

Press Information

Patients, donors, relatives and clinicians identify top priorities for blood transfusion and blood donation research

The results from the final workshop of the James Lind Alliance (JLA) Priority Setting Partnership (PSP) in Blood Transfusion and Blood Donation held on 28th February show that patients, donors, relatives and clinicians agree on the following Top 10 priorities for future research:

1. What would encourage more people (especially black and ethnic minority groups or people with a rare blood type) to donate blood?
2. How can health professionals be discouraged from using blood inappropriately?
3. How can the wastage of donor blood be minimised?
4. What is the optimal type and combination of blood products [red blood cells, platelets, frozen plasma] for adult patients* with a major haemorrhage that requires a transfusion of 4 or more units of blood? (*Aged over 16 years old).
5. How can patients, relatives and carers be empowered to have greater say about their choices in relation to blood transfusion and its alternatives?
6. How can patients with anaemia be identified and treated in a timely manner so that the need for transfusion is avoided?
7. What are the best drug alternatives to blood transfusion to reduce and prevent bleeding?
8. How can the blood transfusion process be delivered more safely and in a timely manner in hospitals?
9. What medical conditions make it unsafe for a person to be a blood donor?
10. What are the most effective ways to educate the general public about the process and purpose of blood donation?

1.5 million units of blood are transfused to around 500,000 patients in England each year. This PSP brought together, for the first time, patients, donors, relatives and clinicians to identify and prioritise the most pressing unanswered research questions about the therapeutic use of red blood cells, platelets and plasma across the whole range of clinical practice. Funded by [NHS Blood and Transplant](#), in collaboration with the National Institute for Health Research (NIHR) [Oxford Biomedical Research Centre](#), uncertainties were

considered in blood donation practices through to recovery from transfusion, including treatment strategies that provide alternatives to using blood.

The PSP began its work in October 2015. 761 survey responses were gathered from across the UK from people who:

- have ever had a blood transfusion, or need one
- have been, or are, a blood donor
- are a family member, or carer, of someone who has had, or needs, a blood transfusion
- have an interest in strategies to avoid blood transfusions, including from the Jehovah's Witness community
- or work as a health or social care professional involved with blood transfusion or donation.

The top 30 questions were then taken to the JLA Blood Transfusion and Blood Donation PSP workshop in February, where patients, donors, relatives and clinicians worked collaboratively to agree on the Top 10 most important questions for future research to answer.

Graham Donald, patient representative on the Steering Group of the PSP said:

"I found this an exciting, robust and stimulating exercise, with lay participation being positively encouraged, not merely tolerated. We decided on a great mix of possible projects that address the questions of patients and carers, donors and clinicians. Better still, some ideas are really specific whilst others are more general and strategic. So I hope a wide range of researchers will want to get their teeth into them."

Professor Mike Murphy, Professor of Blood Transfusion Medicine, University of Oxford Consultant Haematologist, NHS Blood and Transplant and Oxford University Hospitals, and PSP Clinical Lead said:

"Although blood donation and blood transfusion are common activities and carry some risks to donors and patients, there remain uncertainties about many areas of practice and which should be the focus of future research. The purpose of the PSP in Blood Transfusion and Blood Donation was to involve patients, donors, relatives and clinicians in the development of a list of the 10 most important topics for research. This should be of considerable value for both researchers

and funding bodies when considering what research should be prioritised in this field.”

More information about the PSP is available on the [James Lind Alliance \(JLA\) website](#).

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For more information please contact:

Susan Brunskill, Senior Information Scientist, NHS Blood and Transplant, Oxford

Tel: 01865 387706 Email: Susan.Brunskill@nhsbt.nhs.uk

Caroline Whiting, James Lind Alliance, National Institute for Health Research Evaluation, Trials and Studies Coordinating Centre

Tel: 02380 595489 Email: jla@soton.ac.uk

Notes to editors

The **James Lind Alliance** Priority Setting Partnership (JLA PSP) infrastructure is hosted by the National Institute for Health Research (NIHR) to provide the support and processes for Priority Setting Partnerships (PSPs). PSPs aim to help patients, carers and clinicians work together to agree which are the most important treatment uncertainties affecting their particular interest, in order to influence the prioritisation of future research in that area. For further information, visit the JLA website (www.jla.nihr.ac.uk).

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NHS Blood and Transplant is a joint England and Wales Special Health Authority. We are responsible for ensuring a safe and efficient supply of blood and associated services to the NHS in England. We are also the organ donation organisation for the UK and are responsible for matching and allocating donated organs.

We are an essential part of the NHS and take pride in saving and improving lives by making the most of every voluntary donation, from blood and organs to tissues and stem cells.