



What are platelets, and how you can help





What are platelets?

One of the four main blood components, platelets stop bruising and bleeding. Many of Scotland's patients need platelet transfusions, including cancer and leukaemia patients, premature babies and emergency admissions.

However, platelets can only be stored for seven days, so we're always looking for new donors to keep a steady supply available to Scottish hospitals.

Who can give platelets?

Please consider giving platelets if you are:

- An existing blood donor (you must have given blood at least once before).
- A and O blood types
- At least 60kg
- Able to come to Aberdeen, Glasgow or Edinburgh donor centre every four to six weeks.
- Willing to spare up to 90 minutes each time you give platelets.

What else do I need to know?

 Platelets can only be collected using specialist equipment and by our specialist staff, which is why we only collect platelets at three of our regional centres.

- When you become a platelet donor, we will test a sample of your blood to find out what your platelet type is. This helps us match your platelets to patients with specific needs.
- Our donors usually give platelets every four to six weeks. We appreciate this is a greater time commitment than donating blood, but it makes a big difference to patients across Scotland. A range of morning, late afternoon and Saturday appointments are available at most centres.
- In certain cases, your platelet type may be a special match for a specific patient in hospital. This means we may call on you to help them by donating on a given day.
- Platelet donors must meet the health criteria for whole blood donation, as well as some additional criteria – for example, your individual platelet count will determine whether you could be a platelet donor.
- We ask female donors to give extra samples to look for HLA and HNA antibodies. These antibodies can cause a severe reaction in patients receiving blood, called Transfusion Related Acute Lung Injury (TRALI). You can only give platelets if your antibody tests are negative. If your tests show HLA or HNA antibodies, you can usually continue to give whole blood but very

- occasionally we may ask a donor to stop donating altogether.
- HLA or HNA antibodies don't cause harm to the person who has them.
 There is a small risk of complications for a baby if their mother has some types of HNA antibody. We will let you know if this is relevant to you.
- If you've taken aspirin, piroxicam or nonsteroidal anti-inflammatory drugs (such as ibuprofen) within the 48 hours before your appointment, you won't be eligible to donate, as these drugs make your platelets less effective.
 Paracetamol and codeine-based medicines are fine.

What should I do before donating?

Keeping hydrated is the best way to avoid fainting. Make sure you've had plenty to drink before coming to donate. We'll also give you 500ml of water to drink when you arrive. This might seem a lot, but we know it will make you less likely to feel faint.

Don't donate on an empty stomach - make sure you've eaten before you come. However, please avoid fatty meals in the 48hrs before your donation. Oily or greasy food can affect the quality of your platelets and may lead to your donation being stopped or discarded.

Are there any risks associated with giving platelets?

Most of the risks of platelet donation are similar to those for blood donation.

- Bruising and pain: Most pain and bruising is minor, and symptoms settle quickly with no or simple measures. Fewer than 1 in 50 platelet donations lead to bruising.
- Feeling faint: Around 1 in 80 donations lead to donors feeling faint. Drinking plenty of clear fluids (at least 500ml) before donation significantly reduces the likelihood of fainting.



- Citrate effect: Citrate is a blood thinner which occurs naturally in the body. It is added to the donation to prevent blood clotting. A small amount is returned to the donor with their red cells. Most donors feel no side effects, but some may feel tingling around their mouth, fingertips or toes, a metallic taste, or chills. These effects are easily managed by slowing the procedure down.
- Other complications of donation include severe pain, arm inflammation, injury of a nerve or a punctured artery. These are rare, occurring in fewer than 1 in 1,000 platelet donations.
- Very rare complications of platelet donation include haemolysis, where red blood cells are broken down while being processed in the apheresis machine, and air embolism, where air enters the donors blood stream. Modern apheresis machines are designed to minimise risks of these rare complications still further.
- Sometimes the donation may need to be stopped early. This could be because we can't get a good blood flow, or you're feeling side effects, such as discomfort or bruising.

 If this happens, you may need to wait before you can donate again. Our staff will advise you if this is the case.

If you become at all uncomfortable during your donation, it is vital you let a member of staff know. Our team is trained to take the best possible care of you.

I've read all this, and I'm more interested than ever. Who do I contact?

Speak to a member of staff at your next blood donation, who will be happy to chat you through the next steps.

Alternatively, use the contact us form at scotblood.co.uk or email us at nss.snbtsenquiry@nhs.scot or call us on 0345 90 90 999.





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