23 August 2017

AABB Standards Committee,

The AABB-THOR Working Party is resubmitting its request to modify standard 5.15.1 to permit the use of low titer group O whole blood in massively bleeding patients whose ABO group might not be known. The proposal includes a background information document that provides a detailed rationale for suggesting this modification. The document reviews the historical use of whole blood, the high incidence of preventable civilian deaths per year in the US due to hemorrhage, a detailed discussion of the serological safety of low titer whole blood including the latest observations from civilian trauma recipients of 3 and 4 units of WB, and the potential benefits of using low titer group O whole blood to improve outcomes for patients with hemorrhagic shock. The background document also addresses the lack of consistency between the standards regarding minor incompatible plasma transfusion in plasma and platelets and that in whole blood.

To address the concern that there is not widespread interest in transfusing low titer whole blood in massively bleeding civilian recipients, the working party assembled a petition that was signed by 217 thought leaders in transfusion medicine, surgery, critical care, and emergency medicine from 24 countries. By signing the petition, these thought leaders expressed their interest and support of the use of low titer group O whole blood for massively bleeding patients whose ABO group might not be known. The petition has been signed by leaders in the transfusion medicine community including, amongst many others: Jim AuBuchon, Neil Blumberg, Michael Busch, Robertson Davenport, Larry Dumont, Jose Cancelas-Perez, Cassandra Josephson, Louis Katz, Harvey Klein, Jeff McCullough, Paul Ness, Adrian Newland, Mary Oneill, John Roback, Beth Shaz, Christopher Silliman, Simon Stanworth, Ronald Strauss, Marie Steiner, Darrell Triulzi, and Jonathan Wallis. This proposal to modify standard 5.15.1 is also endorsed by the following blood collectors: BloodWorks Northwest, Gulf Coast Regional Blood Center, Mississippi Valley Regional Blood Center, New York Blood Center, as well as by the America’s Blood Centers, South Texas Blood and Tissue Center, UT Health San Antonio Trauma Center, the Eastern Association for the Surgery of Trauma, and the Committee for Tactical Emergency Casualty Care. Their letters of support are attached.

Respectfully,

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