Summer/Autumn 2020

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SIGRLE CELL New support for sickle cell sufferers The Organ Donor Register at 25

TACKLING THE PANDEMIC

Save a life Give blood

Saving lives together





NHS Blood and Transplant

A message from Betsy Bassis, Chief Executive

Hello and welcome to the latest edition



th a new decade ushered V in at the start of the year. originally thought that this space would be dedicated to providing a brief retrospective followed by a glimpse of our future plans.

At the time of writing, however, the pandemic continues to unfold and few things seem certain about the coming weeks, let alone months. So, I'd like to focus on something beyond doubt - the immeasurable contribution you have all made during what has and will continue to be a challenging period for the NHS

It has been heart-warming to see donors coming out in their thousands to give blood, platelets and, more recently, convalescent plasma. Our staff have worked immensely hard to put extra measures in place for your safety, and our external venues have gone extra miles to ensure donation sessions can still take place.

On behalf of the NHS. I'd like to say 'thank you' - to our donors, staff and partners. Thank you for helping us maintain the supply of critical products and services. You rank among the many NHS Heroes we have seen throughout this pandemic.

THE DONOR

Inside this issue, you'll find some of the news and stories from the front line, alongside the inspiring stories of those whose lives have been saved or transformed because of the generosity of donors like you. There's Aiden and Dexter – two voung boys who, because of your donations, now have the chance to live their lives – and Mary, whose journey has taken her from one side of the Atlantic, and from one end of blood donation, to the other.

It's great to see the Mayor of Brent and The Sound of Sickle working to raise awareness and smash the stigma around sickle cell disease which, sadly, affects 15,000 people in the UK. Finally, we have Hugh Fearnley-Whittingstall, who shares his thoughts on giving platelets.

I hope you enjoy reading and please do stay safe.

Thank you from Mike Stredder

Director of Blood Donation

I have enjoyed working with many fantastic people at NHS Blood and Transplant over the last five years. At the time of writing, our blood stock levels are higher than they have ever been. I continue to be amazed by the generosity and selflessness of you all! It is with a degree of sadness.

but mainly pride, that I want to thank you all for your support, as I leave an organisation that has been so much more than a job to me.

During the pandemic there has been a heart-warming wave of support for the NHS, and we have experienced an enormous increase in new and lapsed donors registering to support us in a very practical way.

Looking back over my five years. I am delighted that the donor satisfaction scores have improved, that we have blood products that are amongst the safest in the world and that we have a sustainable supply of blood.

It has been a privilege to serve as Director of Blood donation and I will most certainly remain a loyal donor!

Write and tell us your news, views and interesting or unusual donor stories. The Editor, The Donor, NHS Blood and Transplant, 75 Cranmer Terrace, Tooting, London SW17 ORB or email thedonor@nhsbt.nhs.uk

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At the start of 2020 the world as we knew it changed; the pandemic set challenges for all of us and we've all had to adjust to a new normal. But the need for blood has never stopped

have been overwhelmed by the lovalty of blood, platelet and plasma donors. Many of you have told us that donating became a highlight of the lockdown period. For many of you, the trip out of the house to come and donate was



the first journey in weeks - and it was spent saving and improving people's lives.

We would like to say a huge thank you for your continued life-saving efforts and offer a very warm welcome to those who donated for the first time.

Donors have shown It's also important we acknowledge loyalty during the contribution being made by donors lockdown



who have recovered from Covid-19 and are now taking part in the convalescent plasma programme, which is helping in the treatment of patients with the disease. We will bring you much more about this in the next edition of The Donor.

Our transport team make sure blood gets delivered

At the frontline

Donors coming to sessions may have noticed important changes. We've put extra safety measures in place and donors are now triaged when they arrive to ensure they are well. In April, almost 100 staff members from other departments volunteered to help in the triage areas at over 650 sessions.

New deep-cleaning procedures have been implemented in all venues, alongside extra hand sanitisers and PPE. Nurses from other parts of the organisation have been retrained so that they can work at donation sessions.

We have followed new social distancing and hygiene rules at every session for the safety of donors and staff, and to do

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this we have sometimes needed to change donation venues altogether.

Over 60 per cent of our venues have been in touch to offer us priority access and we have had many generous offers from



new venues. This support has been crucial and a great deal of thanks is owed to all the venues, old and new, that support our community donation sessions.

Behind the scenes

With donors eager to help, our national contact centre in Northern Ireland has been extra busy: it received three times the normal number of calls in March alone.

As well as giving extra time to take the additional calls from donors wanting to book appointments, we have been overwhelmed by the interest of tens of thousands of new donors coming forward to register.

Our transport and logistics team have similarly been going the extra mile – they've been working extra hard to maintain the supply of essential products and equipment to sessions and bring the blood back to base.

Under the new working conditions, they have delivered huge volumes of

hand gels, wipes and gloves and are now distributing aprons and masks too. Nearly 60,000 facemasks have been delivered in one week in April to sessions all over the country from our distribution centres in Bristol, Borehamwood and Warrington.

Staff in our manufacturing and testing teams have also been making vital changes



to the ways in which donations are tested and treated before they are sent to hospitals, with new procedures and working practices introduced, as well as providing crucial expertise in the trial of convalescent plasma to help coronavirus patients. Thank you – to you! You all make a difference every day, giving the gift of life to those who need it.

You can find out more information about the convalescent plasma trial www.nhsbt.nhs.uk/covid-19-research/plasma-programme/



Donors are now triaged when they

arrive at session

Plasma is collected from patients who have recovered from Covid-19. This convalescent plasma is used to help treat patients with the virus

The Organ Donor 25 Register at

The NHS Organ Donor Register was set up 25 years ago and in that time it's helped to save up to 20,000 lives and looks set to save even more

When Peter Cox was tragically killed by a brain tumour in 1989, his family made the decision to donate his organs. In doing so, Peter enabled others to have a new start. But that wasn't to be the end. Peter's family were shocked to learn that

there was no central register for organ donors. If it weren't for the fact that Peter carried a donor card, or for the conversation they'd had as a family, they may not have known that he wanted to donate. So, for the next five years, Peter's family – dad John, mum Rosemary and sister Christine – campaigned for a register to be created, and, in October 1994, the NHS Organ Donor Register (ODR) was born.

Through its creation, the family have helped to save many thousands of lives. Over 7,500 people who were on the ODR have become donors and now the Cox family are looking forward to many more lives being saved by the register moving to an opt-out system.

Opt-out system

"I'm so pleased the government has finally supported the move to an opt-out system in England," says Christine. "As a family, we always wanted opt-out but were told it was unlikely that we would secure such a big change in policy, so we pushed for the NHS Organ Donor Register instead. We never gave up hope that this initial step, of securing a more centralised system for coordinating organ donation, would lead on to further advances."

From 20th May 2020 in England and Autumn 2020 in Scotland, everyone will be considered to have agreed to donate their organs when they die, unless they record a decision not to donate or are in one of the excluded groups (e.g. people under the

age of 18 or those who lack mental capacity to understand the new arrangements). Wales has already introduced an opt-out system under its own devolved powers and Northern Ireland will also set its own policy.

Tell your family

Families will still be involved in organ donation, so it is vital that your family know what your choice is. If the time

comes, families find the organ donation conversation much easier if they already know what their relative wanted. The NHS Organ Donor Register will continue to play an important role in this: any decision recorded will be made available to families before organ or tissue donation goes ahead, to help them support what their relative wanted.

Donation will only go ahead with the family's consent, but Peter Cox's legacy has not only been to help save many lives, but also to make thousands of difficult conversations slightly easier.



Rosemary, and sister,

Christine

THE DONOR SUMMER/AUTUMN 2020

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JTUMN 2020

Diary of a clinical donor centre manager

'm currently self-isolating from my family due to the COVID-19 pandemic. I need to stay away from home to enable me to remain at work as a clinical donor centre manager.

DAY THREE

oday is day three. My amazing partner is looking after our girls who aren't feeling well right now. One of my good friends is on nights so I'm camping out (not literally) at hers. I haven't seen my partner or kids in person since Tuesday, and it's now Friday 27th March. Thank goodness for video calls. My partner and my eldest daughter have underlying health issues and are on 12 weeks isolation. My eldest who is 12 has a chest infection and my youngest, who is five, has had a temperature and a sore throat since vesterday.

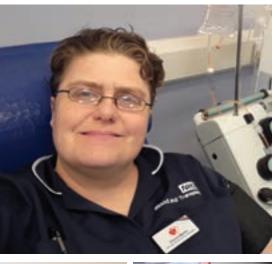
It's comforting knowing that my girls were clapping out of the window for the NHS and Jess, the youngest, shouted goodnight to the neighbourhood before going to bed.

Tomorrow I shall continue to contribute to the NHS saving and improving lives. I miss my family, but I know they are safe.

DAY FOUR

t's the fourth day away from my family. My team at Luton donor centre have pulled together and done me proud. They have been professional and reassuring to donors despite having their own worries. A few discreet tears from some but we are supporting each other.

The kids are still not 100 per cent but my partner is doing a sterling job being their mum, cook, cleaner, nurse, housekeeper and teacher. We had a long video call





Virtual hugs from Emma's children Louise (left) and Jess (right)

see each other in person. **DAY SIX**

t's now day six and oh my what an emotional day it has been.

natter with my mum and dad who are 75

miles away and I don't know when we will

I needed some clothes from home and my family needed some supplies, so I headed to Asda and Home Bargains to get a sticker book and toys for my girls. As I wandered around doing my best to stay two metres away from everyone else, I could feel myself

welling up and it hit me how much I miss my partner and my girls. I wasn't sure if I should let them see me as I didn't want them to be upset.

I picked up the essentials, chocolates, biscuits, sweets and headed home for the first time in what seemed like forever.

I arrived and messaged my partner Maggie to say I was outside. Sorted bags into what shopping was being dropped there and what was coming back to my



Emma and her team

temporary home.

at the Luton Donor As I stepped out of the car, I saw Jess's Centre fingers out of the letterbox and heard her joyfully shout, "Mummy Emma!"

I approached the house and posted two sticker books through the letterbox. I stepped back as Maggie opened the door

"Tomorrow I shall continue to contribute to the NHS saving and improving lives. I miss my family, but I know they are safe"

Emma Martin describes her life under lockdown. working away from home

and took the shopping in and handed me some clean clothes and toiletries.

Then, Louise, 12, came to the kitchen with Jess and we had a chat through the window. Louise was so pleased to see me and it broke my heart that I couldn't go and give them a big squeeze.

Louise has Down's syndrome and autism and struggles with her speech but when she saw me, she said 'mummy' so clearly. I signed 'I love you' through the window

> and she signed and said it back.

DAY NINE

onight will be my ninth night away from the family.

Video called the munchkins earlier for a chat and they were on good form. I'm feeling okay right now, other than the nerve pain in my neck and shoulder. The pain has prevented me

from getting a decent sleep for about three weeks! I'll survive, plenty worse off than me. Hoping the chiropractor can reopen soon!

I truly believe we will get through this and come out stronger and better people. I mean everyone, not just us in the NHS. I hope the world will learn from this and will become a better place for my beautiful girls to grow up in.

Good night all and stay well x ●

As of 8th June 2020, Emma has spent 73 days away from her family and does not yet know when she will be reunited with them.

DONOR



ALVIN

The Sound of Sickle

How a group of young people with sickle cell set out to help other sufferers

n the UK, 15,000 people are affected by sickle cell and more than 300 babies are born with the condition each year. The inherited blood disorder causes misshapen red blood cells, which can get caught in blood vessels, blocking the blood flow. This can lead to extreme pain (crisis) and life-threatening infections.

Many people with sickle cell need blood transfusions. These help to reduce and prevent a severe crisis, but to get the best treatment, patients need blood from a donor of the same ethnicity. Many sickle cell patients have the Ro blood subtype and currently, there is a gap between the amount of Ro blood we collect and the demand for Ro blood from hospitals.

The Ro subtype is 10 times more common in people of African and Caribbean descent, who account for the vast majority of sickle cell cases. However, only around 2 per cent of donors have this rare subtype, so meeting the demand can be difficult. That's why the blood of black donors plays such a vital role in helping to save and improve the lives of those living with sickle cell disease in the UK today.

You can find out more information about The Sound of Sickle on Instagram www. instagram.com/tssuk

The Sound of Sickle is a community initiative, set up with the aim of educating the public and raising awareness of sickle cell disorder. The Donor talked to founders Chris Abdullahi, Elisha Inegbe, Alvin Ikenwe, Tolani Oladogba and Esther Gbogboade about their experiences.

What was the inspiration to create The Sound of Sickle?

CHRIS: Growing up, I didn't know anyone with sickle cell and there wasn't anything targeted at my age group. I wanted to create a community so people like me who are younger and aren't necessarily as forthcoming about their condition can go on our platforms and feel more of a sense of community.

We have a WhatsApp group and have held regular events so people can meet and speak to those that are closer in age to them. The freedom of communication really helps, particularly when someone wants to talk about their experience after a blood transfusion.

What does life with sickle cell look like? **ESTHER:** Life with sickle cell can be

frustrating and lonely sometimes. One minute vou're fine, then suddenly, vou're in hospital. It makes you cautious and careful. I need to plan before I leave my house. **TOLANI:** It's about knowing your triggers and being okay with the fact that you can follow all the doctor's rules and still have a crisis. I get transfusions every six weeks, which makes full time work exhausting as I have to plan my time, from being at work in the morning to having an exchange transfusion in the afternoon, then back at work the next day like it didn't happen. But until there's a real treatment that works then it's all I can try. CHRIS: It's a broad spectrum. On a day to day basis, I don't have it as bad but when I do, it's extremely bad. I do feel pain and extreme shortness of breath. Staying warm and hydrated is always on my mind. Living within my means is the easiest way to put it. There are some hindrances, in the sense that I know I can't go swimming on a

Sickle Cell Trait

People who have just one copy of the genes that cause sickle cell are referred to as having 'sickle cell trait'. People with sickle cell trait carry the condition (and can pass it on to their children) but do not suffer from sickle cell disorder itself. In the UK, most people who have sickle cell trait have an African or Caribbean family background. Having sickle cell trait does not prevent carriers from becoming blood donors.

regular basis or go out and wear minimal clothing. When you have sickle cell, there's this idea that the sky isn't always the limit. Obviously, we aim for the sky to be the limit but there's some terms and conditions at the bottom of the contract. Why do you think is it important to have a platform like this in the community?

ELISHA: I'm coming from a community that was supportive of my struggles with sickle cell but I also saw so many things lacking. (Such as) standard

help that needed to include a young adult like myself who had found it difficult to really express myself and feel comfortable

"We aim for the sky to be the limit" but there's some terms and conditions at the bottom of the contract"

TOLANI

and confident. This platform automatically opens up the ignored voices, the ones that feel they can't talk and that they have no voice, or their voice isn't loud enough. It's like cracking a window open in a stuffy room. You finally feel relieved that there's now fresh air in the room. The Sound of Sickle is that fresh air, for all those young and even old who have felt ignored.

What do you think are some

misconceptions about blood donation? ALVIN: Most commonly I think people

assume that the blood they donate won't be used. Or they can't give blood because they have the sickle cell trait. Another one is that it takes too much time to donate blood. Why do you think there is a shortage of black blood donors?

ELISHA: If we're talking about a decade ago, I could write an essay. But I am seeing a gradual change in black people as a demographic. We have to be truthful about these things or else we won't change.



The Mayor of

Sickle cell disease claimed the lives of two people close to Councillor Ernest Ezeajughi, Mayor of Brent, which is why he is supporting a charity that supports sufferers and their families

hen I was elected Mayor of Brent in summer last year, I thought very long and hard about which charities I would be supporting during my time in the role.

As Mayor, I have a big opportunity to make a significant difference and raise a considerable amount of money, so I knew it was a big decision to make. There are so many worthy causes to choose from.

In the 1980s. I lost a cousin under the age of five to a deadly disease that affects red blood cells. It affected me immensely and I have held it heavy on my heart to this day.

Councillor Tayo Oladapo, who represented Kilburn ward, was a close friend and colleague of mine. After struggling with ill health for some time, he also passed away from the same horrible disease in 2016. He was a man of great integrity and represented the people of Kilburn with great dedication. We sorely miss him.

The Mayor of Brent

with Professor Dame

Elizabeth Anionwu,

patron of the Sickle

Cell Society

The condition I am talking about is sickle cell disease, an inherited disorder that causes red blood cells to develop abnormally, leading to intense pain, infections and anaemia.

There are approximately 15,000 people in the UK who live with the disease. It is a life-long condition, commonly affecting those of black Caribbean and African heritage. Brent is the most diverse borough

Brent donates



in London and it is likely that a large number of people here live with sickle cell, or know people who do.

People rarely give sickle cell the attention it warrants, and I feel much more should be done to raise awareness, which is why I chose the Sickle Cell Society as one of my charities for my mayoral year.

The Sickle Cell Society provides information and support to sickle cell patients both locally and across the UK, aiming to improve their overall quality of life.

I am passionate about using my position to help people overcome this illness.

People who have sickle cell disease need regular blood transfusions, and some experience difficulty getting a matching blood type.

There is a particular need for donors of black African, black Caribbean and mixed heritage backgrounds, as they are more likely to have the rare Ro blood subtype that is vital for many sickle cell patients.

"Giving blood changes lives. Giving blood saves lives "



Baby Aiden needed a transfusion at only 12 hours old

NICU in an ambulance specially adapted for newborns. Alongside phototherapy, where he was dosed with ultraviolet light. Aiden received a neonatal red cell exchange of O negative blood from male donors.

Steph says, "We knew he had to have the exchange but it was horrible to have to sign the permission knowing all these things could go wrong. You don't expect to

"I am just desperately trying to find out whether I can donate now.

'You take it for granted there will be blood there and that it will be compatible for your needs, and if it hadn't been there, we wouldn't have Aiden now."

Neonatal red cell transfusions are donated by men because they lack certain antibodies that women's donations often have.

These antibodies are not harmful to the donor but can be life-

Saving baby Aiden

' C hocked, panicked, worried. Numb. Helpless."

It's hard for Steph Davis to settle on one word to describe what she felt when her newborn son Aiden was rushed into the neonatal intensive care unit (NICU) by staff at Southampton Hospital.

Her blood had crossed into his circulation via the placenta, reacting against it and destroying his red cells, leaving him fighting for his life.

"Doctors found his bilirubin level – a pigment showing the breakdown of red blood cells - was more than 90 times the normal." says Steph.

"At that point they realised there was a battle going on his blood. They did further tests and we were told the only way he could survive was with a full blood exchange.

"I'd only held him a couple of times, and yet within a few hours I was being told a transfusion was the only way to save him."

Aiden was transferred to the

Steph Davis' blood crossed into her son Aiden's via the placenta, leaving him fighting for his life



have to do that within 12 hours of your baby being born."

Aiden was in hospital for a week but is thankfully back at home and doing well, although he will need monitoring and tests for possible after-effects, such as delayed development.

"I am forever grateful to the people who donated the blood," says Steph.

threatening to a newborn baby. It is one of many reasons why more male donors are needed.

Male donors are also able to give blood more frequently due to their blood having higher iron content and men having higher blood volume.

Sadly, though, only 41 per cent of new donors are men, meaning many more are needed to sign up.

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MARY WILSON MATTHEWS Humans of Blood Donation

was on holiday in Mexico when I met my husband. It was the summer of 1993. He was beautiful and British and neither of us knew the adventures that lav ahead of us. One of the first took me across the Atlantic to England during the week of Guy Fawkes Night. Being from the States, I was unfamiliar with it. My husband told me that the effigy being thrown on the fire represented Americans.

I was getting to know what kind of prankster he was.

Not allowed to donate

Years passed. We married and I found a job as a dental technician. My department was quite a close group. One proposed outing was to a blood donation centre around the corner from the lab. I needed no convincing. "What a great thing to do," I mused. Helping people in a more physical, personal

way is just the thing I love doing. After work on the day the trip had been

decided, I joined my husband and some of his cohorts at our local pub. Bursting in with the exciting news of what I was going to do, I was met with stern and serious looks from just about everyone there. Puzzled, I asked what the problem was. My husband said I wouldn't be allowed to donate.

Why? I needed to know!

He told me it was because I was American and my blood wasn't good enough for

This is where you tell us your wonderful and heart-warming stories about blood donation. Here is Mary Wilson Matthews



donation service and asked them the

I was told that the guys were

having a joke at my expense!

the other end of the line too.

Despite all the laughing

donation and several others

during the ensuing years, feeling really positive about

and joking, I made that

There was a definite chuckle on

question. As I suspected,

Mary is now a supporting artist in films and TV

"One proposed outing was to a blood donation centre around the <u>corner from</u> the lab. needed no convincing <u> — I was up for it!"</u>

Something wrong

Time moved on. I started a new job at a much smaller place and the donation centre was no longer convenient for me but I went online and found a session that I could

what I was doing.

attend after work and Leven convinced a colleague to go with me. But at the haemoglobin check I was informed that my levels were not high enough to donate. I tried again a few months later and the same thing happened.

I was told to check with my GP to see if something was wrong. That's exactly what I did and she referred

"I simply can't emphasize enough how important blood

donations are"

me to the haematology department at my local hospital. A number of months later I was diagnosed with myelodysplastic syndrome 5q-, meaning my bone marrow doesn't make enough viable red blood cells to carry the necessary amount of haemoglobin. Illness like mine can happen to anyone, any time. Now blood donations literally keep me alive.

The illness left me feeling weak and extremely tired. I went from doing HIIT classes three times a week to only being able to do one mild stretching session feeling exhausted even after that. I was napping during the day. Something I had never done before.

Months of taking medication only kept the problem at bay, so I am now receiving blood transfusions every three weeks to maintain my haemoglobin levels.

Many transfusions

These days I work as a supporting artist in films and television. It's something that I absolutely love doing. I have to be careful with that, though, making sure my bookings don't interfere with the many transfusions and hospital appointments



husband on holidav

in Mexico

Luckily, I can be very flexible with the bookings. I certainly wouldn't be able to have a 9 to 5 job.

I speak to all my friends about donating and I pass out leaflets to anyone who'll take them, as well as placing them in businesses and shops; I simply can't emphasize enough how important blood donations are.

It's funny... even my prankster husband donates regularly now.



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Who gives... Up from his HQ in Devon, celebrity chef and food activist Hugh Fearnley-Whittingstall spoke to us

activist Hugh Fearnley-Whittingstall spoke to us while giving platelets at Bristol Donor Centre



So, Hugh, when did you start donating blood?

I think the first time I donated was at least 15 years ago. I found it really hard to get a regular rhythm going at first, partly because I was often away filming in exotic places (which was a nice thing to do but restricts when you're allowed to donate).

I've tried to donate more regularly over the last three or four years, and in a good year I probably manage to donate seven or eight times (including platelets).

You know your blood type, then?

You know what, I checked it again the other day because I keep forgetting it -I'mA positive. I'm told it's great for donating platelets, which is what I'm giving today. It's a slightly longer process, but it gives me a good little break in my day. There's a

Hugh has A positive blood, which, he says, is "great for donating platelets"

bit more appointment flexibility too, so my aim is to give in Bristol once a month if I can.

How did you come to start giving blood in the first place?

I have a lot of fun making TV shows where I challenge people, businesses, the government, to do more for the environment, our health or whatever it might be, and I find that very exciting and rewarding - but it's often very hard to know that you've made a difference when the world is such an ambiguous place.

There's something wonderfully clear cut about donating blood. You know that anyone can benefit from what you're doing, and one day it could be you. Giving blood is a no-brainer.

How did you find out about giving platelets? How did you make the jump from blood to platelets?

I think I just picked up a leaflet and read about it; it felt like going up a level. It felt like graduating.

Do any of your friends or family donate blood?

Yes, they do, but I'd like to convince more to donate-it's easy and very satisfying.

Now when I donate I'll quite often overlap with other donors I recognise, so there's nodding and smiling with regulars, and I'll chat to the staff. who are fantastic.

I get itchy if I don't do it for a while; I start to miss it. Donating blood is one of those things you feel great about so go ahead and register now. There's no downside.

... and who receives

How one little boy was helped by these vital blood components

' 🐂 📕 hen Dexter was diagnosed, V I didn't know what platelets were," says his father, Jonny Kidd. "I remember the first unit of platelets he received – he began to perk up



and had more energy. Platelets were integral to Dexter's treatment and, ultimately, have saved his life."

Something not right

Jonny realised something was not right with Dexter during his fourth birthday party. He wasn't himself. He looked pale and didn't want to open any of his birthday presents.

Dexter was taken to the doctors and, after an overnight stay at Wythenshawe Hospital, was admitted to Ward 84, the specialised oncology and haematology unit at Manchester Children's Hospital.

"We got taken into a room and Dexter was only four, so he didn't really understand," says Jonny. "The doctor said: 'Your son's got leukaemia.' In that one moment in



Above, left to right: Mum Katie, brothers Joey and Dexter, and dad Jonny. Left: Dexter says thank you for his treatment

time you find yourself waiting to find out if your child is going to live or die."

Dexter was diagnosed with acute lymphoblastic leukaemia in 2015. During three years of treatment, Dexter received three units of platelets, available because of the generosity of donors.

What are platelets?

Platelets are tiny cells in our blood that help it to clot and so prevent bleeding. They are used in treatments for many patients with cancer and blood disorders.

You can donate platelets more often than you can donate blood and one platelet donation can help up to three adults or 12 children.

We feel very lucky Dexter rang the end-of-treatment bell in December 2018.

His family organised 'Dexter's Ball', an event that raised vital funds for three different charities, including Milly's Smiles, which provides welcome packs to families with a newly diagnosed child admitted onto Ward 84.

Jonny has since donated platelets twice after realising how important they were for Dexter's treatment. "I think that everyone who donates platelets is wonderful and would like to thank them for their time and effort," he says.

"We feel very, very lucky to be in this privileged position where Dexter is alive and well. Seeing the pain Dexter and other cancer sufferers go through, my two hours giving platelets were nothing in comparison and a great way of giving something back."

DONOR

The Donor Crossword

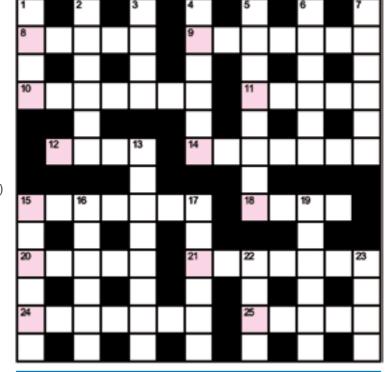
Complete the crossword. The initial letters of the Across answers spell out a character who was certainly not a blood donor! Send the word on a postcard or in a letter together with your name, address and daytime phone number to: Crossword Competition, The Editor, The Donor, NHS Blood and Transplant, 75 Cranmer Terrace, Tooting, London SW17 ORB. You can also email your answer to thedonor@nhsbt.nhs.uk. You could win an NHS Blood and Transplant prize. All entries must be received by October 31st 2020.

ACROSS

- 8 Blemish (5)
- 9 Affinity (7)
- 10 Pantomime boy (7)
- 11 Unsophisticated (5)
- 12 SE county (4)
- 14 Serious-minded (7)
- 15 Countries (7)
- 18 Long narrative (4)
- 20 African capital (5)
- 21 Spanish painter (2,5)
- 24 Brushed aside (7)
- 25 Mother-of-pearl (5)

DOWN

- 1 Mercian king (4)
- 2 Junior church minister (6)
- 3 Horse-breeding establishment (4)
- 4 Alloy (6)
- 5 Angry (2,2,4)
- 6 Beginner (6)
- 7 Thoroughfare (6)
- 13 Garment (8)
- 15 Stupid person (6)
- 16 Renter of property (6)
- 17 Quick (6)
- 19 European republic (6)
- 22 Bunch of criminals (4)
- 23 Portent (4)



WE HAVE A WINNER!

- Congratulations to Sam Batavia from Hemel Hempstead who successfully solved last issue's crossword.
- The solution is: CARDIOLOGISTS



THE DONOR SUMMER/AUTUMN 2020