

Preface

Issues in Transfusion Medicine



Terri G. Monk, MD



Lawrence T. Goodnough, MD

Guest Editors

A recent popular book entitled *Blood: An Epic History of Medicine and Commerce* describes the history of transfusion medicine from bloodletting to the postwar rise of the blood services complex [1]. In the preface to this book, the author, Douglas Starr, describes blood as a national resource ranking “among the world’s most precious liquids.” He estimates that if a barrel of crude oil “sells for about \$13, then the same quantity of whole blood, in its crude state, would sell for more than \$20,000.” Because crude oil prices have risen dramatically over the past few years, this barrel of blood would be much more expensive today and it would certainly deserve the title of the “world’s most precious resource.”

At a later point in the preface, Starr admits that although this analogy between blood and oil is provocative, the comparison breaks down if you look at the characteristics of each substance. He cites the following major differences: (1) blood transmits diseases while oil does not; (2) a slip in quality control in the blood bank or administration of blood can result in death or the transmission of diseases to thousands of people, while this type of problem at the oil refinery only results in the loss of a few dollars; (3) oil companies pay handsomely for drilling rights, while blood collection agencies pay nothing or very little for this precious resource; and (4) “. . . though oil serves as a critical resource, it carries no cultural baggage. Blood, in contrast is loaded with meaning” and has “mystical, religious and patriotic significance.”

It is because of the complex medical, cultural, and religious problems associated with blood that we have decided to devote this issue of the *Anesthesiology Clinics of North America* to the topic of issues in transfusion medicine. The articles in this issue address topics related to the safety of blood and errors that occur in transfusion medicine, strategies to minimize or eliminate the use of allogeneic blood transfusions, outcomes associated with the administration or avoidance of blood transfusions, and the future of transfusion medicine. We hope that our efforts will help to demystify and increase understanding of the current practice of transfusion medicine and improve care for all patients for whom clinicians are confronted with a transfusion decision.

Terri G. Monk, MD
Professor, Anesthesiology Services (112C)
Veteran Affairs Medical Center
508 Fulton Street
Durham, NC 27705, USA
E-mail address: terri.monk@duke.edu

Lawrence T. Goodnough, MD
Department of Pathology
Stanford University School of Medicine
300 Pasteur Drive, H-1402
Stanford, CA 94305-5626, USA
E-mail address: ltgoodno@stanford.edu

Reference

- [1] Starr D. Blood: an epic history of medicine and commerce. New York: Perennial; 2002.