INTRODUCTION: Adverse reactions relate to signs and symptoms that occur during blood donation or after it. Trying to be trans-
parent and honest, exceptionally causes temporary damage.
We can classify adverse reactions as:
- Mild — Less than 15 minutes: consisting of light headedness with cutaneous paleness, nausea, blurred vision.
- Medium — Lasting longer than 15 minutes, there is loss of consciousness for a few seconds, profuse vomiting.
- Severe — There is loss of consciousness manifesting in convulsions, trauma.

The blood donation process relies on professionals specifically prepared for full selection, both for the monitoring and extraction; in addi-
tion to being trained in the approach of adverse reactions, using resources such as distracting donators during the extraction, ensuring sufficient li-
quids are taken, general recommendations and which has shown very good results; the application of muscular tension proposed by Ost in 1986
(consists of first detecting the signs that indicate a slight drop in blood pressure and applying tension techniques in the large body muscles for in-
tervals of 30 seconds approximately and rest for intervals of 30 seconds in which the muscle relaxation phase is to be entire). This intervention
Technique works following the disappearance of the first signs of anxiety which on many occasions bears an increase of arterial tension followed
by a sharp decrease, with the consequent Syndrome Vasovagal, slowing down the process of decrease in blood supply.

HIPOTHESIS:
- The intake of liquid prior to blood donation minimizes the risk of no adverse
reaction.
- Environmental conditions, such as excessive heat causes a high
her rate of adverse reactions.
- Anxiety at the first donation or due to previous negative experience
raises the risk of an adverse reaction

METHODOLOGY:
During the months of February and March, as well as during July and August 2013, a study was carried out with a total of 33, 835 people. The
target population of this study was a group of people who donate blood and suffered an adverse reaction, 124 in the first period and 104 in the second period.
The date was collected through a questionnaire by CHEMCYL nursing staff and doctors, which was subsequently processed with the statistical
computer program SPSS 21.

RESULTS:
February-March (period 1):
- The percentage of adverse reactions during this period was 0.73%.
- The difference between one sex and another was minimum, al-
though female cases were slightly higher with 51.61% affected.
- Regarding types of reactions; the mild ones were of greater occu-
ience with 67.74%, occurrence as opposed to 29.36% of medium
reactions and 2.42% of severe reactions.
- The analysis reflects that 66.12% of reactions occurred in collec-
tions, while 29.03% of the cases occur at the fixed extraction
point, hospitals, health centres and 4.83% in the mobile extraction
unit.

July-August (period 2):
- The percentage of adverse reactions during this period was 0.16 %
- The difference between one sex and the other was minimal, ma-
les were slightly more dominant with 50.96%.
- Within the types of reactions, the mild ones were the majority with
51.08% of the cases affected, compared to 28.34% of medium rea-
tions and 2.88% severe ones.
- It is found that after the analysis, the difference in reactions be-
 tween collections and fixed points of extractions was minimal, with
49.03% in the first one and 47.11% in the second ones.
- In the mobile unit the percentage of adverse reactions was 3.84%.

CONCLUSION:
After the analysis of the research, it shows that the youngest age group (18-35 years) is that which was usually seen to be more
affected by adverse reactions, confirmed by other studies such as the Domain report (1) or Roja SL andCols. (2).

In contrast to the of Roja SL. and Cols. study where the male is most given to these reactions. This study has not shown a deci-
dence of any one of the two sexes in both analyzed periods.

We observed anxiety and/or suggestion, insufficient fluid intake prior to the donation, having suffered previous dizziness, and also
heat in the period of data collection that coincided with the summer, either in the area of extraction, in the refreshment area
affective to the mobile unit, which is the male who gives most to these reactions. This study has not shown a decli-
dence of anxiety arising with the two sexes in both analyzed periods.

Anxiety and/or suggestion becomes the possible decisive factor of the appearance of adverse reactions. This may be related as is
suggested by García Loera A. (3), with the absence of knowledge of the process of blood donation, since it takes place for the
first time in those professional donors, who are not familiar with the procedure of the blood donation overall. Consequently
we must bear in mind the importance of the healthcare personnel in charge equally at the key stage and of selection of the
donor as in the process of extraction is prepared to be able to minimize this level of anxiety, relieve fears and answer all questions.

Thesis endorsed also in the Van Dijk N. study(4)

With other studies, we can conclude that as in the work of Hansen SA. (5), or in the case of Ando IF. (6), the in-
fluence of factors prior to the donation appears to be a determining factor in the occurrence of adverse reactions, noting that those
who do not ingest a minimum volume before donating are more susceptible to adverse reactions, that those who did.In this re-

case, the period before blood donation is not defined as one of the higher factors associated with adverse reactions despite its occur-
rence, in fact it is one of those occurring less frequently, however in the Moon ML. and Cols (7) study it seems to be one of the de-
terminants.

In conclusion, this study shows that it iscondido sine qua non, the existence of healthcare personnel trained and prepared spec-
ifically for this area of work. It is necessary to reduce the level of anxiety of donors, using various techniques that have proven
to give good results, as for example the Ost technique of application of tension.

OBJECTIVE:
The study aims to determine the possible causes of adverse
reactions in blood donors, which many occur befo-
er after of donation; as well as the guidelines to be fol-
lowed in the event that they occur.

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