

## What Sickle Cell Disorder is not

People are often confused and upset by some of the incorrect information they have received about Sickle Cell Disorder.

Sickle Cell Disorder:

- is **not** leukemia
- is **not** cancer
- is **not** infectious

Sickle cell disorder is a condition inherited from both parents. This means your child is born with it. Speak to the doctor or nurse if you have any more questions, they will be delighted to offer more information.

## Useful Numbers:

You may contact the numbers below between the hours of 14.00-16.00 Monday to Thursday if you have any further queries.

- Phlebotomy Room/Blood Test Room
- Outpatients (01)-4143683
- Day ward (01)- 4142295
- Beech Ward (01)- 4142160

## We would like to hear your feedback

Did you find this leaflet helpful?

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How can we improve?

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Return to: Eoin Power OPD AMNCH

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Patient Information Leaflet

# Sickle Cell Testing



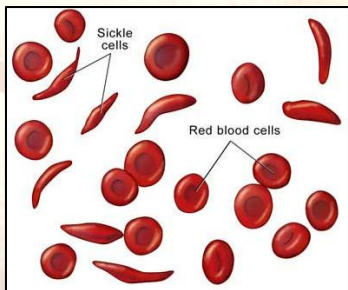
## Statement of Values

Respect - Caring -  
Openness - Partnership -  
Teamwork Fairness &  
Equality

THE ADELAIDE & MEATH  
HOSPITAL, DUBLIN  
INCORPORATING THE NATIONAL CHILDRENS  
HOSPITAL

## What is a Sickle Cell Test?

A sickle cell test is a blood test done to screen for sickle cell disorders. Sickle cell disorder is an inherited blood disease that causes red blood cells to take on an abnormal shape (sickle cell shape). This can lead to anaemia. This happens because the red cells contain an abnormal Haemoglobin, called Haemoglobin S. Normal Haemoglobin is called Haemoglobin A. Haemoglobin is the protein that carries oxygen in the blood. Children will mostly have the sickle cell trait which means they carry the disease but do not have signs and symptoms of the condition itself.



## Sickled Blood Cells

In patients who have Sickle Cell Disorder sickled blood cells are destroyed by the body faster than normal blood cells. This can lead to the body receiving an inadequate supply of oxygen. This condition is called sickle cell anemia. Sickled blood cells can also become trapped in blood vessels reducing or blocking blood flow to an area. This can be painful and lead to damaged organs, muscles and bones and may lead to life threatening conditions.

## Why we test?

The risks associated with sickle cell disorder are greatly reduced if we know your child has the condition. It is for this reason that we are testing your child.

A child who has the sickle cell trait is a carrier of the disorder but does not have the condition itself. He/she will however have to be careful when undertaking activities where the oxygen supply may be less, for example scuba diving, high altitude walking. General anaesthesia is also a risk and it is generally for this reason that we are testing your child. Where possible all at risk children going for surgery are tested prior to admission. This generally occurs in the Outpatients Department so that the result can be reviewed by the doctors prior to surgery. Special precautions are then taken for all children with sickle cell trait or disorder.

If your child has a sickle cell trait then his/her care will remain in this hospital.

If your child is positive for the disorder (not trait) we will transfer his/her care to Our Lady's Children's Hospital, Crumlin (OLHC). Here they specialise in the management and treatment of sickle cell disorders. Children with sickle cell disorder require regular medical attention before and after surgery.

## How we test for sickle cell disease.

A simple blood test is undertaken to screen for the sickle cells (sickledex). This test shows the presence of sickle haemoglobin. A positive result requires a second blood test (haemoglobin electrophoresis) to determine if it is a sickle cell trait or sickle cell disease. A leaflet is available in our "Education Centre" on preparing your child for a blood test.

## Who is tested?

Children whose families come from Africa, the Caribbean, Eastern Mediterranean, Middle East and Asia are at increased risk of having this disease. It is for this reason that we test these children. Children under six months of age cannot be tested as the mother's haemoglobin remains in the child's blood and will affect the result.

## What else affects the test.

Having had a blood transfusion in the last 4 months can cause a false negative blood result because the normal haemoglobin from the donor's blood will continue to circulate in the recipient's bloodstream. Please inform the doctor if your child has received a recent blood transfusion.