



# ABC NEWSLETTER

CURRENT EVENTS AND TRENDS IN BLOOD SERVICES

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2015 #7

February 20, 2015

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**Transfusion During Flight to Hospital Improves Early Outcomes**

Hemorrhage is the most common preventable cause of death in patients with severe trauma. Receiving red blood cell (RBC) transfusions while being flown via helicopter to a trauma center increased the probability of 24-hour survival and improved other early outcomes in such patients in a new study in *The Journal of the American College of Surgeons*.

Both US and UK medical evacuation programs have implemented pre-hospital RBC transfusion capabilities for wounded soldiers with improved survival. There are limited data on pre-hospital transfusion in civilian trauma populations, although some small case series suggest it may have value.

Joshua Brown, MD, and colleagues of the University of Pittsburgh Medical Center, conducted the largest study to date investigating outcomes associated with pre-trauma center (PTC) RBC transfusion, comparing 240 patients who received in-flight PTC RBC transfusions to 480 control patients who did not. Participants were selected from 8,616 medical trauma patients transported by helicopter to the University of Pittsburgh Medical Center Presbyterian Hospital between 2007 to 2012.

The retrospective cohort study used propensity matching to identify and match patients in the control group with those patients receiving in-flight transfusions based upon the severity of their injuries. The authors conducted statistical analyses to evaluate the impact of pre-hospital transfusions on 24-hour survival, as well as secondary outcomes, including shock on admission, 24-hour in-hospital RBC transfusion volume, trauma-induced coagulopathy, and in-hospital survival rate.

The authors found that pre-hospital, in-flight transfusion was associated with an increased probability of 24-hour survival, decreased risk of shock, and lower 24-hour RBC requirements compared to the control group. These results held true in a subgroup of patients transported by helicopter from the scene of the injury. Among these patients, pre-hospital transfusion was independently associated with a more than six-fold increase in the odds of 24-hour survival and a 76 percent decrease in the odds of shock on admission.

“These data further support the use of PTC RBC transfusion in severely injured air medical trauma patients,” write the authors.

(continued on page 3)



## OUR SPACE

### Guest Columnist:

**ABC President-Elect Susan Rossmann, MD, PhD, Chief Medical Officer, Gulf Coast Regional Blood Center**

### Checking Our Iron Will

“Just let me check your iron,” the nice phlebotomist says to the prospective blood donor as she reaches to do the fingerstick. If only!!

We do not in fact check anyone’s iron level; we check hemoglobin. While iron is necessary to produce hemoglobin, there is no direct relationship between the two. Even donors meeting our hemoglobin standard will, especially with repeated donation, have reduced iron stores. Low iron stores have been associated with fatigue, mental changes, and decreased exercise capacity. Last week, the [Newsletter](#) highlighted the [Hemoglobin and Iron Recovery Study \(HEIRS\)](#), which provided direct evidence that giving donors iron pills can reduce the time until hemoglobin level and iron stores are replaced. Should blood centers act on this and give our donors iron?

It would be helpful if we could measure iron at the point of donation to exclude donors who have acceptable hemoglobin but low iron stores. However, there is no available method for use in the donor room. We can collect samples for later testing and counseling, but few centers take this resource-intensive approach. Given the lack of technology to directly address the iron problem, other options can be considered.

AABB recommended adding more details about iron to our donor information materials, which most of us have done. However, the message is challenging. Participants in an evaluation of donor educational materials, sponsored by the Foundation for America’s Blood Centers, found information about iron confusing. If implementing iron supplementation, we would need to be extremely clear that donors *should* take a given type of iron at a given dose. But how many would do so?

The study shows that changing the interval between donations to ensure that donors maintain their iron stores without iron replacement would require a very long interval. Further, such a change would threaten blood availability, especially for type O negative. Raising the hemoglobin requirement would eliminate some with low iron stores, but would not address the iron replacement problem. Can we advise donors to eat better? Simply, no. No ordinary diet provides enough iron.

Among blood bankers, there seem to be two distinct philosophical views. One dictates that we are taking away a given amount of iron with each donation, and it is our “obligation” to replace it for donors. Another view holds that we should not try to turn our altruistic donors into hemoglobin factories for our own convenience. It seems clear that what we are doing now is not quite in the best interest of donors. It will take an iron will to find the right path forward.

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ABC is an association of not-for-profit, independent community blood centers that helps its members provide excellence in transfusion medicine and related health services. ABC provides leadership in donor advocacy, education, national policy, quality, and safety; and in finding efficiencies for the benefit of donors, patients, and healthcare facilities by encouraging collaboration among blood organizations and by acting as a forum for sharing information and best practices.

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## DID YOU KNOW...?

**‘290’** is the number of contacts that America’s Blood Centers staff had with key stakeholders, including the Food and Drug Administration, the Department of Health and Human Services, AABB, the Department of Veteran Affairs, media outlets, and other stakeholders throughout 2014.

*America’s Blood Centers’ staff, board of directors, and committee members are working daily to support the needs of ABC’s member blood centers. This year, ABC will issue a Member Value Report, sharing statistics like these about ABC’s overall accomplishments on behalf of all members, as well as individualized data related to how ABC has delivered value specifically to your blood center over the last year. Keep an eye out for the report – coming soon to your blood center!*

### Pre-Hospital Transfusion in Trauma (continued from page 1)

Some studies have suggested an association between larger transfusion volumes and increased risk of acute respiratory distress syndrome (ARDS) or organ failure. The current results suggest that pre-hospital transfusion may reduce the risk of these complications because patients receiving pre-hospital transfusion received fewer blood products in the first 24-hours and did not experience an increased risk of ARDS.

“It is certainly encouraging to see a study that reports improved clinical outcomes in trauma patients who received pre-hospital (early) red cell transfusions. Interestingly, the total number of red cells used in the first 24 hours was similar (five vs. four units,  $p=0.06$ ), suggesting that early intervention conferred the benefit,” said Darrell Triulzi, MD, medical director at the Institute for Transfusion Medicine (ITxM), who provided transfusion data for the study.

However, Dr. Triulzi adds that the design of the study warrants some caution. “This is a retrospective study that used propensity matching to identify a control group of trauma patients who did not receive pre-hospital red cell transfusions. It is certainly possible that important differences between the groups were not addressed by propensity matching and thus these results would need to be confirmed in a randomized trial.”

The authors agree with Dr. Triulzi, concluding that a prospective study on this issue is needed as pre-hospital blood products become more readily available, potentially leading to improved outcomes in severely injured patients in shock.

**Citation:** Brown JB, *et al.* Pre-trauma center red blood cell transfusion is associated with improved early outcomes in air medical trauma patients. *J Am Coll Surg.* 23 Jan 2015. [Epub ahead of print] ♦

### **ABC Requests Speakers for Fund Development, Communications and Donor Management Workshop**

America’s Blood Centers requests speakers for the Fund Development, Communications and Donor Management Workshop to be held in Chattanooga, Tenn., June 16 to 19. This workshop is one of the leading educational events for mid- and senior-level fundraising, marketing, communications, and blood donor recruitment professionals in the US and Canada. If you are interested in speaking at the workshop or have questions, please e-mail Mack Benton with your proposal at [mbenton@americasblood.org](mailto:mbenton@americasblood.org).



**America's Blood Centers®**  
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## INSIDE ABC

*The programs and services described in the Inside ABC section are available to ABC member blood centers and their staff only, unless otherwise specified. ♦*

### ABC's Got Talent Spotlight on Sheppard Blues Band and Sher Patrick

Have you checked out the talented performers participating in the first-ever ABC's Got Talent fundraiser? The ABC's Got Talent virtual talent show allows contestants to show off their skills while raising money to support the Foundation for America's Blood Centers (FABC). Take a peek at the impressive acts below and check in next week to see two new acts highlighted!

**Sheppard Blues Band, Sheppard Community Blood Center, performing "Sheppard Man of Sorrow."** A day in the life at a blood center can be tough. After Sheppard Community Blood Center employee Greg Bearden becomes among the last to receive some bad news from President and CEO Kevin Belanger, he turns in his badge and turns to the blues with the help of the Sheppard Blues Band to perform "Sheppard Man of Sorrow." Consisting of Sheppard employees and a couple of their blood donors and family members, the Sheppard Blues Band dons their full beards and flannels for a soulful rendition of "I Am a Man of Constant Sorrow." With all that lifesaving going on every day, it's hard to believe that even blood bankers get the blues! View their performance and cast your vote at <http://bit.ly/SheppardBluesBand>.



**Sher Patrick, Community Blood Center – Dayton, Ohio, belly dancing.** Sher Patrick is the marketing manager for Community Blood Center in Dayton, Ohio, where she has worked for 15 years. Prior to entering blood banking, she worked in television news, outplacement consulting, and public speaking. As if she hasn't already demonstrated a little talent through her career success, Ms. Patrick is also a very accomplished belly dancer! After taking only six months of lessons in the 1970s, Ms. Patrick learned the rest herself by watching professional belly dancers and practicing in front of her mirror for three hours daily – even on holidays! Her perseverance paid off in a major way when she wore the crown of Miss Ohio 1979 and became the 3<sup>rd</sup> runner up in the Miss America Pageant! Ms. Patrick's talents also earned her a spot traveling the world to participate in two USO tours! She is participating in ABC's Got Talent because she feels that using her skills and abilities she has developed over a lifetime to help others, whether it benefits the FABC or one of her other favorite organizations, is easy and highly rewarding. When she is not saving lives or belly dancing, Ms.



(continued on page 5)

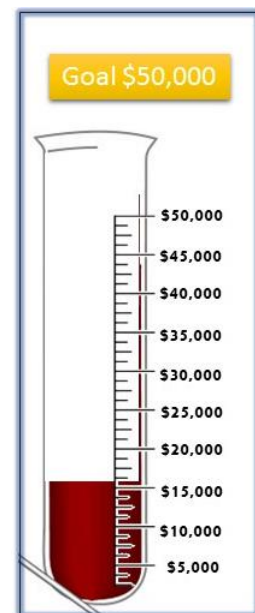
**INSIDE ABC** (continued from page 4)

Patrick is the mom of two adult children and a proud “parront” to a flock of four Macaws and other parrots. As a blood and platelet donor, Ms. Patrick says helping others is “in her blood,” and she needs your votes to help her earn a place in the top five to perform live in Washington, D.C. at the ABC Annual Meeting in March! You can see Ms. Patrick belly dancing in the 1979 Miss America pageant and cast your vote at <http://bit.ly/SherPatrick>.

## ABC’S Got Talent Weekly Tally

The ABC’ Got Talent contestants are competing for your votes, which can be made via donation to their online campaign, for a chance to be among the top five who perform live at the ABC Annual Meeting in Washington, D.C. this March. Below are the acts that are currently in the lead at press time. (*Editor’s Note:* Donations are tax deductible as permitted by law.)

ABC’s Got Talent Weekly Top 5		
Contestant(s)	Amount Raised	Link to Campaign
1. Sher Patrick	\$3,740	<a href="http://bit.ly/SherPatrick">http://bit.ly/SherPatrick</a>
2. Kim-Anh Nguyen	\$2,780	<a href="http://bit.ly/DrNguyen">http://bit.ly/DrNguyen</a>
3. Chris Staub	\$1,710	<a href="http://bit.ly/StaubBrothers">http://bit.ly/StaubBrothers</a>
4. Mary Townsend	\$1,630	<a href="http://bit.ly/DrTownsend">http://bit.ly/DrTownsend</a>
5. Pascal George	\$1,400	<a href="http://bit.ly/PascalGeorgeCJBC">http://bit.ly/PascalGeorgeCJBC</a>



Don’t see your favorite act listed in the top five? View and vote for your favorite by following the links below.

- **James AuBuchon, MD**, Bloodworks Northwest, bagpipe playing: <http://bit.ly/DrAuBuchon>;
- **Sharon Birzer**, Blood Centers of the Pacific, performing stand-up comedy: <http://bit.ly/SharonBirzer>;
- **Dan Eberts**, OneBlood, singing “Songs for All Seasons:” <http://bit.ly/DanEberts>;
- **Laurett Gannon**, Central Jersey Blood Center, singing “Look for the Silver Lining:” <http://bit.ly/LaurettGannon>;
- **Emily Shenk-DeMay**, Mississippi Valley Regional Blood Center, singing “God Bless America:” <http://bit.ly/EmilyShenkDeMay> ;
- **Shepard Blues Band**, Shepard Community Blood Center, performing “Man of Sorrow:” <http://bit.ly/ShepardBluesBand>
- **Mindy Smith**, Oklahoma Blood Institute, singing “Art is Calling Me” from *The Enchantress*: <http://bit.ly/MindySmithobi>; and
- **Eric Stone**, Blood Systems, performing “Three Little Birds,” <http://bit.ly/EricStoneBSI>. 💧



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## RESEARCH IN BRIEF

**A recent study in *Transfusion* provides promising results that blood product filtration using prion removal devices may effectively protect against transfusion transmission of variant Creutzfeldt-Jakob disease (vCJD).** In the late 1990s, the emergence of vCJD, probably related to the ingestion of bovine spongiform encephalopathy (BSE) contaminated food, raised concerns about food safety and about possible transfusion-transmission. In the UK, four probable cases of vCJD have been identified, and an analysis of archived appendix samples revealed that one in 2,000 people may carry the infectious prion protein associated with vCJD. In the absence of a screening test, prion removal filters have been designed to prevent vCJD transfusion-transmission. Researchers from Macopharma, which manufactures the P-Capt prion removal filter, and the Division of Prions and Related Diseases at the Institute of Emerging Diseases and Innovative Therapies in France, used a primate model to evaluate the performance of filters in conditions closely mimicking human transfusion. In the first of two experiments, they used the P-Capt filter, designed to remove blood-borne infectivity from leukoreduced RBC concentrate (L-RBCC). In the second experiment, they used a prototype (PMC#005) of a combination device for leukoreduction and prion removal. In each study, two groups of three macaques were transfused twice with blood collected from either BSE- or vCJD-infected macaques – one group of three before filtration and the other afterwards. Among the six animals transfused with non-filtered samples, five developed

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**RESEARCH IN BRIEF** (continued from page 6)

neurologic signs, but only four exhibited peripheral detectable protease-resistant protein (PrPres) accumulation. In study A, three animals transfused P-Capt-filtered samples remain asymptomatic and devoid of PrPres lymph node biopsies after six years. In study B, one animal transfused with PMC#005-filtered samples developed vCJD. “After five to six years of progress, this ongoing study provides encouraging results on the prion blood removal performances of the P-Capt filter in macaques, an utmost relevant model for human prion disease,” conclude the authors.

**Citation:** Lescoutra-Etcheagaray N, *et al.* Evaluation of the protection of primates transfused with variant Creutzfeldt-Jakob disease-infected blood products filtered with prion removal devices: a five-year update. *Transfusion*. 2015 Feb 3. [Epub ahead of print]

**Early results from a phase II clinical trial published in *JAMA Neurology* suggest that hematopoietic stem cell transplants (HSCT) may offer a more effective long-term treatment for relapsing multiple sclerosis (MS).** MS is an immune-mediated disorder of the central nervous system that in most patients begins as an inflammatory relapsing-remitting disease. Despite several available therapies, the majority of patients enter a secondary-progressive phase for which there is no effective therapy. Previous studies have suggested that HSCTs may offer a therapy option to MS patients designed to rest, rather than suppress, the immune system like the standard immune-based drugs. Richard Nash, MD, of the Colorado Blood Cancer Institute, and colleagues are conducting the Hematopoietic Cell Transplantation for Relapsing-Remitting Multiple Sclerosis (HALT-MS) study, which is investigating the efficacy of early intervention with high-dose immunosuppressive therapy (HDIT)/HSCT for patients with relapsing-remitting MS (RRMS) and breakthrough disease. In the current publication, they report a pre-specified, three-year interim analysis of the trial. HSCT grafts were collected from 25 patients, and 24 of these received HDIT/HSCT. The authors monitored MS disease activity, including progression, clinical relapse, or new lesions documented on MRI – used as a composite primary end point, in contrast to previous HSCT studies which relied on progression alone. Over 186 weeks of follow-up, progression-free survival and clinical relapse-free survival were 91 and 86 percent, respectively. “At three years, HDIT/HSCT without maintenance therapy was effective for inducing sustained remission of active RRMS and was associated with improvements in neurologic function,” concluded the authors. The treatment was associated with few early complications or unexpected adverse events. M. Mateo Paz Soldán, MD, PhD, and Brian G. Weinshenker, MD, of the Mayo Clinic, Rochester, Minn., caution that while HDIT can effectively suppress inflammatory disease activity in MS patients with short-term disease, “the jury is still out regarding the appropriateness and indications of HSCT for MS.”

**Citations:** Nash RA, *et al.* High-dose immunosuppressive therapy and autologous hematopoietic cell transplantation for relapsing-remitting multiple sclerosis (HALT-MS): A 3-year interim report. *JAMA Neurol*. 2015 Feb 1;72(2):159-69.

Paz Soldán MM, Weinshenker BG. Moving targets for hematopoietic stem cell transplantation for multiple sclerosis. *JAMA Neurol*. 2015 Feb. 1;72(2):147-9. [◆](#)

## BRIEFLY NOTED

**An editorial in the *Journal of the American Medical Association (JAMA)* highlights a September 2014 Food and Drug Administration advisory committee that discussed the safety and appropriateness of testosterone replacement therapy in older men.** The use of testosterone therapy in the US has increased significantly in recent years; between 2010 and 2013, the number of patients on testosterone replacement therapy increased from about 1.3 million to 2.3 million. Prompted by studies suggesting cardiovascular risks associated with testosterone replacement therapy, an FDA advisory committee met to discuss whether testosterone replacement for age-related hypogonadism (a decline in testosterone resulting from aging, the most common reason for testosterone replacement today) is supported by the available data, and evaluated the associated cardiovascular risks. The FDA meeting, described by Marc B. Garnick, MD, of Beth Israel Deaconess Medical Center, highlighted data showing that a majority of men using testosterone replacement are aged 40 to 64 with a substantial number over age 65. These testosterone products were intended as replacement therapies for men with no endogenous testosterone, due to either testicular failure or absence of testicular tissue and central dysfunction of hypothalamic-pituitary axis – not for age-related hypogonadism, or “low T,” as promoted in mass media. Furthermore, most men on testosterone have not had their testosterone levels tested before receiving a prescription. “The emergence of testosterone replacement therapy as a multibillion-dollar industry without appropriate supporting data or oversight of its proper usage emphasizes the need for stricter controls as well as reassessment of approval pathways when usage is not consistent with approved labeling,” writes Dr. Garnick in the commentary. The committee recommended further trials to investigate the safety and cardiovascular risks of testosterone replacement, as well as educational outreach to physicians and patients. “The extensive use of testosterone in the general population has become an issue for blood centers. Increasing numbers of men are sent to us for therapeutic phlebotomy when their hemoglobin rises as a result of therapy,” said Louis Katz, MD, chief medical officer at America’s Blood Centers. “It is frequently clear that these men are not being monitored correctly or using doses adjusted in an evidence-based fashion. How we should interact with these donors and their providers has become contentious.” Until recently, all such donors should have been deferred because they are not clearly volunteer donors. However, FDA now permits certain blood centers under a variance to their biologic license applications to collect blood from these donors without labeling the units as “therapeutic” (see [ABC Newsletter, 9/27/13](#)).

**Citation:** Garnick MB. Testosterone replacement therapy faces FDA scrutiny. *JAMA*. 2015 Feb 10;313(6):563-4.

**The Center for Patient Safety recently published resources and materials for health organizations to celebrate Patient Safety Awareness Week from March 8 to 14.** The Center for Patient Safety is a non-profit organization focused on creating a healthcare environment that is always safe for all patients and healthcare providers in all processes. It is celebrating Patient Safety Awareness Week in conjunction with its 9<sup>th</sup> Annual Patient Safety Conference on March 13, to be held at the Crowne Plaza Hotel in St. Louis, Mo. The theme of this year’s Annual Patient Safety Conference is “Safe Care is Our Focus, 24 hours a day, 7 days a week, 365 days a year.” In recognizing the year-round efforts to improve safe care, the Center is raising awareness by providing a [Patient Safety Awareness Week Toolkit](#), available online for free. The Center recommends that health facilities post reminders about the importance of patient care and hold events to recognize patient safety efforts. More information about the Annual Conference can be found [here](#). (Source: Center for Patient Safety e-mail, 2/16/15) ♦





# REGISTRATION NOW OPEN

## America's Blood Centers' Technical, Collections & Quality Workshops

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Hosted by **oneblood** 

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2-day registration: \$390/\$445

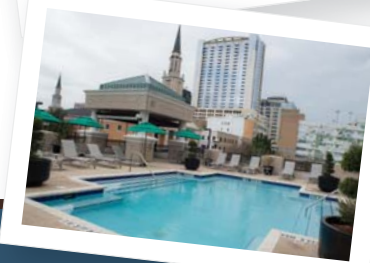
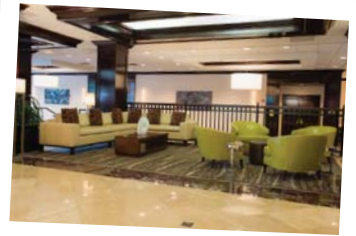
3-day registration: \$460/\$515

Scholarship opportunities available to ABC members to cover the cost of registration fees and help with travel expenses. There are eight (8) \$1,000 scholarships available to ABC members to cover the cost of registration fees and help with travel expenses. Application link and additional details included in registration.

‘OneBlood is excited to host the upcoming ABC Technical, Collections & Quality Workshops in Orlando. Our industry is rapidly evolving to meet the future needs and expectations of our healthcare partners. This meeting will equip you with the latest information on hot topics and allow you opportunities for networking with colleagues from across the country. Don't miss out on the chance to enhance your knowledge and to share your thoughts and expertise with others.’

– Don Doddridge  
CEO, OneBlood Inc.

Sponsorship opportunities available. Contact Abbey Nunes at [anunes@americasblood.org](mailto:anunes@americasblood.org) for details.



Orlando International Airport (MCO) is served by most major US airlines and offers non-stop service to 79 destinations; check [www.orlandoairports.net](http://www.orlandoairports.net) for more information.

## REGULATORY NEWS

**The Food and Drug Administration accepted Sangamo BioSciences' investigational new drug (IND) application for a new treatment designed to provide a one-time lasting therapy for beta-thalassemia.** The IND allows the company to begin a phase I/II clinical trial of its SB-BCLmR-HSPC genome editing approach (ZFP Therapeutic) in transfusion-dependent patients with beta-thalassemia major. Scheduled to begin in 2015, the trial will evaluate the safety, tolerability, and measures of efficacy of this new approach. The new therapy is being developed by Sangamo BioSciences in collaboration with Biogen. The new treatment uses hematopoietic stem progenitor cells (HSPCs) from matched donors in a genome editing approach to target a key genetic switch (a zinc finger nuclease) in the patient's own HSPCs to enable continued production of fetal hemoglobin in the red blood cells of adults, explained Geoff Nichol, MB, ChB, Sangamo's executive vice president of Research and Development. Elevated fetal hemoglobin can reduce symptoms of hemoglobinopathies, such as beta-thalassemia. The goal is for the therapy to provide a longer-lasting treatment for beta-thalassemia patients, rather than receiving regular blood transfusions. More information can be found in the [press release](#). (Source: Sangamo BioSciences press release, 2/4/15) ♦

## THE WORD IN WASHINGTON

**The 2016 Republican National Convention and Democratic National Convention sites have been named.** Democrats announced that they will nominate their candidate the week of July 25, 2016 in Philadelphia while the Republicans will hold their convention in Cleveland, Ohio from July 18-21, 2016.

**America's Blood Centers reminds its member blood centers to contact their members of Congress today to schedule appointments in preparation for visits to Capitol Hill on March 24 in conjunction with the ABC Annual Meeting.** Ask for the scheduler when you call, and the office will be happy to provide you with the scheduler's e-mail if they are not available. When calling to schedule an appointment, it is important to remember that more than one attempt may be necessary, as congressional schedulers are inundated with requests. ABC also encourages ABC members who met with their members of Congress while the House and Senate were out of session this week for President's Day to e-mail [bklinck@americasblood.org](mailto:bklinck@americasblood.org) with details about the meeting. ♦

## INFECTIOUS DISEASE UPDATES

### HIV/AIDS

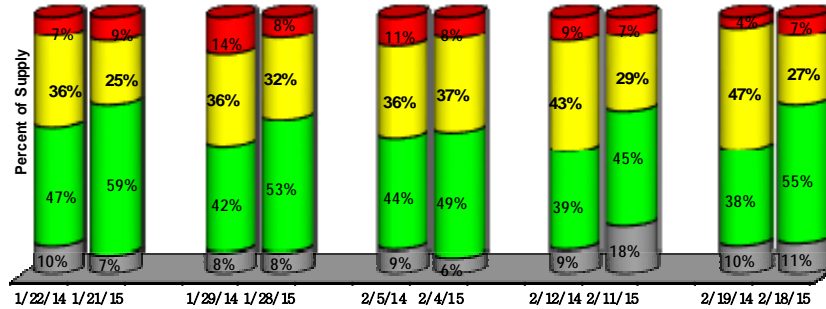
**A report in *EBioMedicine* describes a more aggressive strain of the HIV virus identified in Cuba.** The strain, called CRF19, has been seen in Africa, but it is more widespread in Cuba. Researchers from the Rega Institute for Medical Research in Belgium identified the strain, which can progress to AIDS in three years, compared with about 10 years for the dominant strain of HIV in the Western Hemisphere (subtype B). To describe the new strain, researchers analyzed blood samples from 52 patients who experienced a rapid progression of AIDS and 22 healthy HIV-infected patients. They found CRF19 is a combination of the HIV subtypes A, D, and G, suggesting that the combination drives a high viral load and quickens immunologic deterioration and the onset of AIDS. Subtypes D and A have been associated with respectively faster and slower disease progression. "We propose that CRF19 is evolutionary very fit, causing rapid progression to AIDS in many newly infected patients in Cuba," conclude the authors. The study is available online for free [here](#).

**Citation:** Kouri V, *et al.* CRF19\_cpx is an evolutionary fit HIV-1 variant strongly associated with rapid progression to AIDS in Cuba. *EBioMed.* 15 Feb 2015. ♦

### We Welcome Your Articles

We at the *ABC Newsletter* welcome freelance articles on any subject relevant to the blood banking community. Writers are encouraged to submit short proposals or unsolicited manuscripts of no more than 1,100 words. While ABC cannot pay for freelance pieces, the writer's name and title will be included at the end of the story, brief news item, or commentary. If proposing a story, please write a few paragraphs describing the idea and sources of information you will use, your present job and background, and your qualifications for writing on the topic. ABC staff cannot guarantee all stories will be published, and all outside writing will be subject to editing for style, clarity, brevity, and good taste. Please submit ideas and manuscripts to Editor Betty Klinck at [newsletter@americasblood.org](mailto:newsletter@americasblood.org). You will be sent a writer's guide that provides information on style conventions, story structure, deadlines, etc.

**STOPLIGHT®: Status of the ABC Blood Supply, 2014 vs. 2015**



■ No Response   
 ■ Green: 3 or More Days   
 ■ Yellow: 2 Days   
 ■ Red: 1 Day or Less

The order of the bars is (from top to bottom), red, yellow, green, and no response

**MEMBER NEWS**

**Lifeblood, headquartered in Memphis, Tenn., honored organizations, corporations, and individuals for their voluntary efforts in 2014 to promote and support blood donation in the community as part of Lifeblood’s 6<sup>th</sup> Annual Awards Luncheon on Feb. 6.** “Our volunteers are vital to ensuring a stable blood supply is available at all times for trauma centers, hospitals, and individuals in need,” said Susan Berry-Buckley, Lifeblood CEO. “And so we celebrate them today for their efforts to support Lifeblood and their fellow community members.” The awards luncheon kicked off with a keynote address by Chris McCulley, the father of a blood recipient whose life was changed when there were complications during his son’s birth and he needed blood transfusions. Unfortunately, his son, Jax, passed away less than a week after he was born. The luncheon was emceed by WREG News Channel 3’s weather anchor and blood donation advocate Todd Demers and included invocation by Rev. Katherine Bush of St. Mary’s Episcopal School in Memphis. Details on this year’s award winners can be found [here](#). (Source: Lifeblood press release, 2/19/15) ♦



Lifeblood’s CEO Susan Berry-Buckley (left) awards Donna Reed, retired from Houston High School, with the Volunteer of the Year Award.

**COMPANY NEWS**

**Roche announced in a Feb. 9 press release that it has acquired Signature Diagnostics AG, a translational oncology and genomics company that develops large blood plasma and tissue biobanks that are constructed for multicenter prospective clinical trials.** The deal is designed to strengthen Roche’s cancer diagnostics effort with Signature’s expertise in both biobanks and next-generation sequencing

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**COMPANY NEWS** (continued from page 11)

(NGS) assays, Roche's fifth deal in less than a year focused to molecular diagnostics and data analysis. Signature uses the samples from its biobanks along with accompanying clinical progression and genetic data to develop and validate circulating cell free DNA (cfDNA) tests for research use only, with the goal of advancing non-invasive treatment response monitoring for patients with cancer. Signature also develops several NGS assays, which use targeted gene panels and are for research use only. "Biobanks play an important role in uncovering the cause or origin of disease such as cancer which is important in translational research and the development of personalized therapies for patients," Roland Diggelmann, chief operating officer at Roche, said in the press release. "Signature represents a unique bridge between high value cancer biobanks and NGS assay development. Roche plans to leverage Signature's expertise in both of these areas to accelerate the development of targeted NGS-based diagnostics in the future. Biobanks can also be used for biomarker discovery and hypothesis testing with Pharma." More information can be found [here](#). (Source: Roche press release, 2/9/15) ♦

**MEETINGS****March 5      Bloodworks Northwest Web Symposium on "Pathogen Inactivation."**

Bloodworks Northwest (Bloodworks NW) (formerly Puget Sound Blood Center) will host a web-based symposium/forum to discuss hot topics related to the Food and Drug Administration's approval of pathogen inactivation technology for blood components. The session will include formal presentations on pathogen inactivation technology, efficacy, safety, cost, and legal implications – both from hospital and blood center perspectives. Clinical trial opportunities will be explored. It includes a panel discussion on related issues. Registration is free for Bloodworks NW customers and \$25 for all others. Register [here](#).

**Contact:** [news@bloodworksNW.org](mailto:news@bloodworksNW.org) ♦

**CLASSIFIED ADVERTISING**

Classified advertisements, including notices of positions available and wanted, are published free of charge for a maximum of three weeks per position per calendar year for ABC institutional members. There are charges for non-members: \$139 per placement for ABC Newsletter subscribers and \$279 for non-subscribers. A six (6) percent processing fee will be applied to all credit card payments. Notices ordinarily are limited to 150 words. To place an ad, contact Leslie Norwood at the ABC office. Phone: (202) 654-2917; fax: (202) 393-5527; e-mail: [lnorwood@americasblood.org](mailto:lnorwood@americasblood.org).

**POSITIONS AVAILABLE**

**Donor Center Supervisor (Blood Bank of Hawaii).** If you have the proven leadership ability and supervisory skills, possess exceptional customer service, and the ability to work alongside with the team, please read on. Our Donor Center Supervisor will be responsible for the overall supervision of the donor collection team and collection facilities, ensuring the collection operations are in compliance with internal SOPs and external regulations, collaborating through interaction and communication with other departments to ensure policies and procedures are in place to optimize the quality

and integrity of the blood supply and donor safety. A current, valid driver's license is required for this position. If you have supervisory experience in a healthcare-related field, able to lead by example, a team player, and available to work flexible hours including evenings, weekends and holidays, please apply online at [www.BBH.org](http://www.BBH.org).

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**POSITIONS** (continued from page 12)

**Compliance Specialist (Blood Bank of Hawaii).** Come join our collections department and help support the needs of patients in all of Hawaii. The Compliance Specialist (CS) participates in and supports change throughout the organization and department. Special focus in deviation management, root cause analysis, corrective action and follow up, collections audits, and project improvement processes are necessary. The Compliance Specialist works closely with the collections department leadership to ensure quality standards are followed per SOP. The CS will be responsible for serving on collections-related project teams to ensure internal and external standards are followed. SOP writing, reviewing, and updating is an essential function of this role. The CS will also work closely with the training team to guarantee a successful rollout of new processes. A close collaboration with record reviewers, quality assurance, information technology, and lab is necessary. The desirable candidate will preferably have quality and/or regulatory experience in a blood center or healthcare related industry. We offer a competitive salary and excellent benefits. Please apply via our website at [www.BBH.org](http://www.BBH.org).

**Donor Center Manager.** Kentucky Blood Center, located in Lexington, Ky. seeks enthusiastic healthcare professional to hire, train, motivate, encourage, develop, evaluate, and supervise blood collection staff to ensure our valued volunteer blood donors receive the best care possible; ensure quality control and compliance with industry regulations; utilize resources to maximize cost effectiveness; and assure beneficial business relationships in the community. Medical background (RN) and five years management experience required. Applicants must have working knowledge of Word and Excel; demonstrated skills in staff management/development, budget preparation/monitoring, and organizational skills; ability to think independently and solve problems; and possess excellent communication skills. This challenging opportunity requires a team-player attitude, high energy level, and a dedication to excellence. Competitive salary, comprehensive benefits including health/dental/life, LTD, paid sick/vacations/holidays, EAP, 403(b) retirement savings plan, and pension plan. For more information or to apply online, please visit [www.kybloodcenter.org](http://www.kybloodcenter.org). Drug-free and EOE/AAP.

**IRL Manager and Part-Time Technologist II.** Join the American Red Cross, where your heart and mind go to work! The American Red Cross is seeking an IRL Manager and Part-Time Technologist II (20 hrs/wk) located in Oakland, Calif. The Manager is responsible for control of all daily laboratory operations, including staff, budget, environment and work processes. The Technologist will perform basic and guided advanced donor and patient tests and interpret results to determine donor-recipient compatibility. They will also resolve compatibility problems, provide intermediate reference

and consultation services to hospitals and transfusion services and perform automated and manual test procedures on blood samples. Both positions *must be California Licensed Clinical Laboratory Scientist (CLS)*. For a complete description please visit: [www.americanredcross.apply2jobs.com](http://www.americanredcross.apply2jobs.com) and search for Area of Interest: IRL Reference Laboratory or by location. *As an Affirmative Action/Equal Opportunity Employer, well-qualified women, minorities, veterans and persons with disabilities are encouraged to apply.*

**ITS Quality Manager-ITS001.** Responsible for managing quality control in all aspects to include but not limited to the organization and management of SOPs, Quality Improvement Reports (QIRs), Process Change Requests (PCRs), validations, external and internal audit reports, organizational forms, and records for the Information Technology Services (ITS) department. Will perform within the guidelines and requirements of the regulatory agencies governing computer operations. This position reports directly to the Chief Information Officer. Bachelor's degree in computer information technology services preferred. Three years of quality management experience required. Experience performing quality management with IT departments preferred. Must be proficient in MS Office. Must be at least 21 years old with a good driving record. Three years of driving experience required. FT: Monday-Friday 8:00 a.m.-5:00 p.m. May work additional hours as required. E-mail résumé to [hr\\_dept2@biobridgeglobal.org](mailto:hr_dept2@biobridgeglobal.org). Call Human Resources (210) 757-9557. BioBridge Global and its subsidiaries are proud to be an EEO/AA-M/F/D/V/Genetic Data employer that maintains a Tobacco & Drug-Free Workplace. All qualified applicants will receive consideration for employment without regard to race, color, ethnicity, religion, sex, national origin, disability, veteran status, genetic data or other legally protected status.

**Chief, Blood Services Section (Department of Transfusion Medicine, National Institutes of Health Clinical Center (NIHCC), Department of Health and Human Services).** The Department of Transfusion Medicine, NIHCC, seeks an academic transfusion medicine physician to lead the Blood Services Section at the nation's leading research hospital. The position oversees 40 professionals in donor services, blood procurement, including platelet and granulocytapheresis, and therapeutic and research apheresis. The Section Head is a member of a high-level team responsible for subspecialty consultation, strategic planning and establishment of donation, collection and transfusion policies locally and nationally. Candidates should have an established record in an area related to transfusion medicine and interest/experience in professional education and designing and implementing research protocols in collaboration.

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**POSITIONS** (continued from page 13)

Salary commensurate with experience and federal retirement and health benefits included. A detailed vacancy announcement with mandatory qualifications and application procedures can be obtained during the open and close dates listed below, at [www.usajobs.gov](http://www.usajobs.gov). Announcement Number NIH-CC-DH-15-1297707. Open date: 2/13/2015; Close date: 2/22/2015. Questions on application procedures may be addressed to the HR Specialist at (301) 594-9039. Applications must be received by 11:59 PM on 2/22/15 and include a resume detailing the job experience associated with each position. DHHS and NIH are equal opportunity employers.

**Medical Technologist – Immunohematology Reference Lab.** Are you looking for a full-time opportunity to take on challenging blood bank antibody workups? Would you like to learn more advanced techniques? Heartland Blood Centers in Aurora, Ill. is looking for a medical technologist to join the team in our reference lab on the evening shift. You will play a critical role in providing suitable blood products to patients with complex needs. In addition to performing all advanced testing procedures, you will be part of the nationwide network for sharing rare units. If interested, we have successfully mentored techs for their SBB exam. We provide opportunities to our staff to attend workshops, teleconferences, including tuition reimbursement. Our recent range adjustment allows us to offer a competitive salary in addition to an applicable shift differential. This position performs all advanced testing procedures on Immunohematology work as well as preparing special products. Requirements: Medical Technologist MT (ASCP) with one to two years of blood bank experience preferred. BB (ASCP) certified, SBB or SBB eligible desirable. Requires attention to detail, excellent customer service skills, effective written and verbal communication skills and a positive, team-oriented attitude. Send resume to: [jobs@heartlandbc.org](mailto:jobs@heartlandbc.org). Affirmative Action/Equal Opportunity Employer

**Applications Administrator.** Blood Bank of Hawaii, a medium-size blood center (50,000 RBC distribution annually), is looking for an Applications Administrator to join our IT team. Reporting to the IT Director, this person will act as the primary point of contact for blood banking specific applications being responsible for identifying, troubleshooting, and resolving any issues along with ensuring that the applications are maintained, secured, and validated. This person will be an expert in analyzing, documenting, and communicating business needs to IT. This person will supervise data entry staff. The ideal candidate will have direct experience in a similar position with strong communication skills and broad knowledge of IT systems, quality, and documentation. Supervisory experience preferred. We offer a competitive salary and excellent benefits. Please apply via our website: [www.BBH.org](http://www.BBH.org). EOE

**Consultation Lab Tech III (Gulf Coast Regional Blood Center).** The Blood Center of Houston is currently seeking a Consultation Laboratory Tech III. Under moderate supervision of the consultation manager, this individual prepares special blood components and performs patient and donor tests. This position involves frequent contact with internal and external customers. This position requires an MLT plus minimum two years of advanced and recent (within past one to two years) blood bank and immunohematology experience; or MLS with recent (within past one to two years) blood bank and immunohematology experience; or MLS new graduate eligible to take certification exam; certification must be obtained within six months of employment. The successful candidate must have a valid Texas Driver's License plus acceptable driving record. Gulf Coast Regional Blood Center is a non-profit 501(c)(3) organization and is accredited, licensed and inspected by the Food and Drug Administration (FDA), AABB, as well as local and state authorities. The Blood Center is a proud member of AABB, America's Blood Centers, Blood Centers of America, South Central Association of Blood Banks, and the Texas Medical Center. Please visit our website for more information about our organization and to apply online: [www.giveblood.org](http://www.giveblood.org). Mia Loucks – Recruiter – (Phone: (262) 289-2294, [mloucks@giveblood.org](mailto:mloucks@giveblood.org)).

**Donor Recruitment Mobile Supervisor - DR003.** Responsible for providing supervisory support for field donor recruitment program reporting directly to the Director, Donor Recruitment & Client Services. Under his/her supervision, will assist in planning, organizing and coordinating all field recruitment activities for the South Texas Blood & Tissue Center. Responsible for achieving a minimum 100 percent of assigned goals. Bachelor's degree in marketing or related discipline preferred. Two years marketing or sales experience preferred. Supervisory experience preferred. Computer experience preferred. Three years with good driving record required. Visit our website at [www.biobridgeglobal.org](http://www.biobridgeglobal.org). E-mail résumé to [hr\\_dept2@biobridgeglobal.org](mailto:hr_dept2@biobridgeglobal.org). Call Human Resources (210) 757-9557. BioBridge Global and its subsidiaries are proud to be an EEO/AA-M/F/D/V/Genetic Data employer that maintains a Tobacco & Drug-Free Workplace. All qualified applicants will receive consideration for employment without regard to race, color, ethnicity, religion, sex, national origin, disability, veteran status, genetic data or other legally protected status.

**IRL Manager.** Join the American Red Cross, where your heart and mind go to work! We are currently seeking an IRL Manager in St Paul, Minn. This position is responsible for management and control of all daily

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**POSITIONS** (continued from page 14)

laboratory operations, including staff, budget, environment and work processes. The incumbent will be successful by assuring compliance with safety policies and demonstrating excellent customer service, interpersonal skills and positive professional image, assuming responsibility for the laboratory, staff and compliance. Qualified candidates will have at a minimum, a bachelor's degree in a biological related field and SBB (ASCP) certification. At least five years of directly related experience including two years laboratory experience in high complex immunohematology testing and two years of management in an IRL or equivalent hospital setting. Please send your resume and cover letter (including salary requirements) to Nicole Packard, Talent Acquisition Advisor via email at [Nicole.Packard@redcross.org](mailto:Nicole.Packard@redcross.org). *As an Affirmative Action/Equal Opportunity Employer, well-qualified women, minorities, veterans and persons with disabilities are encouraged to apply.* 💧