To meet the religious, medical, and personal beliefs of patients who opt not to have transfusions, Saint Peter’s University Hospital has launched a “bloodless” medicine program. Patient blood management is a hospital-wide effort.

Dr. Howard Lakritz
Chairman of Anesthesiology
Saint Peter’s University Hospital

A team of physicians, nurses, pathologists, pharmacists, dietitians and support staff works to assess and address each patient’s blood-management needs, according to a prepared statement from the hospital.

Dr. Howard Lakritz, chairman of anesthesiology at Saint Peter’s and a member of Anesthesia Consultants of New Jersey in Somerville, heads the program.

“It is clear that many if not most transfusions are avoidable, resulting in better care of our patients. It is simply better medicine,” said Lakritz, who directs bloodless medicine and surgery at Saint Peter’s, a 478-bed acute-care teaching hospital.

Lakritz said the program was inspired by the Roman Catholic Diocese of Metuchen. Saint Peter’s is aetat-designated children’s hospital and a regional specialist in geriatrics, oncology, orthopedics, women’s services and ambulatory care.

A patient preparing for surgery will have his or her blood tests evaluated by doctors at Saint Peter’s. Depending on the results of the tests, physicians may recommend a regimen of medications and dietary supplements to ensure optimal levels of hemoglobin — the oxygen-carrying protein in red blood cells — prior to elective surgery. When surgery is the recommended course of treatment, doctors may then use a variety of state-of-the-art technologies and techniques appropriate for the patient and the procedure to minimize blood loss, such as intraoperative cell salvage, which calls for cleaning blood that remains in constant circulation. Following surgery blood loss is minimized and blood production enhanced through medication and nutrition therapy as well as technology. Blood also can be collected postoperatively from the patient and processed without leaving the patient’s body.

Patients who opt to have bloodless treatment meet with Marcie Colon, coordinator of the Saint Peter’s bloodless medicine and surgery program.

“My first responsibility is to learn and understand what our patients want and to follow through to make sure we respect their wishes and wishes, so I meet with patients and often with their families,” Colon said. “I then work with the medical team and all support services to ensure that we do fulfill our patients’ requests and wishes.”

Colon works to find a facility that will carry out treatment without the use of blood products should a patient need to be transferred from Saint Peter’s.

While religious conviction can be the driving force behind the desire for bloodless medicine, other patients choose the option because they are uncomfortable or concerned about the use of blood products. While transfusions today are believed to be safer than ever, there are always risks. A bloodless program reduces exposure to a variety of risk factors and minimizes blood loss with improved medical and surgical techniques and interventions.

There is evidence that patients who avoid transfusions have:

- Fewer complications.
- Faster recoveries and shorter hospital stays.
- Lower rates of the most serious postoperative complications, including heart attack, stroke and infections.
- Decreased risk of immunological complications and allergic reactions.
- Less exposure to blood-born viruses and infections.
- No risk of receiving the wrong blood type.

The rationale for giving blood transfusions is to maintain a certain level of hemoglobin in blood. Hemoglobin is a component of red blood cells and it is responsible for carrying oxygen throughout the body. Low hemoglobin levels translate to less oxygen delivered to the body’s tissues and organs. This has been thought to increase the risk of infection, slowing the body’s ability to heal, causing tissue and organ damage.

Current medical research is focused on reassessing the threshold level of hemoglobin necessary for good health and healing, because some studies suggest that patients can do well when experiencing lower hemoglobin levels than previously believed safe.

While bloodless surgery and medicine will serve the needs of those who refuse blood transfusions, transforming the approach to transfusions will benefit the entire hospital community,” Lakritz said. “While this clearly started first with Jehovah’s Witnesses, the long-term goal is to make rational blood management the standard of care.”

Visit saintpetershcs.com/Bloodless-Medicine for more information about the bloodless medicine and surgery program at Saint Peter’s.