Jehovah’s Witness Patients

Interventions for successful stem cell transplantation without blood product transfusions for hematologic malignancies

Amanda Park, BSN, RN, CMSRN, OCN®, Sandra Rome, RN, MN, AOCN®, CNS, and Raymond Gantioque, DNP, RNFA, ACNP-BC

BACKGROUND: Jehovah’s Witnesses are members of a religion that prohibits them from accepting blood product transfusions. This refusal makes them a particularly compelling population in the context of hematologic malignancies and stem cell transplantation, because blood product transfusions are a mainstay of supportive treatment.

OBJECTIVES: This article presents preventive and supportive measures allowing Jehovah’s Witness patients the opportunity to receive a stem cell transplantation without blood product transfusions.

METHODS: A literature review was done that included evidence focusing on optimizing hematopoiesis, blood loss prevention, alterations in chemotherapy regimens, and implications for nursing practice.

FINDINGS: With proper preventive and supportive care measures, Jehovah’s Witness patients can receive stem cell transplantations for hematologic malignancies without blood product transfusions.

KEYWORDS
Jehovah’s Witness; hematologic malignancies; stem cell transplantation

JEHOVAH’S WITNESSES ARE A FUNDAMENTALIST CHRISTIAN RELIGIOUS GROUP that was founded in Pittsburgh, Pennsylvania, in 1872. Among the many tenets of the religion, followers are prohibited from accepting blood transfusions, based on their literal interpretation of the bible. According to Genesis 9:4 (King James Version), “only flesh with its soul—its blood—you must not eat.” Jehovah’s Witnesses interpret this to mean that they cannot accept transfusions of whole blood or its primary components (red and white blood cells, plasma, and platelets). The decision about whether to accept minor blood components, such as albumin, clotting factors, cryoprecipitate, and stem cells, is left up to the individual as a matter of conscience (Lin, Kaye, & Baluch, 2012). Many Jehovah’s Witness patients are willing to accept the infusion of stem cells because they are perceived to come from the marrow rather than being considered a blood product. Blood product refusal was not always the religion’s mandate; the Governing Body of Jehovah’s Witnesses officially banned blood product transfusions in 1945 (Wright, 2016).

This blood product refusal can lead to ethical and moral distress when the healthcare team treats these patients, because denying a life-saving transfusion can be perceived as irrational. However, general agreement exists among ethicists that the wishes of competent, well-informed adult patients to decline transfusions should be respected because of the preeminence of patient autonomy in medical decision making (Sagy, Jotkowitz, & Barski, 2016). There have been favorable outcomes for Jehovah’s Witness patients in complex bloodless surgeries, including cardiac and vascular surgeries and solid organ transplantations (Brunetta et al., 2015; Madueño, Tomáš, & Velázquez, 2013; Spasovski, Stankov, & Masin-Spasovska, 2014; Tanaka et al., 2015). The common thread among all these bloodless procedures is the ultimate goal of minimizing blood loss and optimizing hematopoiesis to attain the best possible outcomes for these patients while forgoing transfusions.

Although Jehovah’s Witnesses constitute just 0.8% of the population in the United States (Pew Research Center, 2015), their refusal of blood product transfusions makes them a particularly compelling community in the context of stem cell transplantation (SCT). Blood and platelet transfusions are mainstays of supportive therapy in hematopoietic SCT (HSCT), because high