

A Message from Dr. Allen



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As a hematologist/oncologist, I understand the importance of having a safe and adequate blood supply. Every day blood is required to save the lives of accident victims, patients with cancer and other diseases, as well as those undergoing routine surgeries. None of us know when ourselves, or someone we know, might be the next one needing a blood transfusion.

In this country an estimated 34,000 units of red cells are transfused each day. This does not include patients receiving platelets or other blood components. Fortunately, about eight million Americans donate blood each year. Sadly, this represents only 3-5% of the otherwise healthy adults who are eligible to give blood. At times our blood is in such short supply that we have only a day's worth on hand. Sometimes, for this reason, elective surgeries have been canceled.

As the demand for blood increases more donors are needed. This is the reason Comprehensive Cancer Centers of Nevada sponsors a blood drive and we challenge other physician offices to do the same thing. Please join us for our annual drive on February 15, 2003. Call Gabriele at 952-3350 ext. 6356 for further information. Even those who are not eligible to give blood can help in this cause. Please consider financially supporting United Blood Services, our local not-for-profit blood bank. Money is used to support research in transfusion medicine, purchase bloodmobiles and build additional donation centers that are desperately needed as our city continues to grow and spread out.

Giving blood is truly the gift of life. Blood donors understand this civic duty and we are grateful to all of them for their compassion and community service.

On a related note, some news from ASH is generating excitement. The 44th annual meeting of the American Society of Hematology was held in December 2002. A study was presented by Italian researchers about a new type of iron chelation therapy that can be taken orally. The compound, which is still in clinical trials, was found to be well tolerated by patients and as effective as standard treatment with deferoxamine (Desferal) that requires long intravenous infusions.

Patients with chronic forms of severe anemia often receive multiple blood transfusions. Over time, they subsequently experience iron overload. The excess build-up of iron in tissues damages cells and organs and ultimately leads to heart disease, liver disease, diabetes and other conditions that can lead to death.

We do not possess any natural mechanisms to remove excess iron from our bodies and, therefore, must rely on iron chelating agents to do so. Dr. Antonio Pidu from Turin University reported that after nine months of study, patients taking the compound called ICL670 had almost twice the decrease of iron in the liver compared to those getting deferoxamine. The only side effects noted were mild gastrointestinal complaints, such as nausea, in some patients. The result will be published soon in "Blood."