



Sickle Cell



The University of Zambia
School of Public Health ◦ Family Medicine MMed Program

Schedule of visits

Age	Reviews	Investigation ^(*yearly)
0-6 mo	monthly	FBC
6m-2y	q 3 months	FBC
2-5y	q 6 months	FBC, LFTs, RFTs, *UA
>5y	q 6-12months	FBC, LFTs, RFTs, *UA
Adolescents	Yearly	FBC, LFTs, RFTs, UA
Adults	Yearly	FBC, LFTs, RFTs, *UA
Transcranial ultrasound: 2-16yo if normal repeat yearly		

Must Document

- Frequency of attacks
- PMH
- Siblings with SS
- Social history
 - Access to healthcare
 - Support
 - Religious beliefs
- Blood type
- HIV
- Hepatitis
- Hb electrophoresis
- Height/Weight/Pulse Ox

Education

- Prophylactic medication
- Vaccinations
 - Pneumonia
 - Meningitis
- Spleen palpation
- Precautions against
 - Dehydration
 - Overexertion
 - Exposure to cold
- Delayed puberty
- When to seek care

Prophylaxis



- **Folic acid:** if SCA 5mg daily
- **Anti-malaria:** deltaprim
 - <5y 28.125, 5-10y 56.25, >10y 112.5mg/week
- **Penicillin:** discontinue if >5 without splenectomy and has received pneumococcal vaccines
 - 2-12m 62.5mg, 1-3y 125mg, >3y 250mg bd
- **Hydroxyurea:** all patients with HbSS
 - 20-25mg/kg daily titrated every 4-6 weeks

Pain



- Assess cause, reassurance, warm packs, reposition, massage, distraction
- IV antibiotics if febrile
- **Mild:** paracetamol 15mg/kg QID or adult 1g/ qid
- **Moderate:** mild + ibuprofen 5mg/kg tds OR diclofenac 1mg/kg tds
- **Severe:** moderate + oral morphine 0.2-0.3mg/kg q4 as needed, adult 5-10mg q4 hours
 - Night dose 1.5-2 times higher

Seek Care if



- Enlarging spleen, temperature elevation
- Pallor of skin, lips or nail beds, respiratory symptoms
- Signs of pain or inability to move extremities
- Earliest symptom will most likely be painful swelling of the hands and/or feet

Country Guidelines



SCAN ME

PowerPoint



SCAN ME