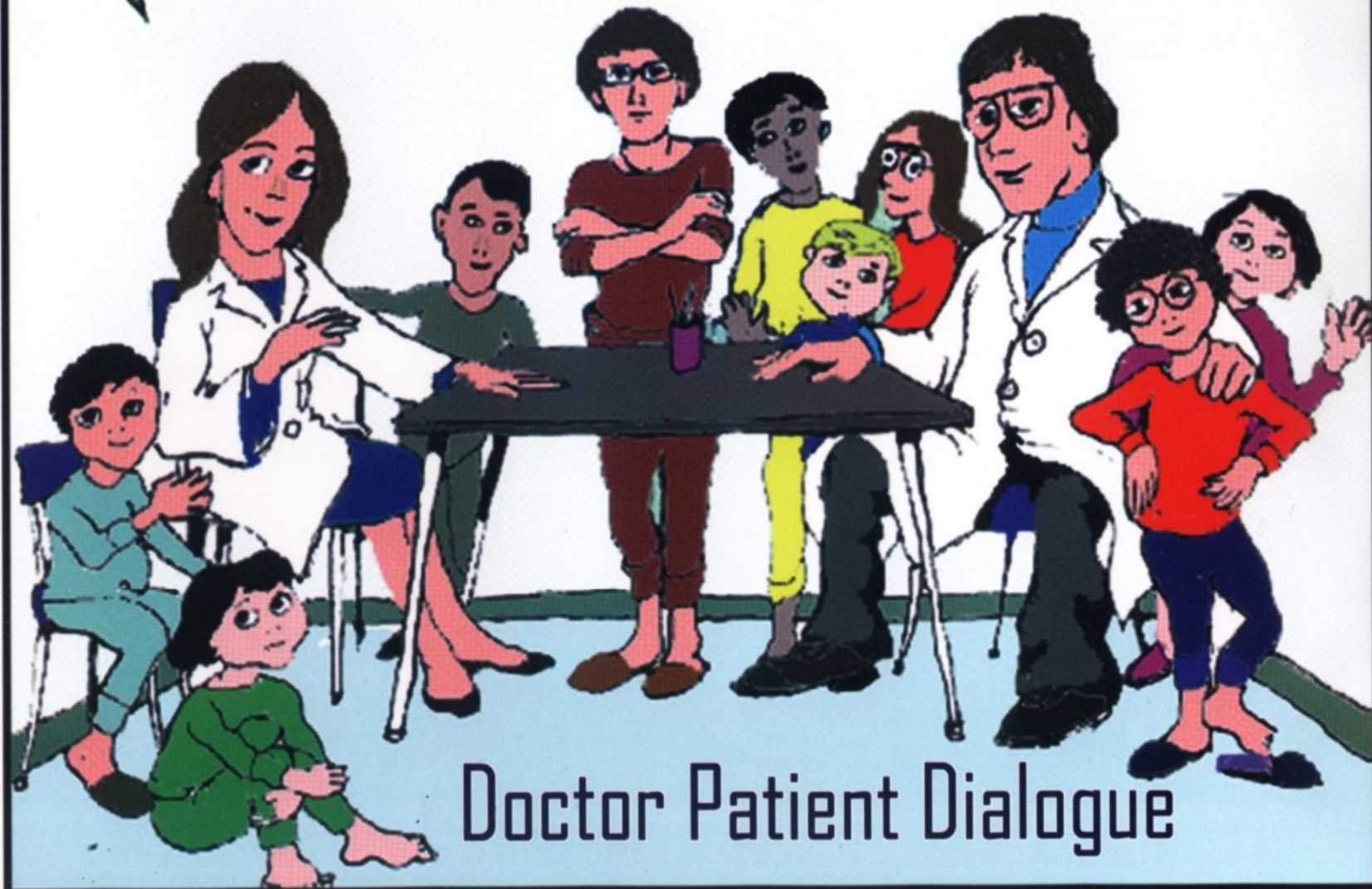


Hallo... Let us introduce ourselves we are Khaled and Sonia we are both physicians working at the hematology (blood) clinic... Each day we spend an hour with the children who come to the clinic for blood transfusion. These children have a lot of questions and for this purpose we wrote this book.



Doctor Patient Dialogue



Especially for those whom I love the most

My dearest thalassaemia patients in Egypt and all over the world, I would like to dedicate this book to you, a hand-out that explains in a simple way what is thalassaemia, how to treat it; and how to prevent it.

The many years that I have spent with you so closely, living your ups and downs; made me only certain that you deserve nothing less than happiness and accomplishment of your goals in life. You have taught me that the key to reach out to your aspirations is Hope and Commitment to therapy.

Sincerely, I have learned that these are your tools for the life you are looking for; whatever your choice is, being a doctor, an engineer, an artist, a mother or a husband.

May you blossom in a prosperous future!

By you, and with you always.

**Prof. Amal EL Beshlawy
Professor of Haematology – Cairo University
President of the Egyptian Thalassaemia Association ETA**



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This Book is Designed and Prepared by

Prof. Amal EL Beshlawy

**Professor of Pediatric Haematology – Cairo University
President of the Egyptian Thalassaemia Association ETA**

&

Dr. Hisham Sedky Abdou

The Egyptian Thalassemia Association (ETA)



Introduction

Thalassemia is a common problem in Egypt. Carrier rate varies between 6 to 10%. It was estimated that more than 1000/1.5 million live birth /year are born with thalassemia in Egypt.

The number of patients in pediatric Hematology clinic of Cairo University hospitals the biggest hematology clinic in Egypt (Abou- El - Rish) is more than 2500. The Egyptian Thalassemia Association (ETA) was established in 1990 motivated and supported by The Thalassemia International Federation (TIF) in the Pediatric Hospital of Cairo University.

The members are the medical staff of our center together with doctors and professor from other Egyptian centers - patients and their parents .

Founder and president of ETA is Professor *Amal El-Beshlawy, Prof. of pediatric Hematology in Cairo-University.*

Honorary president Her Excellency
Mrs Suzan Mubarak
First Lady of Egypt

Goals of ETA

- To improve quality of life and survival to thalassemia patients and support of their families in Egypt.
- To increase the population awareness and doctors awareness to thalassemia in Egypt through lectures, scientific meetings and conferences.
- Help in creating thalassemia centers in Cairo and other governorates in Egypt.
- Social and medical support to the patients and their families.
- Support the medical and research activities in the domain of thalassemia

Resources :

Mainly personal and non governmental organizations donations.



Achievements and activities

- Medical support to the new and follow up patients with financial cost of 200,000 US Dollars/ year.
- Social and financial support to the patients and parents in the religious and social events.
- Delivery of certificates to support the education and employment of our patients (50 / years).
- Held the annual international thalassemia conferences in the 8th of May (International Thalassemia day) which are attended by more than 900 Physicians from Egypt and the Arab countries also attended by our patients in a special session with the international experts.
- Support the sending of our thalassemia patients for bone marrow transplantation in Italy (Dr. Lucarelli center). According to agreement which support the BMT for 50 patients from Egypt free of charge.
- Initiating and supporting the training programs on thalassemia for Egyptian and Arab countries physicians (Iraq and Jordan...etc).
- Initiation and establishment of the Bone Marrow Transplantation Center in the Pediatric Hospital of Cairo University for cure of Thalassemia patients.
- Participating in the international trial for the new oral chelating drug .

Special achievements

- Motivate and support the issue of the Ministerial Decree in 1998 for the employment and education of the patients.

Future Plans

- Activates Bone Marrow Transplantation for our thalassemia patients who has a donor.
- Prevention of Thalassemia by premarital screening and prenatal diagnosis.
- Increasing the population awareness to thalassemia and its prevention.
- Promoting patients compliance to chelation therapy by the availability of the oral easy taken drugs.

Our Mission

- To prevent the increasing No. of new cases of thalassemia in Egypt.
- To secure the cure and good quality of life for our patients.



The Egyptian Thalassemia Association Board of Directors



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Hallo... Let us introduce ourselves we are Khaled and Sonia we are both physicians working at the hematology (blood) clinic... Each day we spend an hour with the children who come to the clinic for blood transfusion. These children have a lot of questions and for this purpose we wrote this book.



Khaled! I was not intending to come to the hospital today, I want to go to the school.



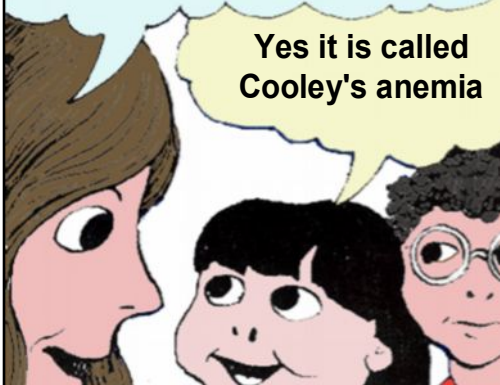
But why should you come to the hospital Aly?

Because we are sick and affected by a kind of anemia



Yes you should come here Because you suffer from a kind of anemia. Do you know its name

Yes it is called Cooley's anemia



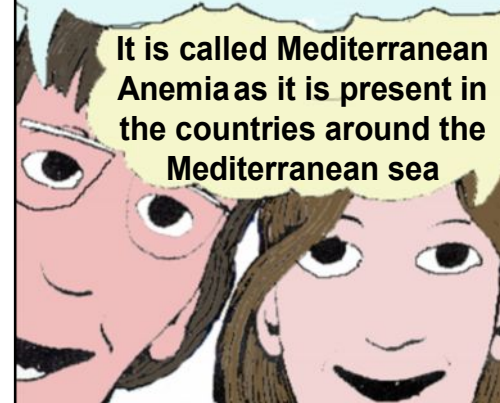
No it is called Mediterranean Anemia that's why it is present in Egypt

No it is Thalassaemia



So it has many names, but what does that mean

It is called Mediterranean Anemia as it is present in the countries around the Mediterranean sea



it is present in the countries around the Mediterranean sea as Egypt, Syria, Greece, Italy, Lebanon, and others
That is why it is called Thalassaemia
Haemia = Anemia Thalass = Sea



It is also called Cooley's anemia as it was discovered by an American Scientist called Thomas Cooley 1925. as he was treating children who came from Italy. This Anemia is also present in Africa and Asia



But what is the meaning of anemia

It means that we do not have enough blood

Or that we need blood transfusion

But what is blood made of

Plasma Red Blood Cells White Blood Cells Platelets

Let us carefully see what the blood is formed of.
Today at 9 am we took a blood sample from Howayda and we put it in this tube



As you see it is no more one color.
The upper part is bright yellow and it is called plasma
and the lower part is dark red as it contains red blood cells



What about the white blood cells?

The no of white blood cells is small in comparison to the red blood cells that is why it is difficult to see them, the same situation is for the platelets.



Omar.. What is the color of the transfused blood to you?

Dark red

Surely it contains red blood cells only



Sonia how blood is available ?

There are people who donate their blood



They are known as blood donors, we separate the red blood cells from the blood then we pack it in the blood transfusion bags. This is why it is viscous and dark red



Let us see from what are the red blood cells formed of and what is its function

These are tiny red balls, they are too small that we can not see them by our eyes



To see these cells we must take a drop and place it on a glass plate

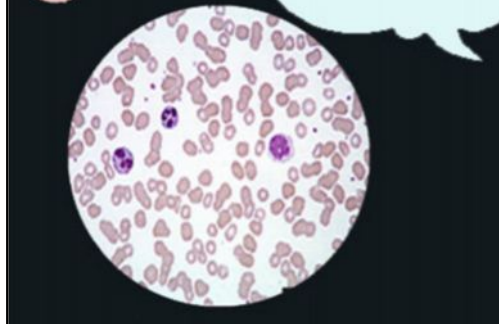


And then to put them under a microscope to see



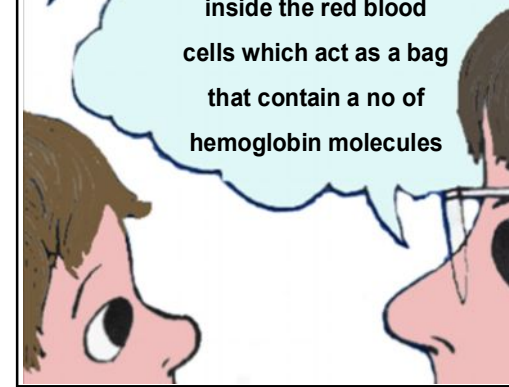
This is what we will see

In this drop of blood there is more than 200 million red blood cell

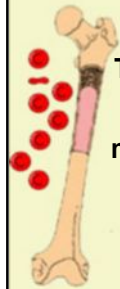


What about Hemoglobin

The hemoglobin is inside the red blood cells which act as a bag that contain a no of hemoglobin molecules



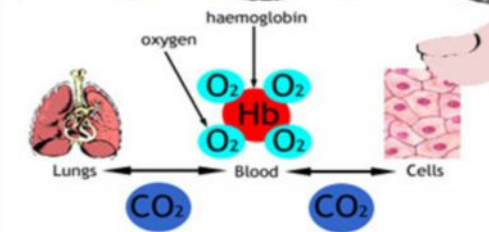
Each molecule of hemoglobin has a molecule of iron attached to it



The red blood cells are formed by the bone marrow and it moves to the blood to circulate in the whole body



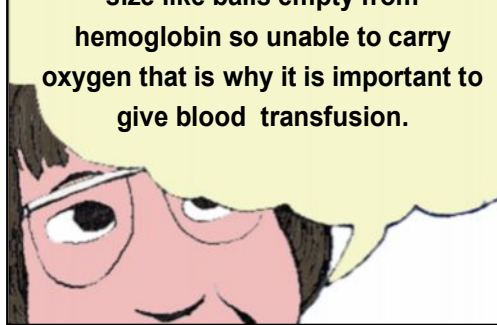
The red blood cells move to the lung where oxygen combines with hemoglobin to be transported to the whole body, and give the energy



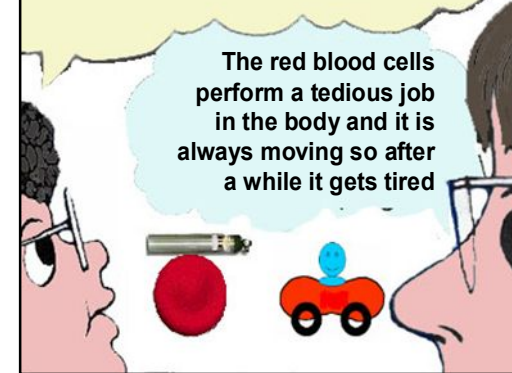
And anemia as we said means that there are no enough red blood cells. Your bone marrow is unable to manufacture potent red blood cells



Anemia means that there are few red blood cells and that this red cells are not fully build. They are smaller in size like balls empty from hemoglobin so unable to carry oxygen that is why it is important to give blood transfusion.



Khaled is it a must to come every month for blood transfusion? Why is it every month?

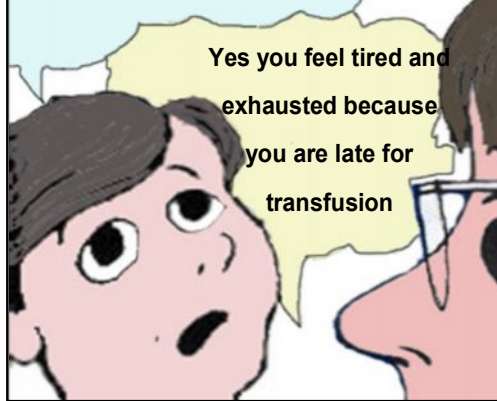


The red blood cells perform a tedious job in the body and it is always moving so after a while it gets tired

In your case the red blood cells received by transfusion live for one month after which it must be replaced by blood transfusion



Yesterday khaled told me that my hemoglobin level is 8 gm and that I am late for transfusion



Yes you feel tired and exhausted because you are late for transfusion

khaled what should be my hemoglobin level ?

A person of your age Hassan his hemoglobin level should be 13 gm. To keep your activity and vitality the hemoglobin level must not be less than 9- 11 gm.



To maintain a good health you must come every month at the transfusion time and never to be late



But if we eat a lot we will not need to come here frequently



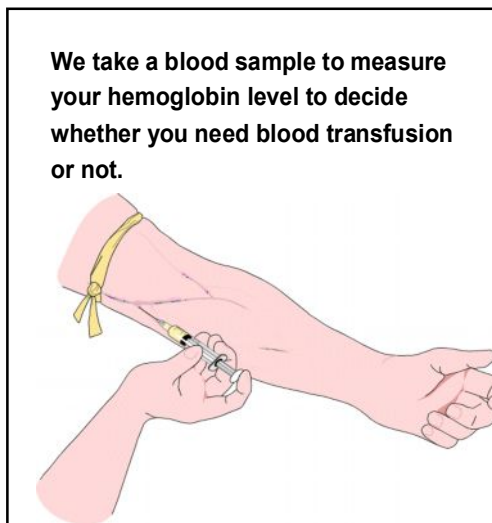
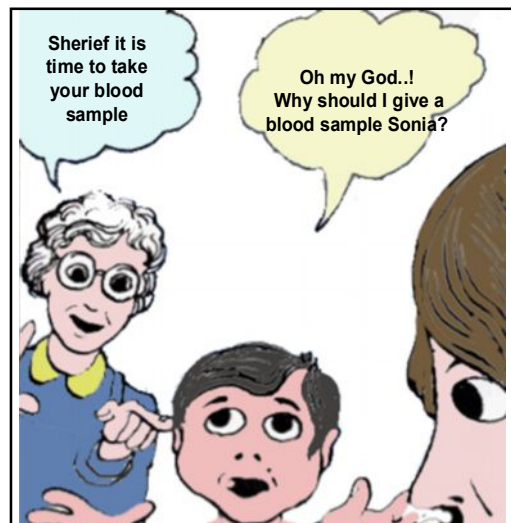
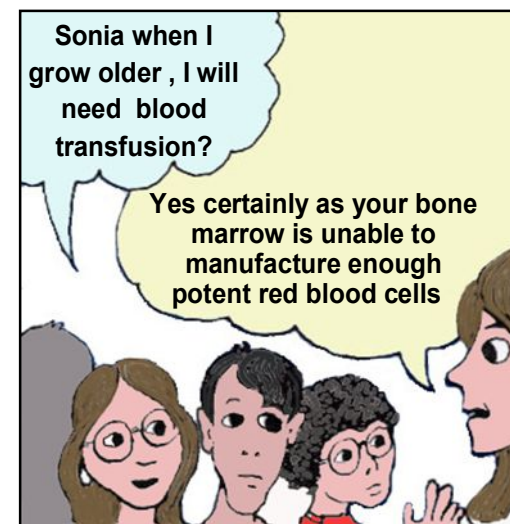
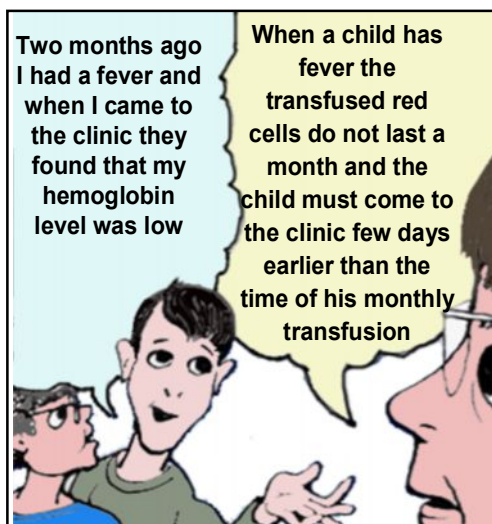
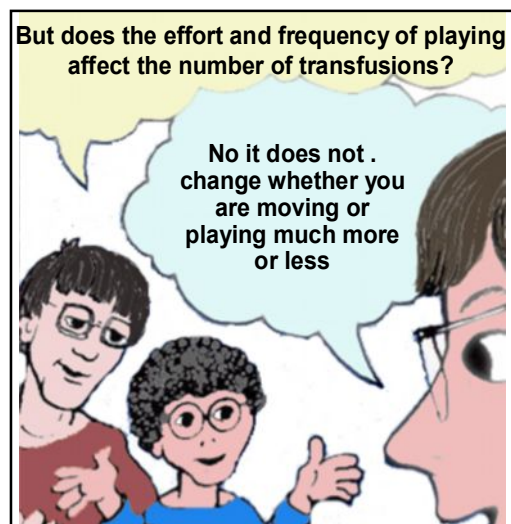
NO

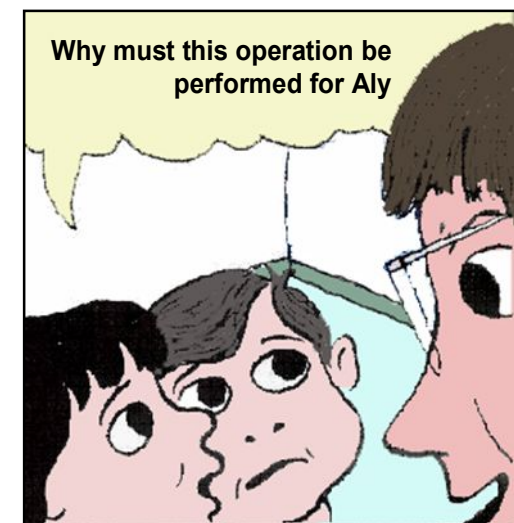
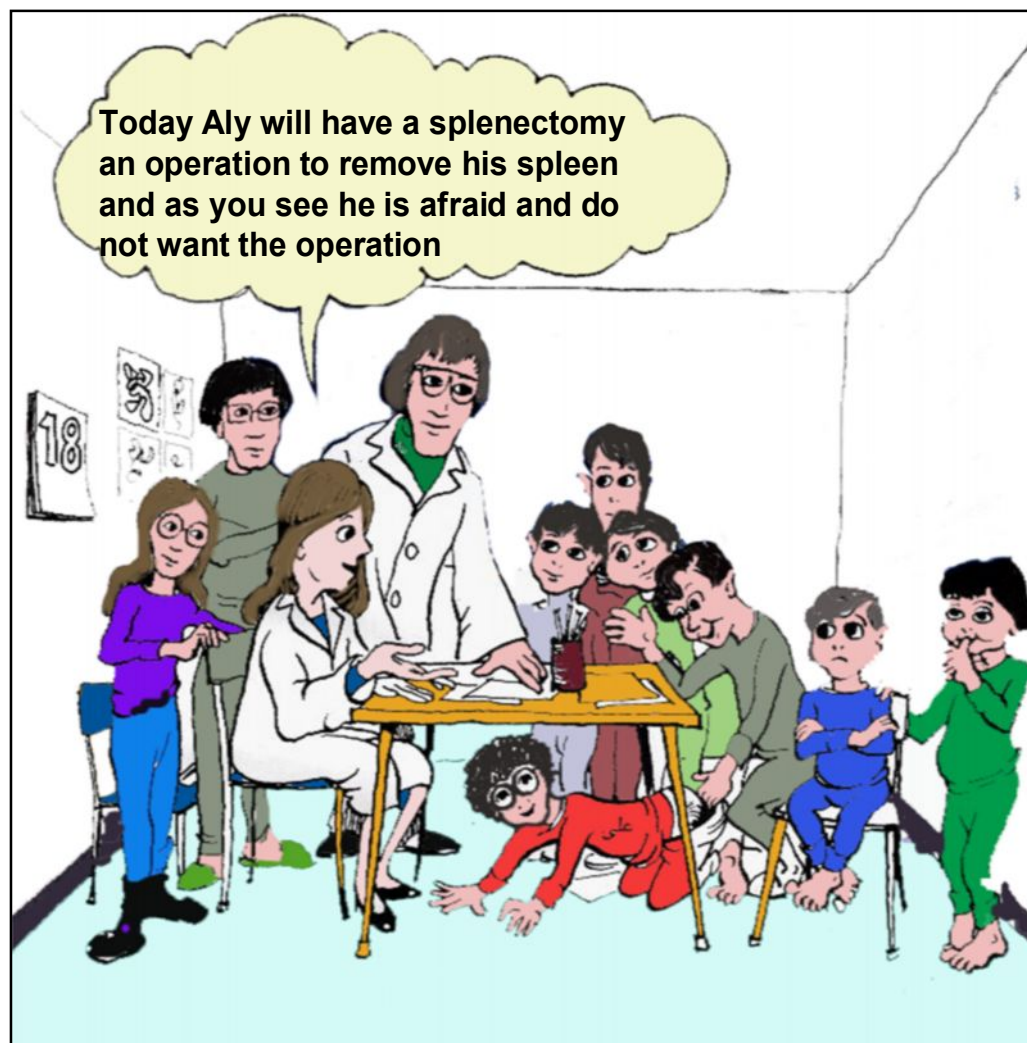
This is not true !



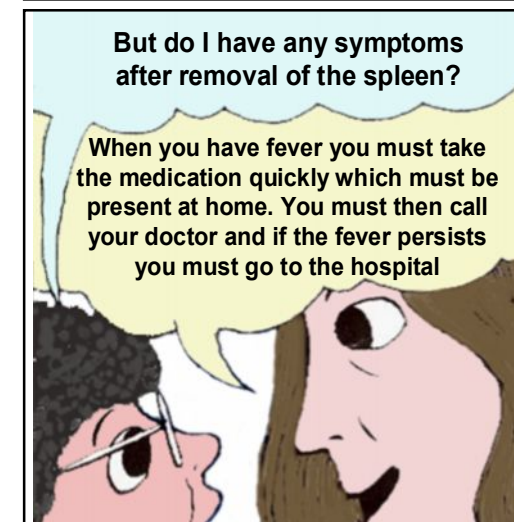
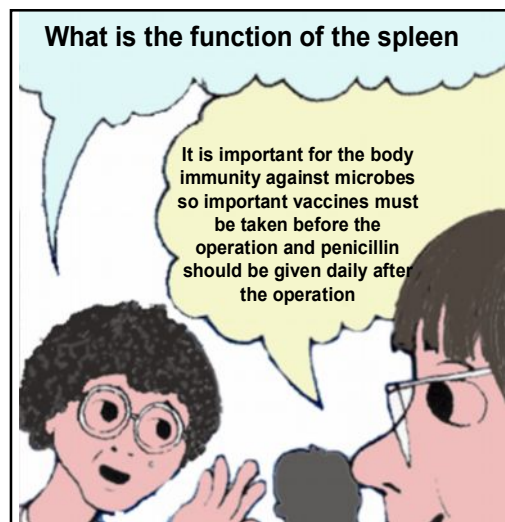
Ahmed is right. You do not need to eat a lot as the food quantity does not affect the blood transfusion







Because Aly did not keep the blood transfusion periods his spleen enlarged and now it breaks more of the blood cells so Aly requires blood transfusion frequently. Meanwhile, Ahmed keeps the dates of blood transfusions so there is no need to remove his spleen.

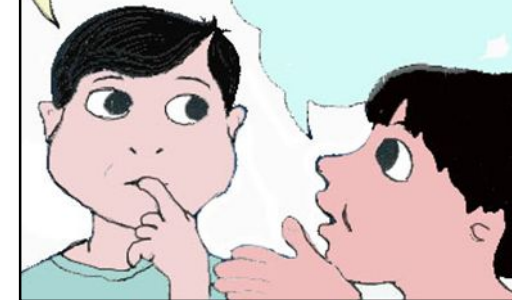


Today we have Salwa she takes the medication that make the body get rid of excess iron



Why should we take these medications?

To get rid of the excess iron in our bodies



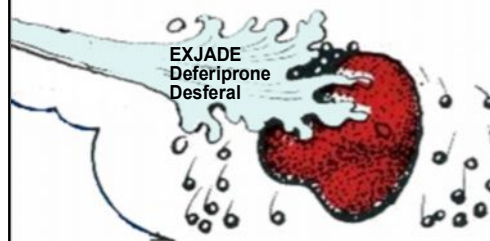
Yes the medications removes the excess harmful iron remaining from the destructed red blood cells in our bodies.



The solid particles of iron which are present with the hemoglobin remains inside our bodies then it accumulate and deposited in the heart, liver, glands and under the skin



And as we all know the iron particles are solid in nature mean while the body organs have to be flexible to perform their functions that is why we need a drug to remove these iron particles from our bodies.



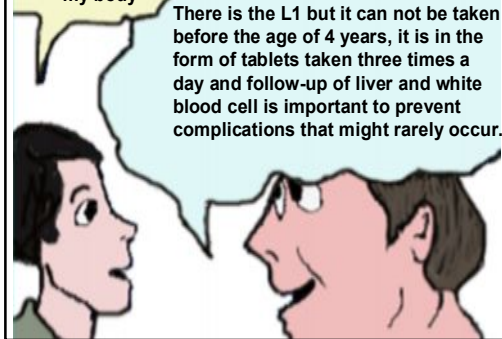
The name of the drugs are EXJADE, Deferiprone (L1) and Desferal



EXJADE and (L1) can be taken by mouth while Desferal is taken by injection under the skin by a pump for a period of 8-10 hours each day in five days of the week, many people find this commitment difficult, although very effective in getting rid of iron.



What are the drugs taken by mouth?
I can not regularly take the desferal and iron will accumulate in my body



There is the L1 but it can not be taken before the age of 4 years, it is in the form of tablets taken three times a day and follow-up of liver and white blood cell is important to prevent complications that might rarely occur.

What about the EXJADE which is taken by mouth



It is a new medicine very easy to use. Thalassemia patients two years old can take it

EXGADE has no taste and is taken once a day for half an hour before breakfast, different doses of 125 gm and 250 gm, 500 gm are present and is given according to weight of the patient and the quantity of iron accumulated in his Body.



•It is available in three concentrations 125 mg, 250mg and 500 mg tablets



It dissolves in water or orange juice using a glass cup and a plastic spoon

In 100- 200ml according to the drug concentration

Is the EXJADE effective in removing iron from my body?

Yes EXJADE is very effective it gets rid of excess iron in our bodies, it is taken by mouth once daily and its action lasts for 24 hours



EXJADE is active for 24 hours and get rid of the harmful iron which is present always in the blood and infiltrate important organs as the liver, heart and endocrine glands responsible for growth and thus these organs do not perform their functions to well.



Iron available in many foods and we must be careful in the quality of the food we eat for example, there is a lot of iron in the liver, red meat and some other foods. And we must know that drinking tea during eating reduces the absorption of iron



Did you hear that Salwa? There are many things you should do may be you do not like to do but this will keep you healthy and live a normal life



You need to do certain tests
over a period of time to
assess the stored iron, heart,
liver functions and growth



Good Bye See you later



Why are we (I and my brother)
sick while my sister and other
brother are not?

Salwa wants to
ask a question



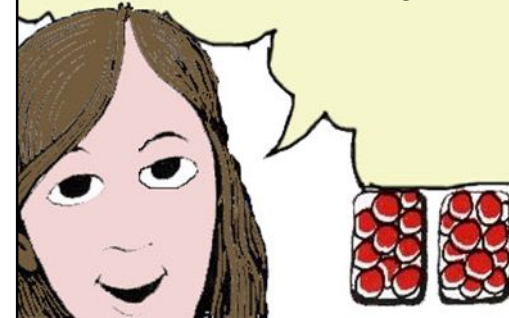
Mediterranean anemia (Thalassemia) is a
hereditary disease that means it is
passed from the parents to their children



You have heard the word carrier as
other children but you did not
understand its meaning .



Let us see if this is the case in the
thalassemia.. To manufacture
normal healthy red blood cells we
must have the two normal signs



If the two signs are normal then the
person manufacture normal red cells
and pass to his child normal signs



But if one sign is normal and the
other is defective that means that
the person is a carrier. He
manufacture normal blood cells but
could pass the defective sign to his
child



But if the parent is sick like you
he can only give his son the
defective sign



Let us see now how to answer Salwa's question. Since her father and mother are carriers of the disease character and they are both normal they can pass defective signs to their children.



When Hanan was born each parent gave her the normal sign. But when Tarek was born each parent gave him the affected sign
When Maged was born his share was an affected sign and a normal sign.



But why this happened to me?

Because your father and mother did not know that they had an affected sign even if they knew they could not control which sign to give to their child. That is why we should examine the fetal cells in early pregnancy



That is why I should not marry a carrier or an affected person , I should marry a normal non affected person

Yes if you marry an affected person all your children will be affected.



If you marry a normal person all your children will be carriers.

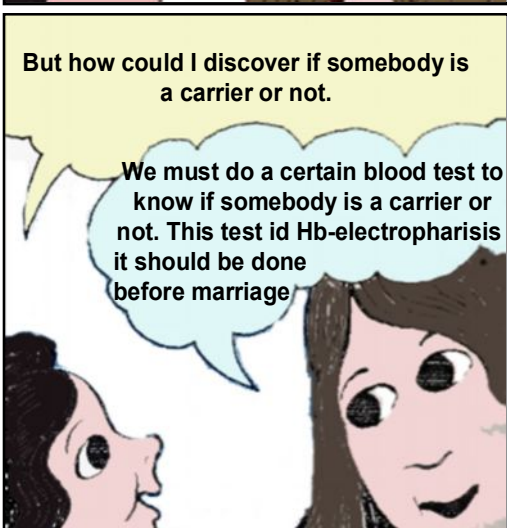


If you marry a carrier your children will be carriers or affected by the disease



But how could I discover if somebody is a carrier or not.

We must do a certain blood test to know if somebody is a carrier or not. This test is Hb-electrophoresis it should be done before marriage



Good bye .. If you have any question you can visit your doctor at the hospital



Good Bye
See you later





**With the Complement of
The Egyptian Thalassemia Association (ETA)**