



Prioritize Blood Donation as a National Imperative

Every two seconds in the U.S, someone needs blood. Blood transfusion is one of the most common medical procedures performed in this country, with blood needed to treat patients with acute care needs as well as for ongoing disease management, including cancer, inherited blood disorders, cardiovascular and orthopedic surgeries, and organ and marrow transplants. The very short shelf life of platelets (5-7 days) and red blood cells (21-42 days) requires a continuous supply of diverse, volunteer donors and donations, regardless of time of year, weather, or other challenges affecting the collection of blood products. Promoting the need for additional blood donors to meet this need must become a national priority.

- **The blood community collects more than 30,000 units of blood every day** to ensure there is a robust supply of blood at the ready for both day-to-day needs as well as disaster preparedness. This blood can only come from a diverse pool of volunteer donors as blood cannot be manufactured.
- **Thirty-eight percent of Americans are eligible to donate, yet less than 10 percent do.** The average donor gives less than two times each year despite the ability to donate every two months. Safety interventions have resulted in increased donor deferral and reduced the supply of critical components. These include higher standards for donor hemoglobin, interventions to prevent donor iron depletion, and donor deferrals mandated by the FDA to reduce the risk of donor reactions.
- **Severe demographic challenges threaten the U.S. donor base** with the aging of the World War II and baby boomers that have supported the blood supply for decades, and millennials and younger donors failing to donate at similar rates. Currently, about 60 percent of blood donations are made by people over 40 years old, and of these, three-quarters come from people over 50.
- **A diverse pool of donors is essential** to provide frequently transfused patients, such as those with sickle cell disease, and those with rare blood types with precisely matched blood components. Patients benefit when there is a robust inventory of blood components from donors with similar ethnic profiles.
- **When disaster strikes, it is the blood already “on the shelf” that saves lives.** Because it takes 24-48 hours to process and test a donated unit of blood, blood centers work with federal partners to estimate the amount of blood that could be needed in any disaster situation, either natural or man-made. While donating blood following a disaster may seem prudent, it is the blood on the shelf, donated days before these events, that saves lives. Proper messaging around this is critical.
- **An increased demand for universal blood types amplifies challenges related to recruitment of donors.** While O-negative blood affords hospitals greater flexibility when stocking fewer products, it places greater stress on blood centers to collect from a small population of donors.

Action for Congress: Support the establishment of partnerships and programs that raise awareness about the need for consistent blood donation from a diverse community of donors. Please participate in the National Association of Broadcasters 2019 Congressional Public Service Announcement (PSA) Campaign that includes blood donation.