BOOK REVIEWS


This monograph, by Dr. Hermann Gögl of Innsbruck, is an interesting study of 14 cases of infantile cirrhosis in which the general picture is that of a chronic hepatitis with diffuse cirrhosis in varying degree. Other changes serving to characterize these cirrhoses from a histologic standpoint are the presence of eosinophilic and sometimes basophilic granules within the liver cells, and at times of inclusion-like bodies, suggesting a virus infection. Gögl points out that this disease is common in the Tyrol and Vorarlberg regions of Austria, but more particularly around the town of Kitzbühel where it seems to have endemic character. He obviously leans toward a virus etiology of his own cases but for lack of evidence is obliged to leave the question open as to exact etiologic agents and the relation to epidemic hepatitis.

In addition to the careful clinical, anatomic, and histologic descriptions, the latter supplemented with reasonably satisfactory photomicrographs, there is an extensive bibliography on the subject of cirrhosis in infancy and early childhood.

C. J. Watson


This is a unique work, as books about blood transfusions and blood banks go. The literature to date has emphasized blood groups and transfusion reactions, the management of blood banks and the latest discoveries arising from physico-chemical manipulations of whole blood and its constituents. This book, however, treats of the blood donor, the fountainhead and mainstay of all this activity and the forgotten man of most publications. The uniqueness of the point of view alone would justify the writing of such a book. This small volume, however, has even more to recommend it. Although the main interest centers about the blood donor and the social significance of his service in contemporary society, the scope of the work is wider and comprises many of the problems accompanying the therapeutic use of blood and plasma.

An illustrated historical account of the development of blood transfusions opens the book and is carried up to modern times and the use of fresh and reconstituted plasma. There follows an excellent discussion of the individual blood donor, his physical and psychologic examination, the question of payment, and the problem of transmission of disease from donor to recipient, with special emphasis on syphilis. The blood groups are briefly but adequately presented in a clearly diagrammed manner, although the Rh complex is summarily treated in one short paragraph and presents the state of knowledge of early 1941. The major and most interesting portion of the book deals with the rise of blood donor organizations in modern society. It stresses the social aspects of the problem of an adequate supply of blood donors in the face of mounting use of blood transfusions. The development of blood donor societies in each of the major countries is individually outlined and the types of organizations are discussed and criticized.

This book is written in a simple style, almost as if it were intended more for the general lay public than for the medical profession. However, it does give an excellent general review of the whole problem of an adequate source of supply of human blood, and the methods, both organizational and psychologic, by which such a source might be set up. It is certainly advantageous reading for all those physicians actively associated with blood banks and blood transfusion services.

J. Nebber
Blood donor motivation Motivation comes from the word motive, which actually derives from the Latin word movere, meaning 'to move'. These are the blood donor motivators who have direct experience of the need for safe blood and blood products for transfusion. Date of blood donation Donation number (Identification number) Physical examination record - pulse, temperature, and blood pressure Hemoglobin ABO and Rh (D) group Results of HBsAg, anti-HCV, anti-HIV 1&2. VDRL/RPR and malaria tests Disposal: issued for transfusion or discarded Source: Drugs and Cosmetic Act. Donor retention psychological aspects of the donation and donor-receiver relationship will be discussed. 2. Live donor transplants and their psychological effects. Live donor transplants can be performed with blood relations and members of the same family up to the fourth degree, although the donors are usually close relatives. The operation is usually performed by choice with the donor available or, preferably, with the one with best compatibility concerning the antigens of the HLA complex (Manfro & Carvalhal, 2006). The option for the transplant usually arises from the chronically ill person seeking psychological and social impact of blood donation on the donor. B. Nilsson Sojka. 1. Impact on the donor. The answers to this question were considered as descriptions of effects perceived by the donors to be evoked by whole-blood donation. Results. In all, 528 subjects completed the questionnaire (88%; 319 males and 209 females) and answered the question about the effects of blood donation. Altogether, 54% (287 out of 528) of the blood donors reported one or several effects. Exclusively positive effects were described by 29% (151) of blood donors, while exclusively negative effects were described by 29% (151) of blood donors, while exclusively negative effects were described by 29% (151) of blood donors.

Donor selection is important to ascertain that the potential donor is in good health, as to ensure that no harm occurs to the donor during or after the blood donation, and the patient receiving transfusion is protected from harmful transmission of disease or drugs. It is essential that only healthy people with a sound medical history be considered eligible to donate blood. As it is not possible to perform a full medical and physical examination of the donor prior to the actual blood donation procedure, the suitability of donors must be determined by a qualified physician, or by other qualified personnel. Blood tests and physical examinations are performed to rule out any contraindication for donation. This initial screening is performed to ensure the donors' personal safety, to minimise the risk of transmission of any infectious disease to the recipient, and to maximise the health of babies born as a result of the treatment. Potential donors should also receive medical and psychological counselling to ensure that all implications and consequences of a donation are fully understood. Counselling should provide details about the procedure and, in particular, about any risks associated with ovulation.