**Plasmodium parasitaemia among blood donors in Sokoto, North Western Nigeria**

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A total of 150 consecutively recruited blood donors aged 18 to 65 years and mean 27.4±6.6 years were tested for transfusion–transmissible malaria, infection. Out of the blood donors test, 55 (36.7%) tested positive for Malaria. The prevalence of malaria was compared based on the ABO blood group of blood donors. The prevalence of Malaria was significantly higher among group O donors 35 (64%) followed by group B 11(20%) followed by group A 8(14.6) and group AB 1 (2%). The prevalence of malaria was stratified based on the gender of donors. Out of 150 blood donors tested, 133 (88.7%) were male while 17 (11.3%) were female. The prevalence of malaria was significant higher among male donors 48 (87.3%) compared to female donors 7 (12.7%) (p=0.001). The prevalence of malaria was stratified based on the age group of donors. The prevalence of malaria was significantly higher among donors in the 18-28 and 59-68 years age group. The prevalence of malaria was stratified based on the marital status of donors. *Plasmodium falciparum* was responsible for all cases of malaria infection among donors. The prevalence of malaria was significantly higher among married subjects; 37(62.3%) compared to single subjects 18(37.7%) (p=0.01). The prevalence of malaria was stratified based on the occupational groups of donors. Out of 150 blood donors tested, 48 (32%) were farmers, 24(16%) were traders, 35 (23.3%) were civil servants and 43 (28.7%) were students. The prevalence of malaria was significantly higher among farmers 21(38.2%) (p=0.01). The prevalence of malaria was stratified based on the occupational groups of donors. The prevalence of malaria was significantly higher among family replacement donors 50(90.9%) compared to voluntary non-remunerated donors 5(9.1%) (p=0.001). This present study indicates a high prevalence of malaria among blood donors studied. It may be justifiable for recipients of blood transfusion particularly neonates, children and pregnant women in our malaria-endemic environment to be routinely treated with anti-malarial drugs as a prophylactic measure. We advocate for a mandatory universal donor screening policy for malaria, for exclusion of blood donors with plasmodia parasitaemia to further enhance blood safety.

**Biography**

Erhabor Osaro is an Associate Professor of Haematology and Transfusion Medicine in Usman Danfodiyo University, Sokoto, Nigeria. He is a Chartered Scientist and Fellow of the Institute of Biomedical Science of London. He holds a Doctor of Philosophy degree in Immunohaematology from the Rivers State University of Science and Technology Rivers State, Nigeria. His teaching experience spans both the African continent and Europe. He is a recipient of several awards including the famous British Blood Transfusion Society Young Scientist Award and the Margaret Kenwright Young Scientist Award. He is the author of 4 scientific books and 5 chapters of scientific books. He is a member of the editorial board as well as an article reviewer of several international scientific journals and a well published contributor with more than 100 published articles in the field of infectious diseases, occupational health, immunohaematology and transfusion medicine.

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