

group (41.0%; 170/415) but also in the GVD 24.7% (23/93) and the RD 24.3% (205/843) groups. Not having been reminded to donate within the context of national/regional campaigns or personal communication was more important to IVD than to GVD (5.8% [24/415] vs 0.0% [0/93], respectively; $p=0.0124$).

Very unlike the European donor population reported in the DOMAINE survey (55% men), there were more men than women in all donor groups in our study (69.5-74.7%)³. We suggest that we should reinforce the implementation of measures in order to integrate women after a temporary deferral or even ameliorate the perceived risk of donation for women⁴.

It has been reported that elderly donors are safe and highly committed to donate blood⁵. In our study the percentage of GVD aged >51 years was statistically higher than that observed for IVD and RD suggesting that participation in groups of volunteers can lead to retention of donors for longer. Furthermore, GVD provide more blood than not only RD but also IVD. This may be attributed to the fact that organised groups provide organisational structures capable of retaining donors and efficiently reminding them to donate regularly. However, GVD usually donate in a pre-established location in public, a fact that may make them conceal personal data that could result in deferral in order to avoid social rejection by other members of the group. Thus, staff should be educated in ensuring privacy while soliciting information from GVD, usually in public sessional venues outside the premises of blood bank.

In terms of age it should be highlighted that volunteer donors are underrepresented in the younger age group, underlining the need to improve donor education the most often used awareness programmes, e.g. in schools, as implemented by 80% of Blood Establishments in Europe³.

In conclusion, GVD in Greece constitute a precious pool of donors who contribute to more adequate blood supplies since they donate more often and remain active for longer. Adequate reminders and pre-booking appointments for donation for IVD (in order to overcome lack of time) should be incorporated in the national scheme so that IVD share the privileges of GVD. Recruitment and retention efforts should include better communication with current donors and raising awareness among eligible donors through campaigns exploiting the potential of social networks and communication applications.

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References

- 1) Marantidou O, Loukopoulou L, Zervou E, et al. Factors that motivate and hinder blood donation in Greece. *Transfus Med* 2007; **17**: 443-50.
- 2) Messih IY, Ismail MA, Saad AA, Azer MR. The degree of safety of family replacement donors versus voluntary non-remunerated donors in an Egyptian population: a comparative study. *Blood Transfus* 2014; **12**: 159-65.
- 3) De Kort W, Veldhuizen I for the EU Donor Management in Europe Project Partners. *Donor management manual 2010*. Nijmegen: DOMAINE [Internet]. Available at: www.domaine-europe.eu. Accessed on 30/09/2014.
- 4) Gorlin J. Iron man pentathlon or "we have met the enemy and they is us!". *Transfusion* 2014; **54**: 747-9.
- 5) Müller-Steinhardt M, Müller-Kuller T, Weiß C, et al. Safety and frequency of whole blood donations from elderly donors. *Vox Sang* 2012; **102**: 134-9.

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