

# Life Link

A link between donors, volunteers, staff & friends of the Stanford Blood Center



Dr. Susan Galel, M.D.

## Protecting the Blood Supply from West Nile Virus

### A Message from the Associate Medical Director

By Susan A. Galel, MD

West Nile Virus is a virus that can infect humans, birds, mosquitoes, horses and some other mammals. It was first found in the United States in 1999, although it was known to be in other parts of the world before that time. The primary way in which people acquire this infection is through the bite of a mosquito infected with West Nile virus.

Most people who are infected with the West Nile virus will not develop any type of illness. They will clear the infection without knowing that they had it. It is thought that about 20 percent of infected people develop "West Nile fever" which consists of mild symptoms, including fever, headache, and body aches. These symptoms will resolve spontaneously. A severe form of disease occurs in approxi-

"Most people who are infected with the West Nile virus will not develop any type of illness. They will clear the infection without knowing that they had it."

mately one in 150 infected persons. The symptoms of this severe form of the disease ("West Nile encephalitis or meningitis") include headache, high fever, neck stiffness, stupor, disorientation, coma, tremors, convulsions, muscle weakness, and paralysis. Persons above age 50 appear to be at increased risk of severe disease, and it is reasonable to assume that immunodeficient or immunosuppressed patients are also at increased risk. People with the severe form of the disease can die, although most recover.

The vast majority of people in the U.S. who have been diagnosed with West Nile Virus most likely acquired their infections from mosquito bites. So far, the U.S. Centers for Disease Control (CDC) has investigated 33 cases in which West Nile Virus disease appeared in people who had

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## Stanford Blood Center Launches Campaign to Bolster Blood Supply

The Stanford Blood Center has launched a campaign to encourage donations during the holiday period when the need for blood often increases and supplies diminish. In the campaign, new flags showing Lucile Packard Children's Hospital patient Xitlali Alvarez line El Camino Real between Sand Hill Road and Page Mill Road. The flags, which also line Welch Road where the Blood Center is located, read, "Save a life - Donate blood!"

Known simply as Lali by her nurses, the 3-year-old leukemia patient requires numerous units of blood during her chemotherapy treatments at the medical center. Lali's parents understand firsthand



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# News & Events

## Around the Hemo Globe



### They Love Me, They Love Me Not

By Mike Sage, Telerecruitment Supervisor

Have you ever wondered why some of our donors are constantly pestered by the Telerecruitment staff and why others feel left out because we haven't called? While it's true that some of our donors and Telerecruiters are on a first name basis, a large number of donors often feel unwanted when we go several months or longer without calling. Before those of you who fit into the latter group think that the honeymoon is over before it has even started, please know that you are every bit as important and valuable to us as those whom our Center courts on a regular basis.

In the last issue of Life Link, I mentioned how difficult it is to manage a blood center's inventory. It can't be done without constant communication and interaction among the staff at the Blood Center as well as the Transfusion Service Departments of the Hospitals we serve. The most important daily issues we have to deal with are: what do we need, what blood types and how many, do they need to be Rh negative or positive, CMV negative, Human Leukocyte Antigen (HLA) matched, etc. We don't want to call you if we don't

need you. I don't know of too many people who gleefully head on down to the local Blood Center to get asked a bunch of personal questions and then get stuck with a big needle. Most people donate because they either have a sense of community responsibility or because...you guessed it, they were ASKED to. The last thing we want to happen is for you to waste your time or more importantly, your precious blood, when we or our hospitals don't have the immediate need.

So if you happen to be in the group that already knows my staff as well as I do, we thank you for your continued patience and understanding. To this point we've needed you a little more. For those of you who want us to call you more, I'll leave you with a Robert De Niro line in the movie "Men of Honor"; "Be careful for what you wish for." We will need you, and when we do, we'll give you a ring. Thanks to you all for letting us help you save lives!



### National Marrow Donor Program

WINTER 2003 UPDATE

By Diane Hill, Marrow Donor Coordinator

Stanford Medical School Blood Center is one of the original participating Donor Centers in the National

Marrow Donor Program (NMDP) network. We signed on in early 1987 with 19 other Donor Centers and eight Transplant Centers. At that time, only our platelet Apheresis donors were invited to join the registry because they were the only donors who had already been HLA typed. The HLA (Human Leukocyte Antigen) typing we use to match platelets for patients is the same test required for registration in the NMDP. We've come a very long way in 15 years. There are now almost 100 Donor Centers serving approximately five million volunteer donors and patients at 112 Transplant Centers in the US, and 36 Centers around the globe. SMSBC has proudly provided blood stem cells 95 times since our first matched donor gave marrow in 1989.

September 11, 2001 challenged our entire network. While the world's attention was focused on the terrorist attacks, stem cells were being collected and couriers were in the air or standing by to deliver precious cells to waiting patients around the globe. NMDP's CEO Dr. Jeff Chell wrote about that day in a memo to the network on the anniversary of the 9/11 attacks. We would like to share that inspiring memo with you, our donors, the people who make it all happen.

*This week, as we reflect on September 11, 2001, I would like to recognize the outstanding effort the NMDP staff and Network made in the difficult aftermath of the tragedy. Every day, we face challenges as we do our part to save patients' lives. Last September, many of you went beyond*

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recently received blood transfusions. Although it has not been proven that the transfusion recipients acquired the infection from the donated blood, this appears likely.

It appears that the virus is present for only a few days, early in the infection, prior to the development of symptoms and prior to the development of antibodies. Unfortunately, there is no question that can be used to identify if blood donors are carrying the infection. Since it appears that the virus circulates in a person's blood before symptoms develop, asking donors about symptoms is unlikely to be helpful. Refusal to accept blood donations from individuals with a history of mosquito bites would result in a severe blood shortage that would probably cause more harm than good.

The only test that might be used to identify the virus in circulating blood is an investigational test. At the present time, this test is available only in public health service laboratories in a research format that can be used to test only a few samples at a time. There is no test available that can be used to screen the thousands of blood donations made every day. The CDC and Food and Drug Administration (FDA) are working with the manufacturers of blood bank testing systems to determine whether/how soon a test might be developed that could be used for screening donated blood. The goal is to have an investigational test available for trials by summer 2003.

The FDA has recently recommended that blood centers ask donors to report febrile flu-like illnesses that occur within two weeks following a blood donation. Blood centers have been instructed to quarantine all blood products donated within two weeks prior to the onset of illnesses suggestive of West Nile infection and to defer donors for at least two weeks after resolution of symptoms. In addition, every patient with a suspected or confirmed diagnosis of West Nile meningitis, encephalitis, or neurologic disease should be questioned with regard to whether they donated blood or received blood within the four weeks prior to the onset of symptoms. All cases involving blood donation or transfusion should be reported to the supplying blood center, so that potentially infectious units can be removed from the blood supply, pending further testing by a public health service laboratory.

We have always asked donors to notify us if they develop any illness within 24 hours of donation. Because of concern about West Nile, we are now asking donors to also notify us if they develop a fever of 100.5°F or greater within two weeks after donation. We will quarantine products based on our evaluation of the donor's symptoms as well as whether the donor has traveled to an area where there is active West Nile virus activity.

The FDA has advised us that we may permit someone to donate 14 days after they are recovered and well or 28 days from the onset of the illness, whichever time period is longer.

A Stanford blood donor or recipient with a suspected or confirmed West Nile Virus infection should immediately contact the resource nurse for the Stanford Blood Center at (650) 725-9968 (weekdays) or (650) 723-6445 (after hours).

For more information and links to FDA and CDC information, visit our web site at <http://bloodcenter.stanford.edu> and click the red "What's New?" button.



### O Party Boosts Summer Inventory

Our O Party on Thursday, August 15, produced 221 units! Thanks to all who came out to join in the fun, and to all of our dedicated donors, no matter their blood type or when they donate. KFRC Oldies 99.7 FM promoted the event and let donors spin the prize wheel and enter a raffle for Oakland A's tickets. Sponsors offered "O" goodies and prizes, and each donor received a special party T-shirt as a thank you. We plan on holding this event again in August 2003!





# News & Events

## S I N G L E S Scare Up Fun for Halloween

Donors spent Wednesday, October 30, with real vampires by attending our Singles Night blood drive. There were games, a contest, a raffle, and prizes to be won. Local band Box of Rox kept things spooky with their set of Halloween tunes, a Ghostbusters sing-along being the highlight. We huddled around the fire to keep warm and toast marshmallows for s'mores, and got tarot card readings if we dared. The next Singles Night event will be a Mardi Gras party on Wednesday, March 5.

Don't miss out on the next fun event! To get a monthly e-mail update, send your e-mail address to [czks@stanford.edu](mailto:czks@stanford.edu) with SUBSCRIBE in the subject.



### STANFORD BLOOD CENTER LAUNCHES CAMPAIGN TO BOLSTER BLOOD SUPPLY CONT. FROM FRONT COVER

the gift of blood donation. "There's really no way we can express in words what it's meant to us," said her father, Robert Alvarez.

"Our hope is to show people one of the many patients they help when they donate blood," said Michele Gassaway, spokesperson for the blood center. "We constantly struggle to get enough blood donors to meet the demands of the hospitals we serve. Lali is alive today because people took the time to donate blood."

Gassaway explained that during the holidays, family activities and planning often stand in the way of

making donations. "We understand that people are busy but hospital patients like Lali continue to need blood," she said.

The Stanford Blood Center faces the new challenge of supplying blood to the Veterans Affairs Palo Alto Health Care System in addition to Packard Children's Hospital, Stanford Hospital & Clinics, Palo Alto Medical Foundation, El Camino Hospital and O'Connor Hospital in San Jose. To meet demand, the Blood Center hopes to increase collection by 20 percent in the coming year.

Donors are urged to call (650) 723-7831 or toll-free (888) 723-7831

to make an appointment, learn hours of operation and get directions. Donors should be in good health with no cold or flu symptoms. They must eat well prior to donation, drink fluids and present photo identification at the time of donation. The process takes about an hour, and a single donation can help up to three different patients in need of blood.

For more information or to schedule an appointment online, please visit <http://bloodcenter.stanford.edu>.

your usual efforts. I'll always remember how we came together as a Network during that harrowing time.

Our nation suffered a tremendous loss last September. In the face of the worst tragedy in American history, we were determined not to let this act of terror contribute to additional loss of life. Here are a few examples of efforts we made:

- The NMDP Search Coordinating Unit made extraordinary efforts, working long hours to cover all Transplant Centers with planned collections and coordinate communication and rescheduling.
- When access to Manhattan was closed following the attacks, an NMDP Donor Center, a Collection Center and a determined donor worked together with assistance from state troopers to get the donor into Manhattan for her marrow collection. The donor and her family spent more than six hours navigating roadblocks to reach the hospital, and Donor Center staff stayed at the Center all night to maintain contact with everyone involved.
- Two NMDP Donor Center coordinators drove cross country 23 hours, covering 1,200 miles and five states to deliver donated PBSC.
- When U.S. air space was closed, one courier from the NMDP

Coordinating Center was in the air carrying stem cells from Europe when her plane was turned around. With extra efforts from two German Centers, the delayed cells were cryopreserved at a European hospital. She and two other couriers from the Coordinating Center worked closely with the NMDP to be in place for their chartered flight back to the United States.

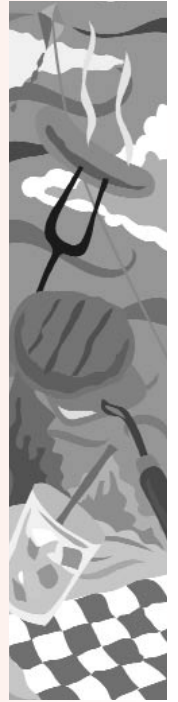
- The Marrow Foundation and the NMDP Coordinating Center scrambled to transport stem cells between the United States and Europe when U.S. air space closed. The Marrow Foundation established Operation LifeGift, an emergency fund to support the private jet that the NMDP chartered with special lifeguard status from the FAA to transport the couriers and stem cells.
- One NMDP Donor Center rescheduled two marrow collections for international patients four times in three days. To transport a PBSC collection to a U.S. patient, they drove it in relay across state lines.
- NMDP staff organized a used book sale that raised over \$1,700 for Operation LifeGift. Many of you met similar challenges.

This one-year anniversary is a good time to remember the extraordinary efforts we made and the cooperation we achieved. About 30 patients were

### Singles Night BBQ

on Wednesday, May 21, 800 Welch Road from 4:30 - 7:30. Live music and tons of fun in the sun!

To make an appointment for any of these blood drive events, call 1-888-723-7831.



scheduled for transplants during the 9/11 period of air travel shutdown and though some patients faced short delays, all received their stem cells in time for transplantation. On behalf of all the patients who were depending on you last September and who depend on you every day, thank you for your dedication.

### Another Way to Save A Life...

Contact Stanford Blood Center's Marrow Donor Coordinator, Diane Hill, and make an appointment to donate blood and request that it be screened for the National Marrow Donor Program (NMDP) Registry. Call (650) 723-5532 or send an email to Diane.Hill@Stanford.edu. For more information about the Marrow Donor Program, log on to the Stanford Blood Center web site, then click the red Donate button on the left side of your screen. This will reveal the gray Marrow button. Click and you're there.

### Mardi Gras Singles Night Blood Drive

at 800 Welch Road on Wednesday, March 5 from 4:30 - 7:30. Fun, games, beads, prizes, food. Fat Tuesday on a Wednesday!

To make an appointment for any of these blood drive events, call 1-888-723-7831.





# Golden Donor Celebration

On Saturday, September 14, we held a picnic at Frost Amphitheater for our Golden Donors. People who have donated 100 times or more are honored at this annual event. We enjoyed live music, good food, balloon twisting, and interesting speakers, including donor Matt McCarty, Dr. Susan Galel, and patient Jeannie Callan Smith. The next Golden Donor Celebration will be in October 2003.



### A Moment In History

**1972** Apheresis is used to extract one cellular component, returning the rest of the blood to the donor.

(SOURCE: AMERICAN ASSOCIATION OF BLOOD BANKS/[WWW.AABB.ORG](http://WWW.AABB.ORG))





# Jackie Lights the Room

By Renee Burrull, Stanford Student with the Community Service Writing Program

Have you ever walked into a medical office, feeling kind of nervous and then looked up at the registrar just in time to be comforted by a warm, loving smile? If you have, then you've donated blood at the Stanford Blood Center's Apheresis Center.

For the last ten years, Mrs. Jackie Light has been the woman responsible for the generous smile and welcome donors receive every time they enter the Blood Center. Jackie was born an only child to Jack and Clara Jenson in San Francisco, California, where she stayed and eventually married her high school sweetheart, Mr. Wally Light. Together, they have three children: Wally, who lives in California, Linda, who lives in Colorado, and Pam, who lives in Nebraska. They are now the proud grandparents of five grandchildren and five great-grandchildren. She loves reading mysteries, cooking and eating, and listening to

music. Jackie and her husband own an English bulldog named Rob Roy, and enjoy traveling to the east coast during the fall.

According to Jackie, donors are her first priority. She tries to make them comfortable and enjoys meeting them individual-



ly and becoming friends with them. One highlight of her job and something she finds extremely special is the personal level on which she interacts with the donors. Another advantage of her job is watching children and families grow, both through conversation and photos. She also enjoys witnessing the dedication of the donors. Jackie comments that donors "give so generously of themselves" and "are very special to me."

Both donors and staff agree that Jackie has made a difference in the Center's atmosphere. "This place is just not the same when she's not around," comments Vera Chan, an RN at the Center. "[She's] one of the nicest receptionists we could ever have. A lot of donors come in because they want to see Jackie."

According to other staff members, Jackie always makes donors feel welcome and is always friendly, helpful, and of course keeps the candy dish full.

The Stanford Blood Apheresis Center is truly blessed to have Jackie Light as a part of the staff. Jackie, on the other hand, firmly believes that "They're not the lucky ones, I am to have this job...I'm really, really fortunate."

Donor Eve Laraway could not have summed it up better: "We love Jackie!"



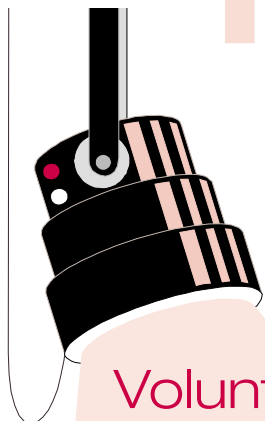
## Quotes that Count

*"We ought to think that we are one of the leaves of a tree, and the tree is all humanity. We cannot live without the others, without the tree."*

—PABLO CASALS



# People



## Volunteer Spotlight: Betty Seckler –

### A Volunteer of All Trades

By Tessa Moore, Volunteer Services Manager

“So you want to write about the oldest living volunteer at the Blood Center,” said Betty Seckler, with the typical humor in her tone and twinkle in her eye, in response to my request to write this article. “No,” I replied, “I want to write about the volunteer who’s been here the most years, not necessarily the same thing.”

Betty has been volunteering at the Blood Center since May 1984. She had just moved from Los Angeles where she had been volunteering at UCLA Blood Center, and so felt familiar with the setting. In LA, she had been donating, as her father had just had heart surgery. She said the draw took so long by the time she left she had a ticket on her car – so she made a deal with UCLA Blood center, “If you pay my ticket, I’ll volunteer for you.” And so a blood center volunteer career began.

Needless to say Betty has seen many, many changes here over the years, and has volunteered throughout the center in many different capacities. Her memories include lunch time exercise classes in what’s now the Components Lab, and the Blood Center Saturday evening get-togethers at her house before her furniture arrived, as there was plenty of space!

One of her first tasks was organizing the medical histories numerically, from alphabetically, to go into storage. She spent over a year (with some time out for good behavior) doing this in what she calls “the vault.” There’s been so much remodeling and moving of depart-

ments that, despite a 15 minute conversation, she and SMSBC employee Deo can’t remember exactly where this room was – just that it was very dark and you had to sit on the floor to do this project! For a long time, Betty wouldn’t let anyone else do any filing in “the vault” so she could be sure everything was in the correct place.

Betty also tells of when she first started working here in the canteen. At that time, we only offered the donors cookies to eat, and she would entertain both herself and the donors by guessing what their blood type was, depending on the type of cookie they ate first. Rumor has it she was always right! Betty still occasionally helps out in the canteen, but the cookies have changed and apparently we no longer have a “B” cookie!

During her years here, Betty has spent 3,300 hours volunteering in the donor room, at the label table, at mobiles, in the Components Lab and has worked on special projects. The last eight years have found her in the Histocompatibility Lab where she helped reorganize the filing system, and now files “at least a four inch pile” each week. “It is a pleasure to work with Betty,” says Julie Engstrom from the Histo Lab. “She is very funny, and when she comes to our lab she has a spring to her step. If she is gone for a week, I really miss her.”

Betty says her joy in life is to “sing, dance, and shred.” She loves to write new words to show (and other) tunes. This started when she was in clothing sales and used to do it for the fashion shows. It then expanded to her bowling league and family parties. At the Blood Center, she has sung to a retiring supervisor, the volunteers and the Golden Donors. If you’re lucky, you’ve heard some of her songs.

Betty brings a smile to many a face as she goes about her work at the Center. Thank you, Betty, for all you do – we appreciate it!





### Q&A with Michele Gassaway, Apheresis Donor

Number of donations at SMSBC: 10

Michele is the Community and Media Relations Coordinator at the Blood Center. Her duties include producing newsletters, press releases, advertising and public awareness campaigns.

#### When did you start donating blood? And, why?

I started donating in college. A local blood center would bring their blood mobile on campus every few months. I started donating because it seemed like the right thing to do. It was a really simple way to help others.

#### Why did you pick Stanford as a place to donate?

I was hired in June 2000. It's easy to walk down the hall to the donor room! I usually ask telerecruitment to put me on their standby list. That way, if they get a last-minute cancellation, it's easy for them to fill the appointment slot.

#### What got you interested in apheresis donation?

I had never heard of apheresis donations before I started working at the Blood Center. When I heard about automated collection, it seemed like the next step. It's a much more efficient way of collecting blood and it helps more patients. Also, I'm bor-

derline anemic and this way I get to keep my red blood cells, allowing me to donate on a regular basis.

#### What makes you want to continue to donate?

I love knowing that I'm helping others. The great part of my job is that I get to work with the hospitals and patients to tell their stories. This fall, I had the chance to work with a 3-year-old leukemia patient that used a lot of blood products. We're using her story to encourage people to donate. When I spoke with her parents and saw how grateful they were that their daughter was able to get the transfusions she needed, I knew that I loved working at a blood center and was proud to be a donor.

#### What's your favorite part about being a blood donor?

I know that I'm helping others when they need it the most. People receive transfusions to keep them alive. It's such a wonderful and easy gift to give someone. Someday, I, or someone I love, may need a transfusion and I want the blood to be there.

#### What's your favorite movie to watch while you donate?

I love comedies, especially romantic comedies. I also can't help but laugh out loud when something funny happens. So, I giggle ridiculously with my headphones on. I'm usually not a huge Arnold Schwarzenegger fan but I could watch "True Lies" a million times.

#### Do you have a fun anecdote or story that you'd like to share?

My great uncle has been in the hos-

pital for the last three months fighting a post-operative infection. He's received more than eight units of red blood cells so far. He is a multiple gallon donor and is a great example to me. It makes me passionate about my job and being a donor when it hits so close to home.



### The Six Pack Club

By Zach Katagiri, Stanford Student with the Community Service Writing Program

The Six Pack Club is made up of donors who give six apheresis donations between January and December of a given year. Although this club has been loosely in place for the past few years, often referred to as the "six timer's club," it hasn't had its official name, "The Six Pack Club," until just recently. This name was chosen as part of a contest held last summer.

The term "apheresis" means separation of a part from its whole. In terms of blood, apheresis is the process of separating specific parts from whole blood. For example, the two most common uses of apheresis are for the separation of plasma (plasmapheresis), and the separation of platelets (plateletapheresis). There



## A Moment In History

**1914** Long-term anticoagulants, among them sodium citrate, are developed, allowing longer preservation of blood.

(SOURCE: AMERICAN ASSOCIATION OF BLOOD BANKS/WWW.AABB.ORG)

are also procedures that will separate other components such as white blood cells (leukopheresis) or red blood cells (erythrocytapheresis). Normally, 6 to 10 units of whole blood are needed in order to extract enough platelets to make up a therapeutic dose of medical value. With apheresis enough platelets for a transfusion can be given by a single donor. Since blood needs to be compatible in terms of both type (A, B, AB, O) and Rh factor (positive or negative), by not having to combine 6 to 10 units of whole blood, it is easier to match up donors' blood to patients.

For the past few years, frequent apheresis donors have been given T-shirts, but last year, for a little variety, specially embroidered baseball hats were given. This year, donors chose a travel mug as their gift from three choices. At the end of each year, items such as key chains, shirts, hats, mugs, bags, pins and other such items will be considered.

Since platelet donations only take one component of your blood, it is possible to donate platelets up to 24 times a year. Most platelet donors choose to give about once a month, but this frequency is completely up to each donor. The Golden Donor program is set up for people who are able to donate frequently. People who make 100 donations (these can be any combination of apheresis and/or whole blood donations) over any time period are considered to be Golden Donors. Golden Donors receive a special T-shirt at this milestone and also when they reach 200 donations. At 300 donations, (we have eight donors who have reached

this mark!) one becomes a Platinum Donor. Both the Golden Donor Program and The Six Pack Club are Stanford Blood Center's way of showing its appreciation to donors who make a commitment to helping others.

*Thompson, Susan L. Apheresis Technologies, Incorporated. "Frequently Asked Questions." (1997) <<http://www.apheresis.com/>> (May 13, 2002).*

### Aspirin & Platelets – Why We Care

**By Patricia Stayner, RN, Director of Donor Services**

Ubiquitous and innocuous (for most), plain old common aspirin has a devastating effect on platelet function. Each time you come to donate you answer the question, "In the past 36 hours, have you taken aspirin or anything that has aspirin in it?" If you answer "yes," the Food and Drug Administration (FDA) and American Association of Blood Banks (AABB) won't allow us to collect your platelets by apheresis, or separate platelets from your whole blood donation.

All platelets exposed to aspirin are irreversibly disabled: they aren't "sticky" and can't perform the clumping and clotting functions that are their normal role in the body. That's why many of us now take one low-dose aspirin tablet each day. If we experienced blockage in one of our coronary arteries, sticky platelets

could pile up on and behind the blockage, increasing the chance of a heart attack. About 36 hours after a dose of aspirin a small proportion of newly produced, non-aspirinated platelets can correct platelet function.

Donors taking anti-inflammatory medications such as ibuprofen or naproxen are acceptable as platelet donors. The platelet dysfunction caused by non-steroidal anti-inflammatory drugs other than aspirin is reversed as soon as the platelets are removed from the drug-containing environment (the donor). The platelets function normally when transferred to a drug-free environment.

Stanford Blood Center has a list of medications that contain aspirin, so if you're not sure if what you've taken has aspirin in it, call ahead. You can also find a list of aspirin containing drugs on the National Reyes Syndrome and Armed Services Blood Program websites at <http://www.reyessyndrome.org/aspirin2.htm#Non> and [http://www.tricare.osd.mil/asbpo/asb\\_aspi.html](http://www.tricare.osd.mil/asbpo/asb_aspi.html) respectively. No list is fully complete, so we depend on you to be aware of all medications you're taking. Thank you for saving lives by donating blood, or blood components by automated collection.





## Dr. Meriem Merad

**By Charles Kou, Stanford Student with the Community Service Writing Program**

The Stanford Medical School Blood Center was established within the Department of Pathology at Stanford University Medical School in 1978. One of the unique features of the Blood Center is its integration of research programs.

Dr. Meriem Merad completed hematology and oncology clinical training, and received her Doctor of Medicine degree in Paris. She is one of many Stanford Blood Center researchers who have contributed to the betterment of patients' lives through persistence and talent.

Dr. Merad joined the Stanford Blood Center three years ago, and she has recently completed her research and study on the life cycle of the dendritic cell, which is an essential component of the immune system. Through this research, she has studied the dendritic cell's creation in the bone marrow, its functionality, and its pathways.

She has also developed a technique that could revolutionize the field of immunology. Dr. Merad developed an active-immunization method that can manipulate a patient's dendritic cells to target cancer cells. For the past ten years, active-immunization with dendritic cells has required removal of the cells outside the body, in-vitro. The immunization process took place in the lab, then the resulting product was injected back into the patient. It has been expensive, impractical and

unfit for the mass treatment of cancer patients seeking alternatives to chemotherapy. If Dr. Merad's method, which has been demonstrated with mice, is successful, it

will greatly benefit cancer patients' lives.

Three main steps are involved in Dr. Merad's new method. First, a bone marrow growth factor is administered to stimulate production of many dendritic cells, which normally comprise less than one percent of all white blood cells. Secondly, antigen from a tumor, which triggers immune response, is introduced to the patient in a manner that assures that it will interact with dendritic cells. The second step is controversial, for doctors and researchers are debating whether introducing many different types of antigens found in specific cancer cell is more effective than introducing only a single common antigen relevant to the specific cancer cells.

In general, different types of antigens are required for the treatment of different types of cancer. For example, the antigen for breast cancer cannot be used for the treatment of lung cancer, and vice versa. Lastly, a substance is injected that specifically activates the antigen "loaded" dendritic cells enabling them to travel to the lymph nodes, which causes T-cells to attack the cancerous cells. These steps are accomplished within the patient's body. Therefore, her method makes it unnecessary for active-immunization to occur in-vitro.

Dr. Ed Engleman, Medical Director of the Stanford Blood Center, said Dr. Merad's persistence, diligence, and sense of curiosity has made her a successful researcher and contributor to the field of medicine. Dr. Merad has returned from France after defending her dissertation, and her work has recently been published in the prestigious scientific journal "Blood."

### Quotes that Count

*"You only live once.*

*But if you work*

*it right, once*

*is enough."*

—FRED ALLEN

### A Moment In History

**1840** At St. George's School in London, Samuel Armstrong Lane, aided by consultant Dr. Blundell, performs the first successful whole blood transfusion to treat hemophilia.

(SOURCE: AMERICAN ASSOCIATION OF BLOOD BANKS/WWW.AABB.ORG)





# Donating for Research

**By Brad Sylvester, Mission Medical**

Last winter, the son of a friend of mine was eager for some sunshine, so he left behind the snow and cold of Colorado for a vacation in the Yucatán Peninsula of Mexico. He had a wonderful time – enjoying the spectacular beaches, snorkeling, Mayan ruins, and a few too many margaritas. Soon after returning to the States, the local blood center called to schedule his routine whole blood donation. Arriving at the blood center, he came in for a surprise: the donation was deferred because he had traveled to a region where malaria is endemic.

Travel deferrals are not uncommon among Stanford's donors. In addition to malarial areas, some of you may also have encountered a deferral due to extended stays in the United Kingdom.

Deferrals occur for other reasons too, but one of the benefits of donating at Stanford is that some deferred donors can still give their blood, or platelets, for use in research. Are research donations important? More than most people appreciate! Many of us are motivated to donate by the connection to the

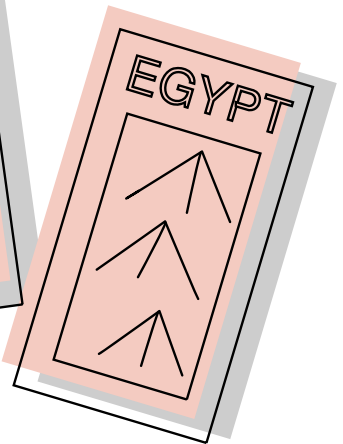
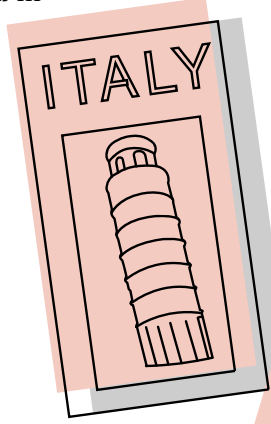
transfusion recipient. I first donated for my nephew who was born with congenital heart defect and at three weeks of age underwent open-heart surgery. Rather than contributing to the health of individual transfusion recipients, donations for

research contribute ultimately to the benefit of many people.

The most apparent benefit of research donations is in helping to advance medical technology. All advances in technology undergo informal testing during development, and formal testing which experts at the Food and Drug Administration review as part of their approval process.

At Stanford a visible example of new technology in action is in the apheresis collection area where two models of advanced apheresis are in use. These systems are more efficient than their predecessors, allowing collection of multiple components from a single donation. One donor can give to several transfusion recipients. These new systems took years to develop during which they were tested with hundreds of units of blood. Where did this blood come from? Research donors.

Less apparent to donors, but very important to transfusion recipients, is the technology found in the diagnostic tests performed on every collection. These tests help ensure that our blood is safe for transfusion. Within the last two years a new technology was put in place for HIV and hepatitis C testing. Although the blood supply is currently the safest it has ever been, this new diagnostic technology was adopted because it is more sensitive than the previous technol-



# Research

## T R A V E L



ogy. Stanford participated in the trials. Research donors were used to develop these diagnostic tests.

Another promising technology under development is the use of

agents that when added to blood will reduce or eradicate most pathogens that could be present. In early tests these agents were shown to be effective

against various types of viruses, bacteria, and parasites. Ultimately, use of such agents may further enhance the safety of our blood supply. Stanford research donors participated in the early trials of one of these agents.



The company I work for is developing new technology to automate the collection of whole blood and to automate the processing of red cells that are frozen for extended storage. Both systems are tested with blood from Stanford research donors – our heartfelt thanks to all of you.

Donors share in the satisfaction of helping others. Most will contribute directly to those in need of transfusions. For some of you who are deferred, and who would like to contribute to the benefit of many through new technology, please consider serving as a Stanford research donor.

Call (650) 724-2997 for more information.

### Quotes that Count

*“It’s easy to make a buck. It’s a lot tougher to make a difference.”*

—TOM BROKAW

### A Moment In History

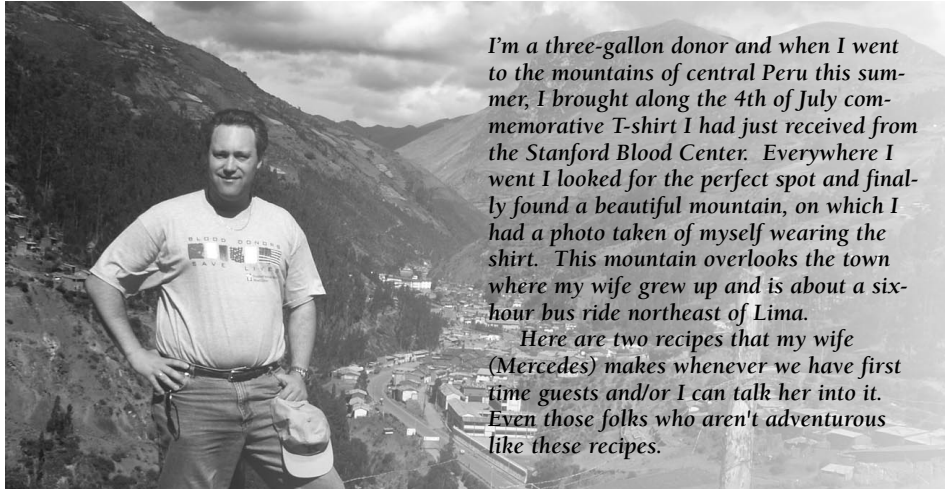
**1950** *In one of the single most influential technical developments in blood banking, Carl Walter and W.P. Murphy, Jr., introduce the plastic bag for blood collection. Replacing breakable glass bottles with durable plastic bags allows for the evolution of a collection system capable of safe and easy preparation of multiple blood components from a single unit of whole blood. Development of the refrigerated centrifuge in 1953 further expedites blood component therapy.*

(SOURCE: AMERICAN ASSOCIATION OF BLOOD BANKS/WWW.AABB.ORG)





## Vampire Bites



*I'm a three-gallon donor and when I went to the mountains of central Peru this summer, I brought along the 4th of July commemorative T-shirt I had just received from the Stanford Blood Center. Everywhere I went I looked for the perfect spot and finally found a beautiful mountain, on which I had a photo taken of myself wearing the shirt. This mountain overlooks the town where my wife grew up and is about a six-hour bus ride northeast of Lima.*

*Here are two recipes that my wife (Mercedes) makes whenever we have first time guests and/or I can talk her into it. Even those folks who aren't adventurous like these recipes.*

RECIPES AND PHOTO COURTESY RAO CANHAM

### Chicken and Rice (Arroz con Pollo) From Peru

#### Ingredients:

- 1 chicken (or about 6 pieces: white or dark, you choose- we like dark.)
- 1/2 cup of oil
- 1 onion, finely chopped
- 3 cloves of chopped garlic
- 1 teaspoon "salsa de aji amarillo" (Yellow Hot Pepper paste - available at Mi Pueblo foods in Mountain View) to taste (How hot do YOU want it??)
- 1/2 cup of ground/crushed cilantro
- 4 cups of rice
- 1/2 cup of peas
- 1/2 large red pepper cut into strips, with the seeds out
- 4 cups of boiling water

#### Preparation:

Clean, dry, cut, salt and pepper and lightly brown the chicken in hot oil. Set aside the chicken and cook until golden brown (in the same oil) the garlic, onion, aji amarillo and the cilantro. Return the meat, and cook until the chicken is done. Take out the meat and keep it hot. Mix in the rice, peas, and red pepper, add the water, check for taste, and cook until the rice is ready. Serve with the hot pieces of chicken.

### Potatoes in the Huancayo style (Papas a la Huancaína) From Peru

#### Ingredients:

- 3 teaspoons salsa de aji amarillo (Yellow Hot Pepper paste/sauce - available at Mi Pueblo foods in Mountain View) to taste (How hot do YOU want it??)
- 2 hard-boiled eggs
- 1 sleeve of Saltine crackers
- 1/4 pound queso fresco ('fresh' cheese) - from a Latin grocery store
- 1/2 cup of milk (add to make not too dry nor too wet)
- 3 drops of lemon juice (to your taste)
- 1 pound of potatoes
- salt to taste
- olives (I leave these off my plate because I don't like olives)
- lettuce leaves

#### Preparation:

In a blender, blend the hard-boiled eggs, crackers, 'fresh' cheese, aji amarillo, milk, and lemon juice until you have a sauce that is medium consistency. Place the peeled and sliced (in circles/disk shape) potatoes in a serving dish, and cover with the sauce. Put the lettuce leaves around the edges and adorn with the olives.

*Makes 6-8 servings.*

## Vampire Vittles



### Sauteed Liver with Fines Herbes

**Recipe courtesy Susan M. Hart**

*Susan Hart is a 10-gallon donor. She wrote, "I thought (this recipe) would be a perfect hemoglobin and iron-booster. Very tasty, too!"*

#### Ingredients:

- 1 pound calves' liver, thinly sliced
- 2 tablespoons flour
- 1 teaspoon Mei Yen seasonings (or 1/2 teaspoon salt)
- 1/8 teaspoon finely ground black pepper
- 1/2 teaspoon salt
- 3 teaspoons butter
- 1/2 teaspoon Fines Herbes (1/4 ts. each: chervil, chives, parsley and tarragon)
- 1/2 cup cream sherry

#### Preparation:

Cut liver into serving-size pieces. Combine flour, Mei Yen pepper and salt. Dip liver in seasoned flour mixture. Melt butter in heavy frying pan. When hot, sauté liver quickly. Sauté only 45 seconds to 1 minute on each side, turning once. Arrange liver on heated platter. Crush Fines Herbes and add to drippings in frying pan; add sherry. Bring to a boil and simmer for 2 to 3 minutes. Pour over liver and serve immediately.

*Makes 4 servings.*



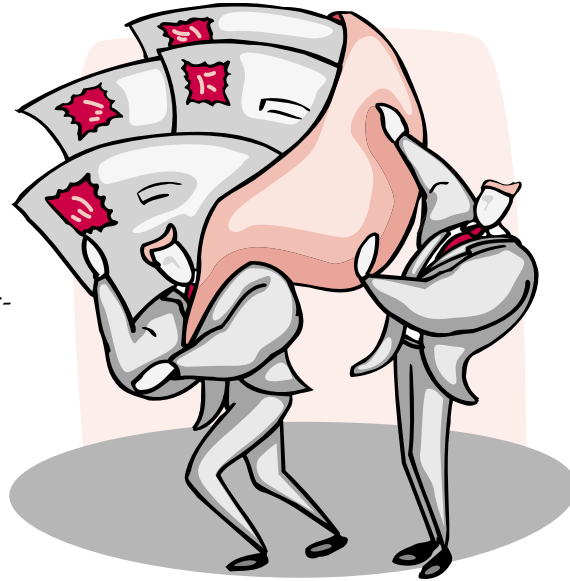
Letters to the editor:

## We Want to Hear From You!

Share your thoughts, feelings and stories about the Stanford Blood Center, or let us know about an experience that you've had with us. Donors, volunteers, staff and friends of the Blood Center are invited to write letters that may be published in our next newsletter. This is a special section in the publication that will give YOU a voice. Did someone treat you with extra care? Do you have a question, comment or maybe just a fun anecdote? Have a picture of yourself in a SMSBC shirt at an exotic location? Please share it with us! Send letters to:

STANFORD BLOOD CENTER  
ATTENTION: NEWSLETTER  
800 WELCH ROAD  
PALO ALTO, CA 94304  
OR EMAIL THEM TO: MGASSAWAY@STANFORD.EDU

PLEASE LIMIT LETTERS TO NO MORE THAN 300 WORDS.  
LETTERS MAY BE EDITED.



Letters to the editor,

Today was my birthday. Some people thought I was crazy to do volunteer work on my birthday. I love my work, the staff, and volunteers at SMSBC.

Shortly after we started to work, the staff came around my desk with a pie and a balloon and sang Happy Birthday. Later, Medical Assistant, Gene made a crown for me, which several staff members helped decorate.

It was great. Everyone was just wonderful. Now, I know why I started to volunteer at Stanford. We have the best staff and volunteers. Staff appreciates both the volunteers and donors very much.

All this happened at a mobile blood drive at Acuson in Mountain View. I am proud to be with such wonderful people.

Sincerely,  
Paula Latusky  
September 19, 2002

## Calling All You Creative Cats...

Are you a great cook, cool cartoonist, or wacky wordsmith? We could use your talents in our next newsletter.

Help donors boost their hemoglobin levels by sending in a healthy recipe that is loaded with iron.

Draw a funny cartoon about the Blood Center.

Put your wit to the test with a poem.

Or come up with your own way to entertain us.

The sky's the limit. Send your fun stuff to:

Stanford Blood Center

Attention: Newsletter

800 Welch Road, Palo Alto, CA 94304

or email them to: mgassaway@stanford.edu



A special thanks to the following people who contributed to the newsletter:

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STANFORD BLOOD CENTER OF  
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515 South Drive, Suite 20  
Mountain View, CA 94040

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(650) 723-7831 OR (888) 723-7831  
RESOURCE NURSE: (650) 725-9968  
ADMINISTRATION: (650) 723-7994  
FAX: (650) 725-4470  
Web site: <http://bloodcenter.stanford.edu>

**Please send Life Link questions & comments to:**

Stanford Blood Center  
Attn: Michele Gassaway  
800 Welch Road  
Palo Alto, CA 94304  
[mgassaway@stanford.edu](mailto:mgassaway@stanford.edu)  
Or call (650) 723-8237

**STANFORD BLOOD CENTER DONOR HOURS**

WHOLE BLOOD DONATIONS –  
Palo Alto Center  
Monday 9:00 am – 5:30 pm  
Tuesday 9:00 am – 5:30 pm  
Wednesday 9:00 am – 5:30 pm  
Thursday Noon – 7:30 pm  
Friday Closed  
Saturday 8:00 am – 12:00pm\*  
(\*open 1st & 3rd Saturday's only)

WHOLE BLOOD DONATIONS –  
Mountain View Center  
Monday 9:00 am – 5:30 pm  
Tuesday Noon – 7:30 pm  
Wednesday 9:00 am – 5:30 pm  
Thursday 9:00 am – 5:30 pm  
Friday 9:00 am – 5:30 pm  
Saturday 8:00 am – 12:00 pm\*  
(\*open every Saturday)

APHERESIS DONATIONS – Palo Alto  
Monday 12:30 pm – 6:30 pm  
Tuesday 12:30 pm – 6:30 pm  
Wednesday 7:00 am – 1:00 pm  
Thursday 12:30 pm – 6:30 pm  
Friday 7:00 am – 1:00 pm  
Saturday 7:00 am – 1:00 pm

APHERESIS DONATIONS – Mountain View  
Monday 1:00 pm – 6:30 pm  
Tuesday 7:30 am – 12:30 pm  
Wednesday Closed  
Thursday 1:00 pm – 6:30 pm  
Friday Closed  
Saturday 7:30 am – 1:00 pm

PALO ALTO AND MOUNTAIN VIEW CENTERS  
CLOSED SUNDAYS AND HOLIDAYS.



CLAUDIA BENIKE, CELLULAR IMMUNOLOGY LAB MANAGER, ALWAYS MAKES AN AMAZING COSTUME FOR HALLOWEEN. THIS YEAR, SHE GOT A LEG UP ON THE COMPETITION AS CAPTAIN HOOK.



STANFORD MEDICAL SCHOOL  
BLOOD CENTER

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Palo Alto, CA 94304

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