



**NAC ENDORSEMENT WITH CAVEATS: RED BLOOD CELL TRANSFUSION: 2023 AABB
INTERNATIONAL GUIDELINES**



ENDORSEMENT SUBCOMMITTEE

Endorsement Subcommittee Members:	Andrew Shih, MD; Subcommittee Chair Jennifer Fesser, MD Charles Musuka, MD Kathryn Webert, MD
NAC Chair:	Andrew Shih, MD
Provincial Ministry Representative:	Katherine Logan (BC)
NAC Coordinator:	Kendra Stuart
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Red Blood Cell transfusion is a common treatment for patients with anemia, which is potentially lifesaving but also needs to be balanced against harms (both infectious and non-infectious). While there was once clinical equipoise whether to broadly transfuse anemic patients to a restrictive (70-80 g/L) versus a liberal (90-100 g/L) strategy, randomized controlled trials show equal or better outcomes with restrictive transfusion strategies in a variety of patient populations. The Association for the Advancement of Blood & Biotherapies (AABB) published their revised Red Blood Cell Transfusion: 2023 AABB International Guidelines.

Three transfusion medicine experts from the National Advisory Committee on Blood and Blood Products (NAC) independently utilized the AGREEII (Appraisal of Guidelines for Research and Evaluation) tool to assess the methodological rigour and quality in which the guideline was developed, in accordance with the process detailed in the [NAC Guideline Endorsement Framework](#). The guideline achieved scores deemed acceptable by NAC membership, achieving at least 50% in all Domains and a minimum score of 70% in the Domain of Rigour of Development (Domain 3).

The NAC endorses the AABB International Guidelines for evidence-based practice with caveats. The reviewers note the application of the evidence may be potentially broad in several categories. There is a risk that evidence accrued in frail, elderly orthopedic patients is applied to younger patients. Small patient numbers studied in the hematology and oncology evidence-base may not reflect a larger population. There are ongoing trials in some patient populations (such as active myocardial ischemia, vascular surgery, neurology) which may confer new information and the AABB paper did not provide guidance on updating its position. The AGREEII tool identified opportunities for improvement in a future update: broader panel representation (public/patient members, other front-line clinicians), tools for implementation and auditing, explicit external review, and acknowledgement of alternatives to transfusion.

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PubMed Link: <https://pubmed.ncbi.nlm.nih.gov/37824153/>