

## How to increase PBM knowledge and build a strong PBM leadership in a country?



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## Relevant Disclosures

### Honoraria, advisory boards, travel or research support:

• NIH Fogarty, CANSA, Acino, Pharmacosmos, Vifor Pharma, Aspen, Austell

### Committees, directorships, associate:

• WHO strategic committee for Patient Blood Management  
• NATA Board Member  
• AABB Global standards committee  
• International Collaborative Transfusion Medicine Guidelines (ICTMG) group  
• International Foundation Patient Blood Management (IFPBM) Associate  
• Non-executive director, Western Cape Blood Service (WCBS)  
• Global Transfusion Forum lead

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## AWARENESS

1. Who do we focus on?
2. What do we focus on?
3. What do we do?

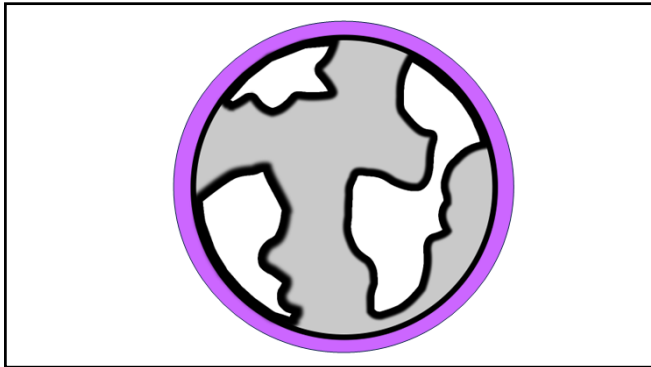
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## WHO SHOULD WE FOCUS ON?

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## The **PATIENT** is the PRIMARY FOCUS!

Global  
Definition  
of PBM

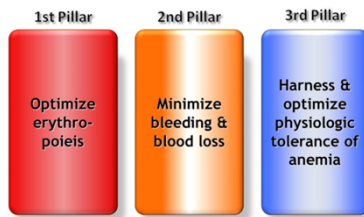
Patient blood management is a **PATIENT-centered**, systematic, **evidence-based** approach to improve patient **outcomes** by managing and **preserving** a patient's own blood, while promoting patient safety and empowerment.



THUS, AWARENESS BUILDING SHOULD HAVE  
PATIENT IN MIND ON EVERY LEVEL!

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### What is Patient Blood Management: The Three Pillars

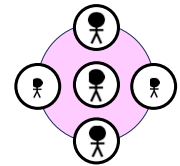


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## DECIDE ON PRIMARY TARGET GROUP

- Ideal
  - "Everyone with a pulse"
- Practically
  - Women in their reproductive years, especially
    - Teenagers and women with heavy menstrual bleeding
    - Pregnant women and mothers
  - Surgical patients
  - Blood donors

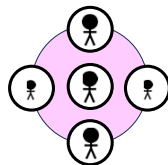


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## WHAT DO WE FOCUS ON?

- Symptoms other than fatigue
  - Hair loss
  - Nails that break
  - Cravings
  - Headaches, etc.
- Adolescents
  - Effect on mood, concentration, school performance
- Pregnancy outcomes
- Neurocognitive development of baby born of iron deficient mother



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## ACTIONS FROM OUR EXPERIENCE

- Face-to-face
- Journalists & magazines
  - Mother and child
  - Women's health
- Radio
- Television



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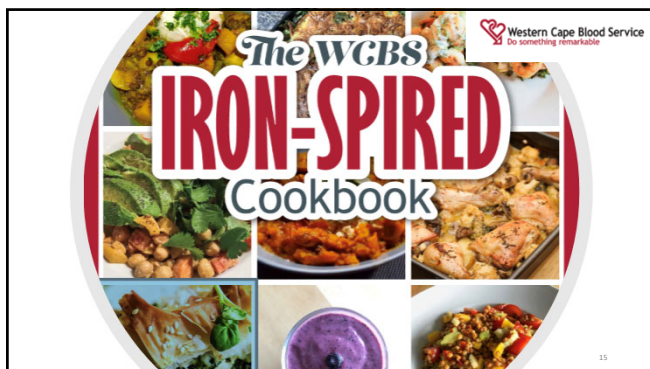
## Ferritin testing and Iron replacement and awareness program for blood donors.

Supports sufficiency of blood supply (Blood conservation)

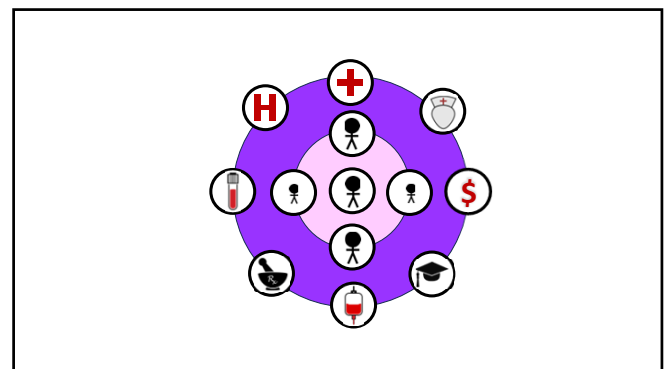
Decrease risk of iron deficiency amongst donors (PBM and Blood conservation)

Not meant to replace medical care.

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## HEALTHCARE PROFESSIONALS – TARGET AUDIENCE?

- Nurses
- Doctors (including medical students and residents)
  - General practitioners
  - Specialists
    - Anaesthesiologists
    - Obstetricians and Gynaecologists
    - Surgeons
    - Internal Medicine
    - Haematologists/Oncologists
    - Transfusion Medicine
    - Emergency care physicians

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## WHAT DO WE FOCUS ON?

- The magnitude of the problem
- The solution that PBM provide

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## WHAT DO WE FOCUS ON?

- Tailor to the specialty, e.g.
  - Anaesthesiology/Surgeons
    - The three pillars, especially perioperative anaemia and minimizing blood loss
    - Patient outcomes and savings
    - Independent risk of blood transfusion
  - Obs & Gynae
    - Heavy menstrual bleeding
    - Pregnancy complications – mother & baby
    - Neurocognitive development baby born of iron deficient mother
  - Gastroenterology
    - Diagnosis and management of iron deficiency

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## WHAT DO WE FOCUS ON?

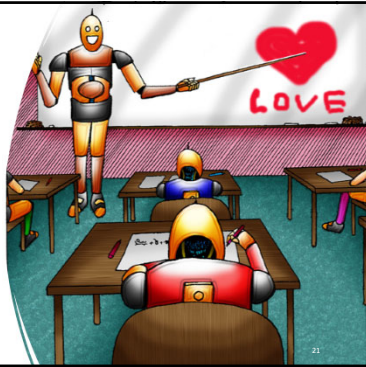
- Tailor to the specialty, e.g.
  - Haematology/Internal Medicine/Pathology
    - Diagnostics and treatment
    - Reference ranges
  - Transfusion Medicine/Blood Services
    - PBM role in assisting with blood supply
    - How can we collaborate?
  - General practitioner/Nurses
    - All the above
    - Opportunity for screening
    - IV iron clinics

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## WHAT DO WE DO?

*Educate educate  
educate...everybody!*



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## What...?

- Multiple lectures, workshops, also at referring hospital network
- Presentations to **stakeholders**
  - Hospital Management, Blood Utilisation Committee, Provincial Health, Pharmaceutical services
- **National** weekly **Deep Dive** Haematology program
- Annual **National** PBM conference
- **Guideline** groups meeting
- Regular **Sub-Sahara Africa** case-based education meeting on PBM
  - G-ECHO PBM meetings with Gastro Foundation

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## University level

- Interns University of Cape Town
  - Have to complete **online modules** on PBM during their rotation at Anaesthesiology
- Residents **Handbook**
  - Chapter on PBM completed
  - Webinars
- **YouTube** videos
- University of the Free State **Short Learning Programme** on PBM

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## SA national meetings 2021-2023 with PBM sessions

- SAGES
- SASOG
- SASSA
- ASSAf
- SACHAS
- PFSSA
- SANBS
- SAFCP
- Pathcare
- Health Insurers (Discovery, Bestmed, Mediscore)
- Pharmacists




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## Dr Rob Wise – Edendale Hospital


- **Within 2 years:**
  - 4400 units of blood saved
    - 57% reduction in after hours leives
    - No change in emergency blood or platelets
  - **36% reduction in blood usage**
  - **39% total reduction in expenditure**
  - Approx. R15.6 million saved in the first 2 years (+/- \$US 1 million)
  - Blood Bank's workload almost halved and faster turnaround in processing of crossmatch samples
  - **Eight Medical Officer posts** funded

Adapted with permission from Dr M Gibbs

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## "Why give 2 when 1 will do?"

### Single Unit RBC Transfusion

**Choosing Wisely**  
An initiative of the ABIM Foundation

Single unit red cell transfusions should be the standard for non-bleeding, hospitalized patients.

- 7 g/dL threshold for stable patients
- 8 g/dL threshold for stable patients with cardiovascular disease

**Don't transfuse more units of blood than absolutely necessary.**

**AABB: Five Things Physicians and patients Should Question, April, 2014**

<http://www.choosingwisely.org/societies/american-association-of-blood-banks/>

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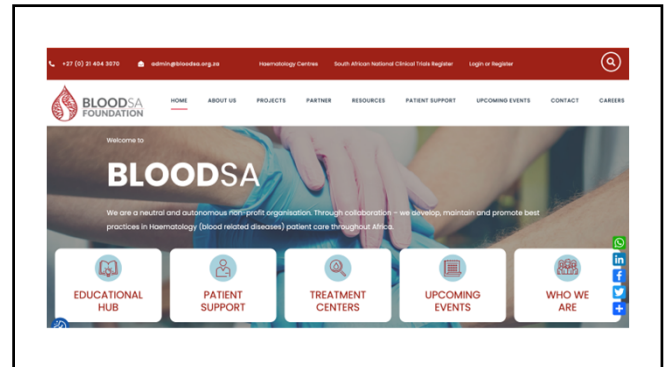
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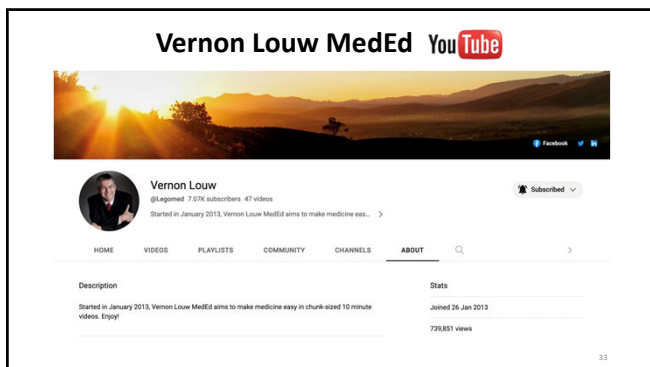




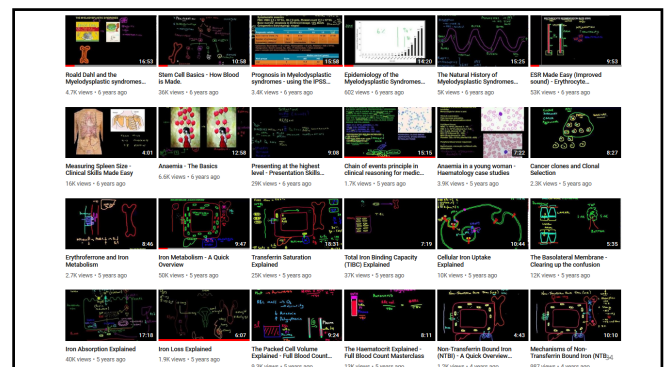
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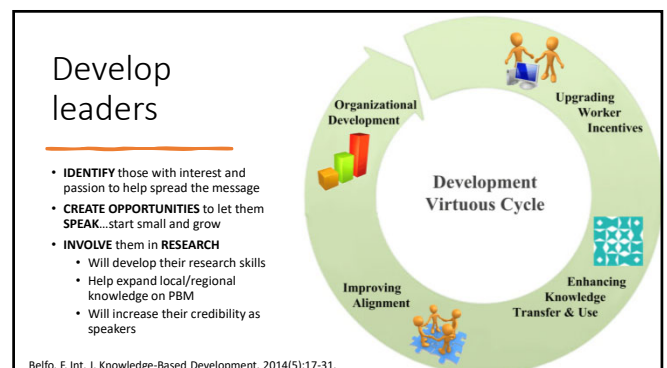
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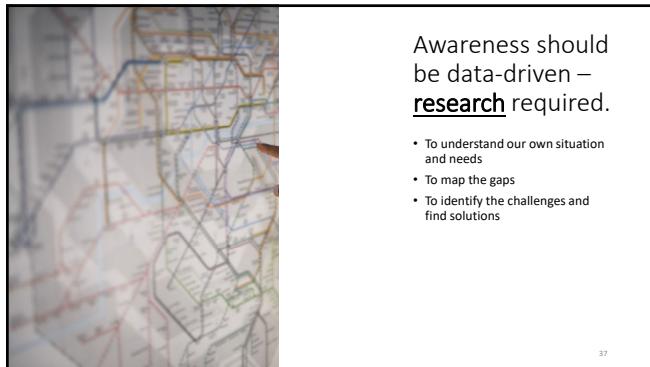
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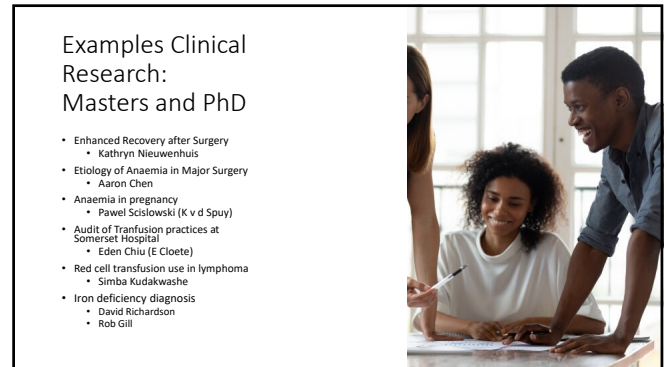
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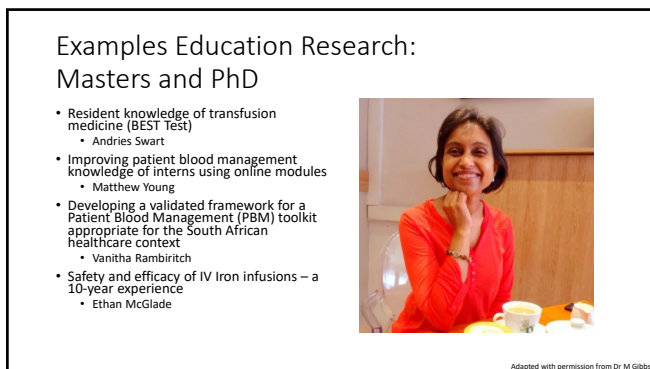
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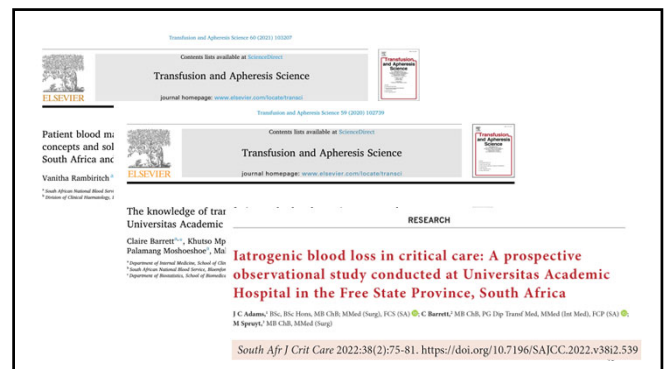
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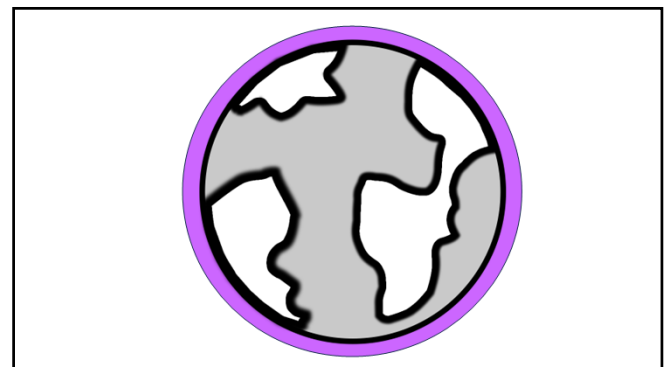
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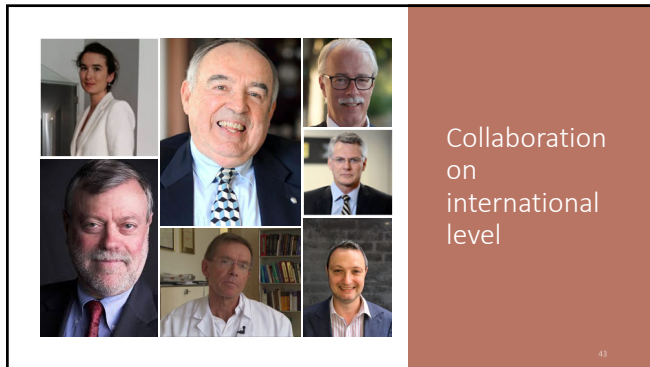
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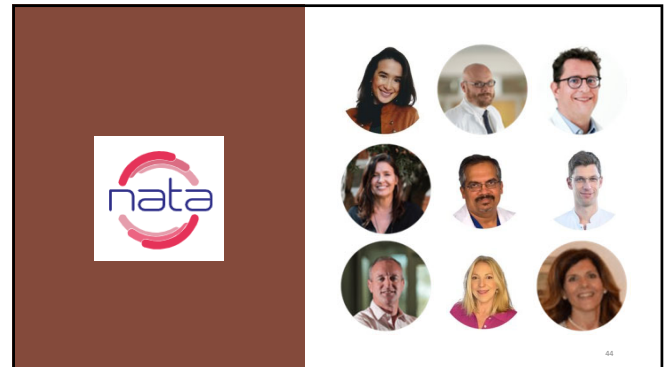
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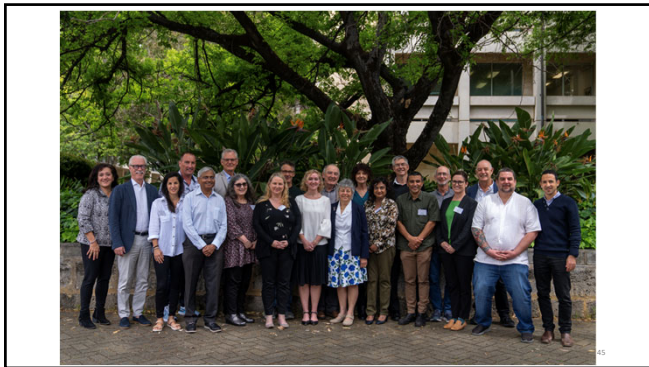
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International collaborations

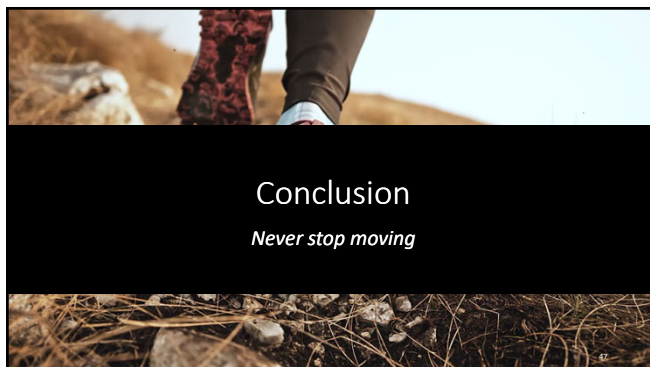
- WHO
- SIAPBM
- NEPAD
- NATA
- SABM
- Russian PBM in Clinical Medicine
- Romania Insights in Haematology
- India (Varanasi Obs & Gynae Society)
- Bloodless Medicine & Surgery Society
- Czech Iron Academy, Prague
- Women's Health Iron Academy Meeting, Warsaw, Poland
- Project ECHO meetings



**Dr. Ángel Augusto Pérez Calatayud**  
Medicina de Emergencia / Medicina de Cuidados Críticos

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Conclusion

1. WHO do YOU want to reach?
2. WHAT will YOU focus on?
3. WHAT will you DO?

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