



Hypochromic Microcytic Anemia In Outpatients

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PURPOSE / OBJECTIVES

The aim of this study is to evaluate laboratory data of hypochromic microcytic anemia (HMA) on outpatients, its frequencies, age and gender distribution and its causes.

MATERIALS & METHODS

We performed an epidemiologic study including 384 outpatients, 85 men and 299 women, mean age 34.27yr, for a year period, with hemoglobin levels under the reference range. The blood of these patients collected with k3EDTA was stored on 5°C for 5 days and then was tested for electrophoresis of hemoglobin with Sebia HYDRASYS.

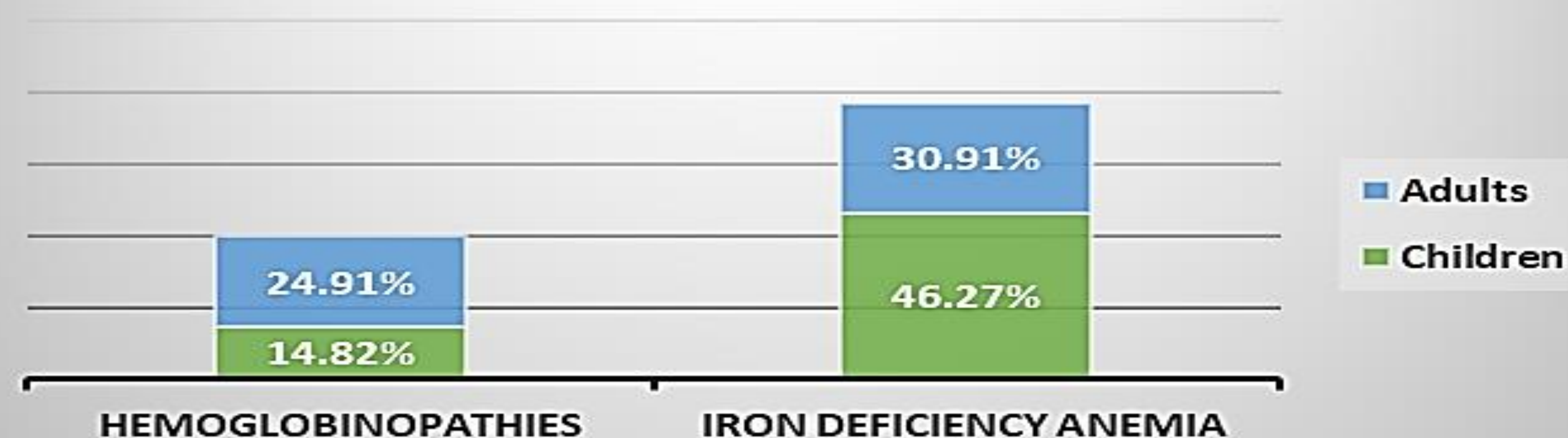
RESULTS

In our laboratory the frequencies of hypochromic microcytic anemia resulted 23.34%. We got 90 cases with hemoglobinopathies from which 87 or 22.66% were β -thalassemia minor and 3 or 0.78% were Sickle cell anemia.

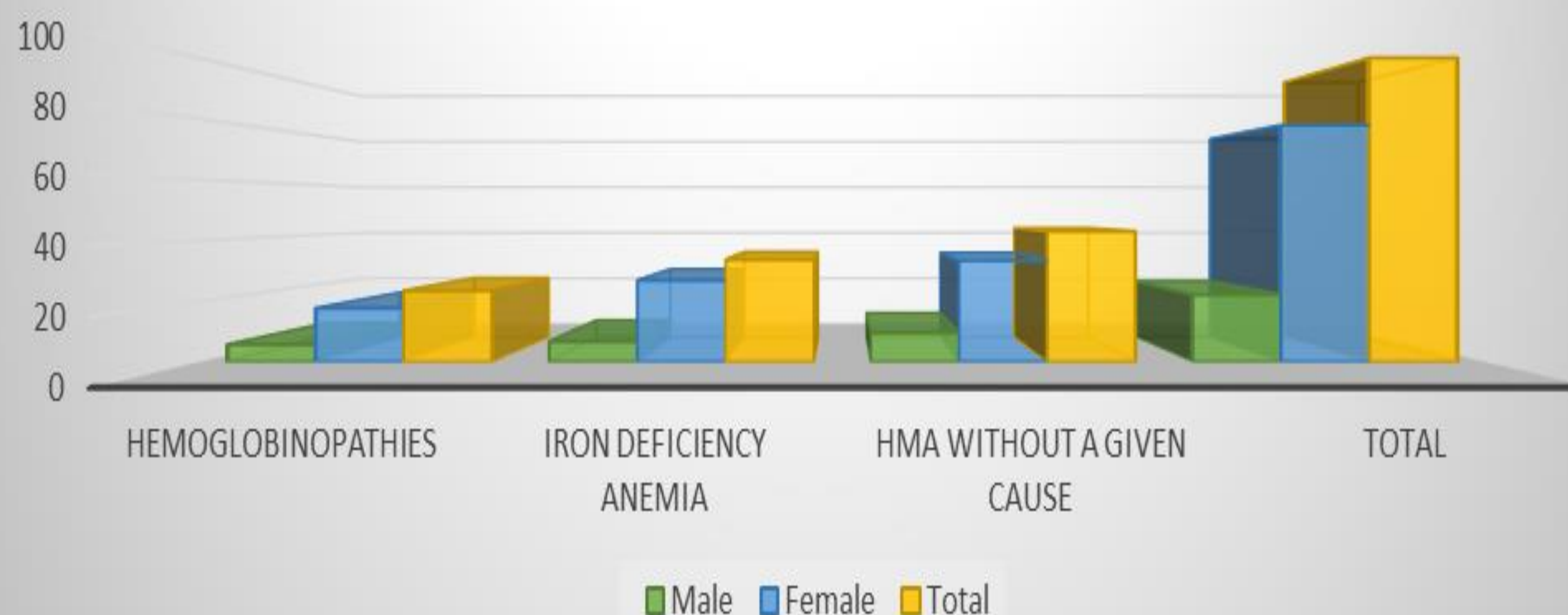
Causes of HMA



Age distribution



Gender distribution



RESULTS

The iron deficiency anemia was found in 129 outpatients with a percentage of 33.59%. The rest of our patients hadn't a given cause. In our study we had 67 children (0-14 years old) and 317 adults (15-86 years old). We found hemoglobinopathies in 14.92 % of children and in 24.92 % of adults. Meanwhile iron deficiency anemia resulted in 46.27% of children and in 30.91% of adults. Hypochromic microcytic anemia was more often present in females with 77.86% to 22.14% males.

SUMMARY/CONCLUSION

The presence of hemoglobinopathies and its percentage is a very good reason of continuing screening test in pregnant women. Regarding to iron deficiency anemia the most important thing is establishing the diagnosis and reason for iron deficiency and correct it.