Control of the health condition of blood donors with the presence of markers of Hepatitis B and C

Introduction

The health care of donors blood the before and after donation should be something about wich health workers from Transfusion services must be interested.

Intensive Goal: health OŤ care in blood donors wich blood We found presence of HbsAg and HCVantibodies.

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Methods

In our W.U. Transfusiology we make test of every blood donation for finding out of presence of HBsAg and anti-HCV. We used ELISA tests from the third generation from the company BIOMERIEUX (Tek TIME). In the last five years from totally 15.150 donations we have tested, and confirmed retested all carriers of markers for Hepatitis B and C in the Republic Institute OŤ Transfusiology in Skopje. We made medical evaluation in all carriers for liver damage. This examination includes history of disease, laboratorybiochemical examination of liver blood tests with bilirubin, aminotransferases ALT and AST, total serum protein test, protrombine time, HBeAg and Echothomography of liver and spleen.

Results

From totally 15.150 donations detected presence of we HbsAg in 253 (1,66%) donors and presence of anti HCV in 132 (0,87%) donors. In 8 (3,1%) of the carriers of HbsAg we found out increased values of aminotransferases (AST and ALT); increased values of bilirubin because of wich we hospitalized them for futher examination and treatment at Infections ward in our Hospital. In 3 (2,7%) anti-HCV positive blood donors we found out increased values of aminotransferases, e specially of ALT. The same ones were hospitalized at the Infection ward. We advised the rest of them topay attention of food, behaviour and to have more frequent health controls. All of they have been registered in the Regional Institute for Health protection in Stip, on a list: Contegious diseases which endanger the whole conntry.

Regulare care for the donors health is needed. We should make regular medical estimate for liver damage and give advices for healthy food and behavionr of chronical carriers of HBV and HCV. These people must be deferal for blood, plasma and tissues donation. In case of surgery and stomatological interventions these people must inform health worker that thy are carriers of HBV and HCV. The health condition of donors with presence of markers of Hepatitis B and C must be regulary controled.

Conclusions