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Multiple Blood Transfusion may contribute to Abnormal Liver and Endocrine Functions in Adults with Sickle Cell Anaemia

Les Transfusions Sanguines Multiples Peuvent Contribuer à L'anomalie des Fonctions Hépatiques et Endocriniennes chez les Adultes Atteints de Drépanocytose

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ABSTRACT

BACKGROUND: The study evaluated the effect of multiple blood transfusions on the prevalence of iron load and its effects on organ functions in patients with sickle cell anaemia (SCA). **METHODOLOGY:** Sixty-seven multiply transfused SCA subjects and 58 non-multiply transfused SCA controls were investigated. Serum ferritin, insulin, growth hormone (GH), thyroid stimulating hormone (TSH), triiodothyronine (T3) and thyroxine (T4) were measured by the ELISA method while plasma alanine transaminase (ALT) was measured spectrophotometrically.

RESULTS: The median serum ferritin level was 364.97 (142.5–579.3) ng/ml and that of ALT was 12.20 (7.4–16.7) IU/l in the subjects and were significantly higher compared with 115.31 (81.3–285.6) ng/ml and 7.74(5.9–9.9) IU/l obtained in the controls ($p < 0.001$ in each case). TSH was significantly lower 1.45 (0.4–2.9) μ IU/ml in subjects compared with 2.12 (0.7–3.6) μ IU/ml obtained in the controls ($p = 0.034$). The mean values for T4 in the subjects was 10.19 ± 1.5 μ g/dl and was significantly higher compared with that of the controls of 9.57 ± 1.5 μ g/dl ($p = 0.026$). However, there were no significant differences in the mean values of T3, GH and Insulin between the cases and the controls. There was a strong correlation between serum ferritin level and the number of units of blood transfused in the subjects ($r = 0.575$, $p < 0.001$).

CONCLUSION: The study found high serum ferritin level in multiply transfused SCA patients and which also correlated with the number of blood units transfused. **WAJM 2022; 39(1): 39–44.**

Keywords: Sickle cell anaemia; Multiple blood transfusion; serum transferrin, Iron overload; organ dysfunction.

RÉSUMÉ

CONTEXTE: L'étude a évalué l'effet des transfusions sanguines multiples sur la prévalence de la charge ferreuse et sur les fonctions organiques chez les patients atteints d'anémie falciforme (ACS).

MÉTHODOLOGIE: Soixante-sept sujets atteints d'anémie falciforme transfusés à plusieurs reprises et 58 témoins SCA non multitransfusés ont été étudiés. Le serum ferritine, de l'insuline, de l'hormone de croissance (GH), de la thyroestimuline (TSH), la triiodothyronine (T3) et la thyroxine (T4) ont été mesurées par la méthode ELISA, tandis que l'alanine transaminase (ALT) du plasma a été mesurée par spectrophotométrie.

RÉSULTATS: Le taux médian de ferritine sérique était de 364,97 (142,5-579,3) ng/ml et celui de l'ALT était de 12,20 (7,4-16,7) UI/l chez les sujets et étaient significativement plus élevés par rapport aux 115,31% (81,3-285,6) ng/ml et 7,74(5,9-9,9) UI/l obtenus chez les témoins ($p < 0,001$ dans chaque cas). La TSH était significativement plus basse : 1,45 (0,4-2,9) μ UI/ml chez les sujets par rapport aux 2,12 (0,7-3,6) μ UI/ml obtenus chez les témoins ($p = 0,034$). Les valeurs moyennes de la T4 chez les sujets étaient de $10,19 \pm 1,5$ μ g/dl et était significativement plus élevée comparée à celle des contrôles de $9,57 \pm 1,5$ μ g/dl ($p = 0,026$). Cependant, il n'y avait pas de différences significatives dans les valeurs moyennes de T3, GH et Insuline entre les cas et les témoins. Il y avait une forte corrélation entre le taux de ferritine sérique et le nombre d'unités de sang transfusées chez les sujets ($r = 0,575$, $r = 0,575$, $p < 0,001$).

CONCLUSION: L'étude a révélé un taux de ferritine sérique élevé chez patients atteints de SCA ayant reçu des transfusions multiples et qui était également en corrélation avec le nombre d'unités de sang transfusées. **WAJM 2022; 39(1): 39–44.**

Mots clés: Anémie drépanocytaire ; Transfusion sanguine multiple ; Sérum transferrine, surcharge en fer ; dysfonctionnement des organes.

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Abbreviations: