



“The AABB (formerly, the American Association of Blood Banks) developed this guideline on appropriate use of platelet transfusion in adult patients” Kaufman et al (2015).

Reference:

Kaufman, R.M., , Djulbegovic, B., Gernsheimer, T., Kleinman, S., Tinmouth, A.T., Capocelli, K.E., Cipolle, M.D., Cohn, C.S., Fung, M.K., Grossman, B.J., Mintz, P.D., O’Malley, B.A., Sesok-Pizzini, D.A., Shander, A., Stack, G.E., Webert, K.E., Weinstein, R., Welch, B.G., Whitman, G.J., Wong, E.C. and Tobian, A.A.R. (2015) Platelet Transfusion: A Clinical Practice Guideline From the AABB. *Annals of Internal Medicine*. 162(3), p.205-213.

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Abstract:

Background: The AABB (formerly, the American Association of Blood Banks) developed this guideline on appropriate use of platelet transfusion in adult patients.

Methods: These guidelines are based on a systematic review of randomized, clinical trials and observational studies (1900 to September 2014) that reported clinical outcomes on patients receiving prophylactic or therapeutic platelet transfusions. An expert panel reviewed the data

and developed recommendations using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) framework.

Recommendation 1: The AABB recommends that platelets should be transfused prophylactically to reduce the risk for spontaneous bleeding in hospitalized adult patients with therapy-induced hypoproliferative thrombocytopenia. The AABB recommends transfusing hospitalized adult patients with a platelet count of 10×10^9 cells/L or less to reduce the risk for spontaneous bleeding. The AABB recommends transfusing up to a single apheresis unit or equivalent. Greater doses are not more effective, and lower doses equal to one half of a standard apheresis unit are equally effective. (Grade: strong recommendation; moderate-quality evidence)

Recommendation 2: The AABB suggests prophylactic platelet transfusion for patients having elective central venous catheter placement with a platelet count less than 20×10^9 cells/L. (Grade: weak recommendation; low-quality evidence)

Recommendation 3: The AABB suggests prophylactic platelet transfusion for patients having elective diagnostic lumbar puncture with a platelet count less than 50×10^9 cells/L. (Grade: weak recommendation; very-low-quality evidence)

Recommendation 4: The AABB suggests prophylactic platelet transfusion for patients having major elective nonneuraxial surgery with a platelet count less than 50×10^9 cells/L. (Grade: weak recommendation; very-low-quality evidence)

Recommendation 5: The AABB recommends against routine prophylactic platelet transfusion for patients who are nonthrombocytopenic and have cardiac surgery with cardiopulmonary bypass. The AABB suggests platelet transfusion for patients having bypass who exhibit perioperative bleeding with thrombocytopenia and/or evidence of platelet dysfunction. (Grade: weak recommendation; very-low-quality evidence)

Recommendation 6: The AABB cannot recommend for or against platelet transfusion for patients receiving antiplatelet therapy who have intracranial hemorrhage (traumatic or spontaneous). (Grade: uncertain recommendation; very-low-quality evidence).

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