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Considerable advances have been made in platelet transfusion recently, but some debate over its indications persists. The platelet is recovered from the whole blood donations (Random platelet), is a pooled platelet (from 5 random platelets), or is derived by plateletpheresis (single donor). The single donor platelet products contain about four to six times as many platelets as a unit of platelets obtained from the whole blood. The use of platelet and its demand continues to increase; 2 to10% each year in the world. Single donor platelet concentrates are costly, so the appropriate use of platelet transfusions decreases the shortage and increases their availability and clinical effectiveness. Some reports have indicated that infusible platelet membrane, an alternate approach to platelet infusion, may have efficacy, safety and acceptable tolerability without thrombogenecity, immunogenicity or toxicity. The use of infusible platelet membrane in the management of patients with thrombocytopenia helps blood transfusion organizations to supply all requests and decreases the platelet shortage.

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