

Red Blood Cell Transfusion in Children and Young People

Information for Parents and Carers

This leaflet explains about red blood cell transfusion in children including the benefits, risks and any alternatives and what you can expect when you come to hospital. If you have any further questions, please speak to a doctor or nurse caring for your child.

What is a red blood cell transfusion?

A red blood cell transfusion is a treatment where blood is given into a vein through a drip (intravenous line). The blood has been taken from a healthy blood donor and each blood donation is checked to make sure it is safe to be given to another person.

Why might my child need a blood transfusion?

Blood transfusions may be given to replace blood lost in surgery or after a serious accident. They may be needed to treat anaemia (lack of red cells) caused by failure of the body to make enough working blood cells.

Red blood cells carry oxygen around the body and their numbers are measured by testing something called haemoglobin. If this is low your child might have anaemia. This could mean that their body does not receive enough oxygen, causing them to feel tired and short of breath.

Blood transfusions can be used to treat this by increasing the haemoglobin with a bag of red blood cells from a blood donor.

There are also other reasons that your child might need a blood transfusion. A doctor or nurse should explain why your child needs this treatment.

Are there any alternatives?

Not all children with anaemia need a transfusion. If your child is not experiencing any symptoms and their haemoglobin level is acceptable, then other treatments may be better. If their haemoglobin is low due to bleeding or low iron levels, we may give them iron medicine or an iron infusion.

In some cases blood transfusion is the only appropriate treatment. If there is any reason why you would not accept a blood transfusion (e.g. on religious grounds) then please tell the doctor or nurse caring for your child as soon as possible.

It is not possible for you to donate blood to be given to your child as there is an increased risk of some types of serious immune reactions with blood transfusion from relatives.

How can I prepare my child for a blood transfusion?

Unless your child is already in hospital, they do not usually need to be admitted for a blood transfusion. The blood transfusion can be given in our day unit and you can go home later that day. You do not need to bring anything with you, but having a blood transfusion may take several hours, so you may wish to bring something with which to entertain your child. Your child can eat and drink as normal before and during the transfusion.

Explaining to your child what a blood transfusion is can be difficult but will help to prepare them for the transfusion process. There are two NHS booklets with which we can provide you that help to explain, through illustrations and cartoons, what blood is and why a blood transfusion may be needed ('Amazing You' and 'The Voyages on the Microsub Discovery'). Please ask one of your doctors or nurses to provide you with these resources.

Asking for your consent

It is important that you feel involved in decisions about your child's care. Blood transfusion will only be recommended if there are no suitable alternative options and the benefits outweigh the risks.

For blood transfusion, you (and your child if appropriate) will be asked to give verbal consent to say that you agree to your child having the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously.

What happens during a blood transfusion?

Your child will have blood samples taken. These will be sent to the laboratory to be matched to a bag of blood in the laboratory to see if it is suitable for your child (a cross-match).

Once the blood is ready, it will be collected from the laboratory by one of the team looking after your child. A small plastic tube (cannula) will be placed in your child's arm and they will be given the blood through this via a drip. We will monitor them throughout the process.

The amount of blood your child will receive and time the transfusion will take depends on a variety of factors. Your child's doctor or nurse will be able to tell you more about this.

Will my child feel anything during the blood transfusion?

The majority of children do not feel any different during the transfusion. However, some develop a slight fever, chills or a rash. These are usually due to a mild reaction or allergy and are easily treated with medication or by giving the blood more slowly. Fortunately,

severe reactions to blood are extremely rare. If they do occur, staff members are trained to recognise and treat them.

If your child does experience any pain or feels unwell you should report this immediately to the doctor or nurse caring for your child.

What happens after the blood transfusion?

We may take another blood sample to see if your child requires another transfusion in the future. More tests may be required if the cause of your child's anaemia is not known. Your child's doctor might start a treatment (e.g. iron medicine) to reduce the need for any further transfusions.

Are blood transfusions safe?

The risk that a blood transfusion will make your child ill is very low. One of the most important ways of ensuring a safe transfusion is to make sure your child gets the right blood. To ensure that your child receives the correct blood, staff will check your child's name and date of birth, both when they take blood samples and before the transfusion is given. This is why it is important that your child wears a hospital identification band.

Compared to other everyday risks, the likelihood of getting an infection from a blood transfusion is very low. It is calculated that hepatitis B might be passed on by fewer than 1 in 1.3 million blood donations, for HIV this risk is even smaller at 1 in 6.5 million.

If your child has heart, liver or kidney problems, they may need treatment with a medicine (diuretic) to help them balance the extra fluid given during a transfusion. An assessment will be made as to whether your child will have this medicine given in addition to the transfusion.

Useful sources of information

NHS Blood and Transplant – Blood website

www.blood.co.uk/about-blood/information-for-patients/

NHS Choices

www.nhs.uk/Conditions/Blood-transfusion

Contact us

If you have any questions or concerns about blood transfusions, please contact the Paediatric Secretaries on 020 8725 3648 (Monday to Friday, 8am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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