jude, a Blood Donor Center is located inside the hospital. Family and friends, community members, and St. Jude staff members can donate blood at the center. For more information, stop by the Blood Donor Center, located on the first floor of the Patient Care Center, or call 901-595-2024.

How can I find out more about blood transfusions?

If you have more questions about blood transfusions—the benefits, risks, and likelihood that your child will need blood—talk to your child’s doctor. If you are inside the hospital, dial 3300, and ask for the doctor by name. Locally, call 901-595-3300. If you are outside the Memphis area, dial toll-free 1-866-2STJUDE (1-866-278-5833), and press 0 once the call is connected.