# Pitfalls in the premarital testing for thalassaemia

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#### **Husband and Wife are not related**

#### Husband

### • Hb 13gm

- MCV 82
- RDW 17
- MCH 31

#### Wife

Hb 10.5gm MCV 63.5 RDW 13

MCH 23

#### **Husband and Wife are not related**

#### Husband

#### Wife

#### **Baby**

<ul> <li>Hb</li> </ul>	13gm
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- MCV 82
- RDW 17
- MCH 31

Hb 10.5gm

MCV 63.5

**RDW 13** 

MCH 23

- Hb 6.5gm
- MCV 72.5
- RDW 19
- MCH 23

#### **Husband and Wife are not related**

#### Husband

#### **Baby**

- Hb 13gm
- MCV 82
- RDW 17
- MCH 31

#### \_\_\_\_\_

Wife

Hb 10.5gm

MCV 63.5

**RDW 13** 

MCH 23

- Hb 6.5gm
- MCV 72.5
- RDW 19
- MCH 23
- A 0%
- A2 3.0%
- F+S 97%

#### **Husband and Wife are not related**

#### Husband

### Hb 13gm

- MCV 82
- RDW 17
- MCH 31
- A2 2.3%
- S 36%

#### Wife

Hb 10.5gm MCV 63.5 RDW 13 MCH 23

A2 4.3%

#### Baby

- Hb 6.5gm
- MCV 72.5
- RDW 19
- MCH 23
- A 0%
- A2 3.0%
- F+S 97%

### Diagnosis

Sickle thalassemia Hb S/B

#### Husband and Wife are first degree relatives

#### Husband

#### Wife

Baby 6 month

<ul> <li>Hb</li> </ul>	13gm
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- MCV 63
- RDW 13
- MCH 23
- A2 2.8%
- 2.9%
- 3,0%

Hb 10.5gm

MCV 63.5

**RDW 13** 

MCH 23

A2 4.8%

• Hb 5.5gm

- MCV 85.5
- RDW 19
- MCH 23
- A2 3.0%

### Diagnosis

Alpha thalassemia silent with beta thalassemia minor

### Haemoglobin

### Haem

- Iron
- portoporphyrins

### <u>Globin</u>

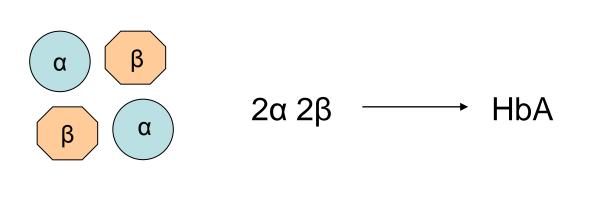
Two alpha with either

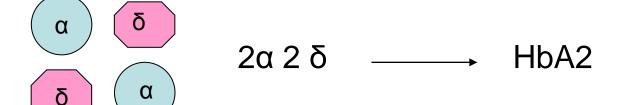


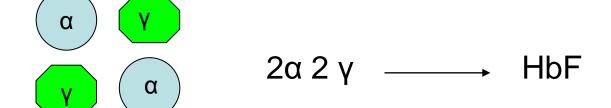
- Two beta (Hb A)
- Two gamma (Hb F)
- Or two delta (Hb A2)

Gene on chr 16

Gene on chr 11

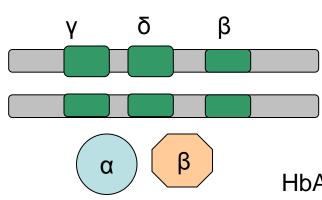






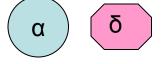
### Beta gene defects

### **Normal**



HbA 95.5 – 99%

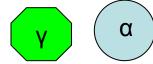
α



α

HbA2 < 3.5%



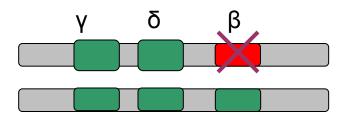


HbF < 1% (after one year age)

### Types of defects on β gene

- Decrease OR absent production
  - Thalassemia
    - β+ decrease production
    - β Absent production
- Abnormal production
  - Sickle cell disease and others
    - Hb S, C<sup>H</sup>, C ,E, D, J, O, I and others

### Beta Thalassemia minor

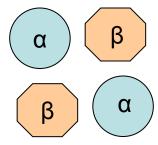


#### Beta thalassaemia minor

 $\beta$  + decreased production

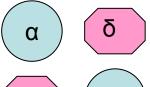
or

**β**○ absent production

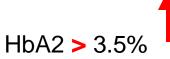


HbA

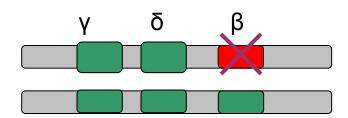




δ



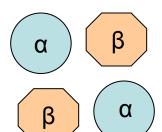
#### Beta thalassaemia minor



 $\beta$  + decreased production

or

**β**○ absent production

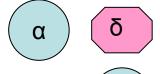


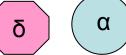
HbA



#### **Features:**

- Asymptomatic
- •Mild anaemia
- Microcytosis
- Normal RDW
- Low MCH
- Normal MCHC
- At least one parent has microcytosis

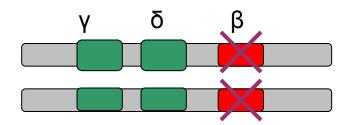




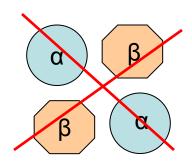
HbA2 > 3.5%



### Beta thalassemia major



#### Beta thalassaemia major

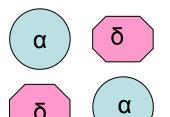


HbA absent or markedly reduced

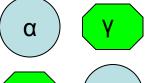
 $\beta \circ \beta \circ \text{Hb A} = 0$ 

 $\beta$ +  $\beta$ 0 Hb A ≈ 5%

 $\beta$ +  $\beta$ + Hb A  $\approx$  10%

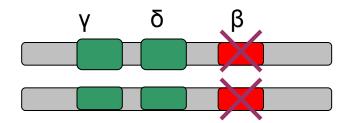


HbA2 variable amount

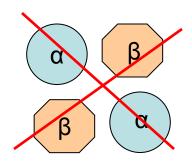


γ α

HbF up to 100%



#### Beta thalassaemia major

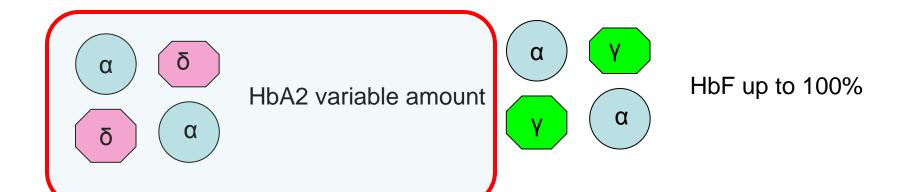


HbA absent or markedly reduced

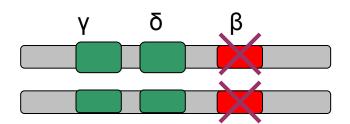
$$\beta \circ \beta \circ \text{Hb A} = 0$$

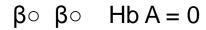
$$\beta$$
+  $\beta$ 0 Hb A ≈ 5%

$$\beta$$
+  $\beta$ + Hb A  $\approx$  10%



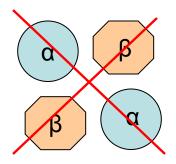
#### Beta thalassaemia major





$$\beta$$
+  $\beta$ 0 Hb A ≈ 5%

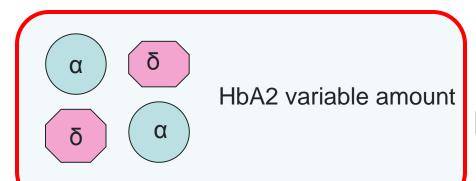
$$β$$
+  $β$ + Hb A ≈ 10%



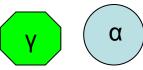
HbA absent or markedly reduced

#### **Features:**

- Transfusion dependant
- •Both parents must have beta thal minor-
- Both have low MCV







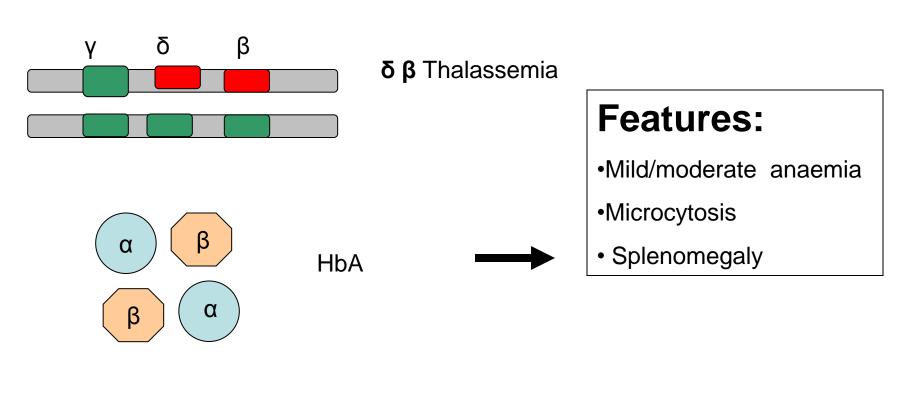
HbF up to 100%

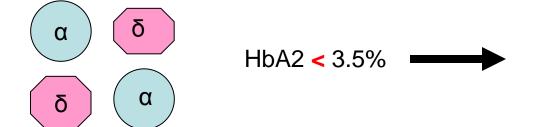
### Beta thalassemia intermedia

### Beta thalassemia intermedia

- Same genetics as in thal major
- But milder symptoms and less transfusion requirement
- Usually benefit from splenectomy
- Causes may include:
  - $-\beta+\beta+$
  - HPHF
  - Concomitant alpha thalassemia defect
  - Others

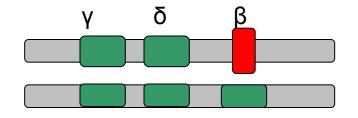
### $\delta \beta$ Thalassemia





### Abnormal chain production

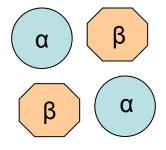
Sickle and others



**Abnormal gene** 

**Abnormal chain production** 

S, C<sup>H</sup>, C, E, D, J, O, I

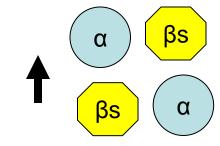


HbA



Hb S, C, E, D, J, O, I

#### MCV might be normal



HbA2 < 3.5% =

### Premarital counseling

β+	β+
βο	βο
δβ	δβ
S	S
CH	CH
C	C
E	E
D	D
J	J
0	0
I	I

### Alpha thalassemia

### Haemoglobin

### Haem

- Iron
- portoporphyrins

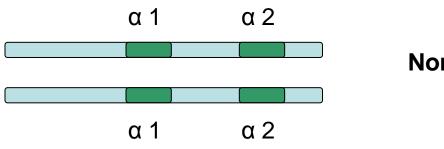
### <u>Globin</u>

- Two alpha with either
- Two beta (Hb A)
- Two gamma (Hb F)
- Or two delta (Hb A2)

Gene on chr 16

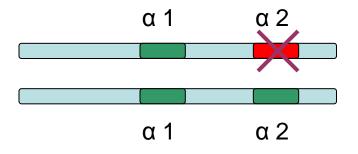
Gene on chr 11

αα, αα



**Normal** 

α-, αα



#### Alph Thalassaemia silent

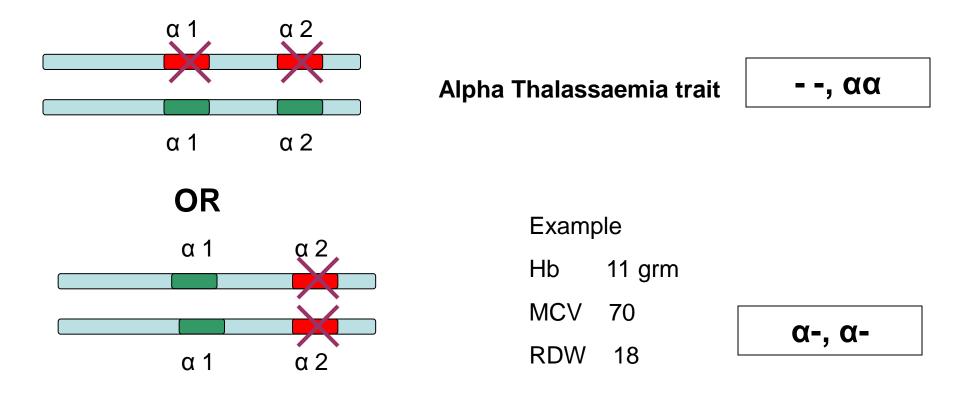
Around 15% of Palestinians

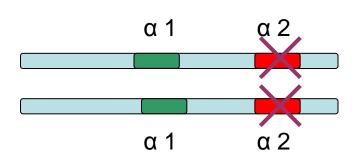
Example

Hb 13 grm

MCV 81

RDW 14.5





α-, α-

#### Alpha Thalassaemia trait

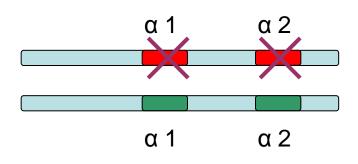
- •Fairly common in Palestine
- Usually both parents have normal MCV (Silent)

Example

Hb 11 grm

MCV 70

**RDW** 18



- -, αα

#### Alpha Thalassaemia trait

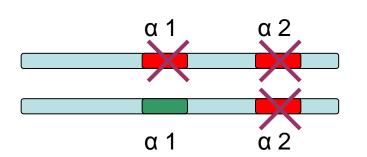
- Very rare in Palestine
- One parent must have low MCV

Example

Hb 11 grm

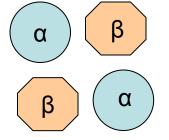
MCV 70

**RDW** 18



- -, α-

#### Alpha Thalassaemia – HBH disease

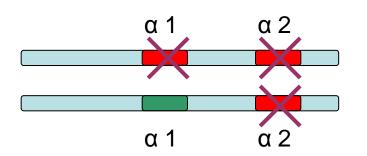


ββ

ββ

HbA

HbH

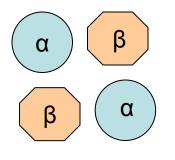


- -, α-

#### Alpha Thalassaemia – HBH disease

#### **Features:**

- Splenomegaly
- One parent has normal MCV and one parent has low MCV



HbA

β β β β

HbH

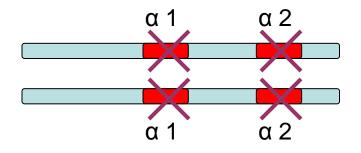
Example

Hb 7.5grm

MCV 65

RDW 21





### Alph Thalassaemia – HB Barts disease

Example

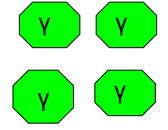
Hb 1-2grm

MCV --

RDW --

Incompatible with life

Death in utero due to hydrops fetalis



Hb Barts

## Causes of Normal Hb A2 in a patient with thalassaemic picture

- Lab error / technique
- Concomitant iron deficiency
- Concomitant alpha thalassaemia
- Alpha thalassaemia minor
- Delta Beta thalassaemia
- Hb Lepore
- Extreme love of couples

### Recommendations

- Study of all new cases of thalassemia major since the introduction of the premarital testing
- CBC on both couples(Not one as it is now) and proceed for Hb electrophoresis if one has low MCV (Needs cost analysis)

# THANK YOU