Plasma corporation donations help hemophiliacs

By Skip Volkmann

A dedicated reporter will give blood for a good story, a story that tells it like it is. So when this one was asked to donate blood at Lincoln Plasma Corp. and write about the experience, I jumped (sort of) at the opportunity.

Lincoln Plasma Corp. at 2021 O St., runs advertisements that say, "Earn \$100 a month for 2 or 3 hours a

week of your spare time. You may save a life!"

Plasma donated at the Plasma Corp. will be used primarily for treatment of hemophilia, a genetic disorder that prevents the blood from clotting. Without the plasma, a hemophiliac could bleed to death from a small scratch. Plasma is a clear liquid in the blood that contains important proteins.

The combination of money and a chance to help people draws more than 400 donors a week, said Roxanne Zahn, manager of Plasma Corp. Three-fourths of the

donors are college students.

50,000 donations

At 12:45 p.m. on Tuesday I became donor number 3,742. Since the Plasma Corporation opened in January, 1977, donors have given almost 50,000 donations of plasma, Zahn said.

Walking out the door at 4:15 there was a noticeable but not annoying stiffness in my arm and \$10 in my

pocket.

The intervening 3½ hours were filled with forms and tests and one minor complication with a "jumping" vein when the needle was inserted. This made my donation longer than the two hour average for the first visit.

In the waiting room, I was given an "informed consent" form that explained the plasma withdrawal process and possible risks.

The process is called "plasmapheresis." Whole blood is withdrawn from a vein in the arm and then centrifuged (separated by centrifugal force) to separate the oxygen-carrying red blood cells and the white blood cells that

fight infection from the plasma.

Process repeated

After the spearation, the plasma is removed and frozen, and the red and white blood cells are transfused back into the donor. The process is then repeated, blood being withdrawn and separated, and blood cells being replaced, all through the same needles, which is inserted only once.

Some of the risks listed on the consent form include faintness, possible infection, clotting of the blood on the vein and equipment failure.

"There haven't been any problems here," Zahn said, "although we have had people faint. I think it's mainly from the anxiety of donating blood for the first time."

The most serious problem would result from a donor receiving red blood cells that are not his own after the plasma has been separated. The allergic reaction to someone else's blood could cause death, the form said.

"In my eyes, it's impossible to (return) the wrong cells," Zahn said.

Five checks

She said there are five checks to insure that the correct cells return to the correct donor, beginning with careful labeling of withdrawn blood. When the red blood cells are returned, the donor reads the identifying labels to the attendant, the attendant reads them to the donor, and the patient visually confirms that the label is identical to the number on his records.

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In addition, when a bag of blood is taken to be centrifuged, a square plastic tag is tied to it, and the tag will only fit in the stand from which it was taken.

During my donation, these procedures were carefully followed, and I saw no failure to check the labels of any donor.

Understanding the risks involved, I signed the consent form and had my donor record prepared. Weight, height, temperature, blood pressure and medical history were recorded. My middle finger was "poked" and from the drop of blood, my blood type was determined to be O positive. The medical director gave me a brief physical, checking my ears, throat, and heartbeat.

Donors couched

The preliminaries over, I was taken into the large donating room where twenty waist-high, black contour couches are neatly arranged straight out from the wall.

The donating room struck me as being similar to another place I had been. It is reminiscent of a bus station because there are people waiting, waiting in this case for about 1½ hours while the blood is twice withdrawn and replaced.

Most of the donors appeared to be students. Many of them read, some stared blankly into space, periodically checking the tube leading from their arm, and some closed their eyes and relaxed.

I laid down and the attendant vigorously cleansed the crook of my left arm with three solutions to guard against infection.

Jumping veins

She located a large vein and inserted the hollow needle.

But the vein "jumped," slipped away from the needle and repeatedly resisted the probe of the needle.

It wasn't painful although it was disconcerting to see

a needle maneuvered coaxingly under the skin.

The withdrawal of blood was painless. When the blood was taken to be centrifuged, a saline solution was connected to the tube attached to the needle and the pressure and coolness of the incoming solution could be felt.

When the red blood cells were returned, they were much cooler causing my hands to become cold, and fingers become tight.

But the procedure was not overly uncomfortable for me and I would not hestitate to donate again, considering that there is only one source for plasma, and that's people.

Poll . . .

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The CFA has scheduled its appeals hearing on student fees for 7 p.m. tonight in the Union. Both ASUN and the University Program Council, budgeted to get 89 cents and \$1.57 respectively in per student fees, are planning to appeal.

Most students seemed to feel that the health center was not used enough by students to warrant its share of fees, and that, when it was used, its services were too expensive to make it worthwhile.

Never used center

Mary Fejfar, a senior economics major, said she hasn't used the health center in the four years she's been at UNL.

"I'm in favor of the concept of supporting student organizations with student fees, but I'd be a lot happier if they'd take out the \$32.62 that goes to the health center," Fejfar said. "I've been paying student fees for four years, so I've put out over \$200 to pay for the health center, and I've never even used it."

Another senior, broadcasting major Len Pavelka, agreed with Fejfar that the center is getting "way too much, considering I don't even use the health center. I certainly don't think it's worth \$32.62 of my money each semester."

Likewise, 26-year-old English major Tom Wakeley said funds to the center should be cut.

"I don't think the health center needs that much money," Wakeley said. "I've

never even been there."

Wakeley thought money should be cut from the health center's allocations and turned over the UPC because, "I love the speakers."

DN share

The other major area of student concern was student fee funding for the Daily Nebraskan; most of those questioned felt the paper should receive a larger share of their student fees.

"I don't think the Daily Nebraskan gets enough," Pavelka said. "It's the one thing on the campus that's used more by every student consistently . . . yet it gets the least amount of money."

Wakeley agreed that the Daily Nebraskan is "pretty worthwhile. It's probably used more universally than any of the others (agencies receiving student fees), . . . it's such an educational tool."

Senior business major Russ Fideler said he also thought the paper should receive a larger share of student fees because, "it's fairly accessible and does a good job. At least it provides a concrete service for students, unlike most of the other organizations."

Other suggestions for improving the allocation of student fees included: increasing the amount of money going to UPC and the Recreation Dept., cutting the amount of fees received by ASUN and the unions, and using fees to support the Women's Resource Center and minority campus organizations.





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