What is Cell Salvage?
Cell salvage is a way of collecting blood that is lost during an operation, and filtering it so that it can be given back to you. It is sometimes called autologous blood transfusion (using your own blood).

This might happen when you have a baby by caesarean section. Cell salvage is approved during caesarean section by NICE (National Institute for health and Care Excellence), the Royal College of Anaesthetists and the Royal College of Obstetrics and Gynaecology.

How is it done?
Blood that is lost during your caesarean section is collected using a cell salvage machine. This machine separates the different parts of your blood and collects just the red cells (which carry oxygen). These red cells are washed, filtered and then, if needed, given back to you through a small tube into a vein. Your red cells will only ever be given to you and cannot be used for someone else.

Not every woman who has a caesarean section will have cell salvage but some women might have a greater risk of bleeding during the operation and will therefore benefit from cell salvage. You should ask your doctor or midwife about this.

What are the advantages of cell salvage?
The advantage of having your own blood back is that you are less likely to need a transfusion of blood from someone else, that is, a blood donor. This therefore reduces the very small risks associated with donor blood. All of the UK blood services have leaflets that explain these risks; please ask your doctor or midwife for a leaflet.

Cell salvage is often acceptable to people who do not wish to have a transfusion of donor blood for reasons of faith or other reasons, such as Jehovah’s Witnesses.

Also, if you are a blood donor and have received only salvaged blood and no donor blood it may be possible for you to continue as a blood donor when you have recovered from having your baby.

(People who have received donor blood or any other blood component since January 1st 1980 cannot be blood donors as a precaution against the possible spread of vCJD by blood transfusion.)

What are the concerns?
There have been two main concerns about using cell salvage during caesarean section.

The first is that amniotic fluid, the ‘waters’ that surround your baby in the womb, could enter your bloodstream and cause harm through an allergic reaction. Cell salvage has been used in caesarean section for many years and there is no evidence of this happening.

The second is that the baby’s blood can get into your bloodstream. You might develop antibodies that can harm the baby in future pregnancies. The most common blood group where this happens is if you are RhD negative and your baby is RhD positive.

This can happen during pregnancy anyway; to prevent antibodies forming, if you are RhD negative you should be offered an injection of anti-D within 72 hours of having your baby. Again, all the UK blood services have information leaflets to explain this.

Why might it not be suitable for me?
At the moment cell salvage is only available if you are having a caesarean section to deliver your baby.

What is the spread of vCJD by blood transfusion.

Where can I get more information?
Ask your hospital doctor or midwife if cell salvage is available at your hospital. If it is, they can advise you if it is suitable or if it is needed during your caesarean section.

For further information about cell salvage please visit: http://www.transfusionguidelines.org.uk/transfusion-practice/uk-cell-salvage-action-group

Jane’s Story
“After an emergency caesarean section in 2010, I had an elective caesarean section in 2014 with cell salvage. The anaesthetist described cell salvage to my partner and I as a good way of collecting the blood lost during the operation so that it can be given back. I felt that it offered health benefits and willingly agreed. I was awake during the caesarean section and saw the cell saver next to me. It was a bit like a small washing machine. I had my own ‘washed’ blood back in the recovery room. I felt fine afterwards and think it was beneficial as my blood wasn’t wasted and I didn’t need a blood transfusion. I would definitely recommend it to others.”