

Literature Briefs

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Literature Briefs were submitted by Drs. R. Boettner, D. R. Buechel, R. B. Clark, J. J. Downes, D. Duncalf, M. I. Gold, F. C. McPartland, D. H. Morrow, J. W. Pender, L. J. Saidman, P. H. Sechzer, A. D. Sessler, M. Soetens and C. J. Wilkinson. Briefs appearing elsewhere in this issue are part of this column.

Circulation

AABB REFERENCE LABORATORIES

The American Association of Blood Banks has formed a Reference Laboratory Program consisting of three major services: 1) reference laboratories; 2) a rare-donor file; 3) depots of frozen rare-donor blood. The 25 laboratories are located in centers that have a special interest in blood-group immunology. The functions of the Reference Laboratories are: 1) to assist in resolving difficult serologic problems; 2) to help blood banks locate compatible blood; 3) to report rare donors to the AABB Rare Donor File, located at the Michael Reese Research Foundation Blood Center in Chicago; 4) to collect and ship rare types of blood to the depots for frozen storage. In response to a telephone call or a letter, depending on the urgency of the problem, a laboratory gains access to the Rare Donor File. Certain essential information should be available when the Reference Laboratory is contacted, including the patient's diagnosis and hemoglobin level and whether surgical operation is contemplated. Blood banks having access to very rare donors are understandably hesitant to bleed them unless the need for transfusion is clearly evident. Where the clinical situation is not urgent, a specimen of blood from the patient may be requested. This is always done when frozen blood cells are requested because of the possibility that blood, once thawed and prepared, might turn out to be incompatible and unusable. The basic function of the Rare Donor File is to put the inquiring blood bank in touch with another blood bank that has donors of the type needed. To be certain of

preserving a good relationship between the blood bank and its donors, the names and addresses of the rare donors themselves are never released. Most of the time, the Rare Donor File is able to call back with the required information within approximately 30 minutes. More than 4,000 donors are registered, including representatives of almost every one of the known, extremely rare phenotypes. One or two calls are received each week. To remain effective, the program needs continuing support, in the form of increasing referrals of rare donors. The depots of frozen rare blood, part of the AABB program, were organized in 1960 with the cooperation of the Blood Research Laboratory, Chelsea Naval Hospital. With more practical techniques for freezing of erythrocytes and processing of frozen cells for transfusion, an increasing number of other blood banks are now able to function as depots for frozen rare blood. "Rare Donors Need Rare Friends" is the phrase coined by Dr. Tibor J. Greenwalt for the rare-donor identification program. The goal of the AABB program is to make certain there will always be an ample supply of rare blood available for people who need it. (Grove-Rasmussen, M., and Huestis, D. W.: *The Reference Laboratories Program of the American Association of Blood Banks, Transfusion* 9: 336 (Nov.) 1969.)

PHENTOLAMINE (Regitine) abolished or significantly decreased the frequency of ventricular extrasystoles in 25 cardiac patients whether or not the arrhythmias were related to administration of digitalis. It was not effective, however, in treating other arrhythmias, such as A-V blocks, atrial flutter, fibrillation and tachycardia. Potent beta-adrenergic stimulation was evidenced by increased myocardial force, an increase in left ventricular dp/dt, a decrease in left ventricular end-diastolic pressure and volume, and marked clinical improvement in patients with congestive heart failure. Experimental work in rats suggests that this