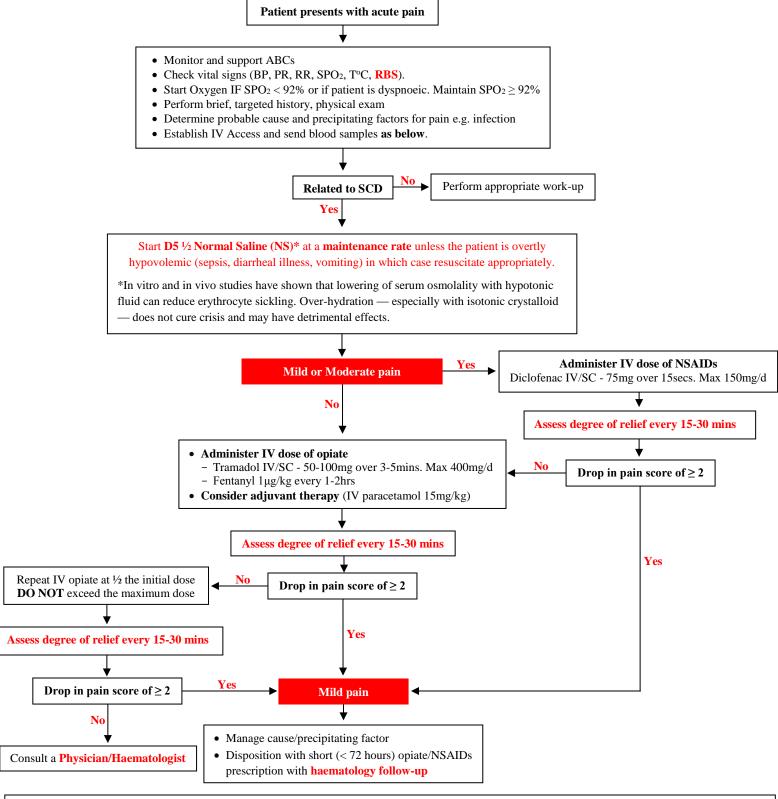
35. Management of Pain in Sickle Cell Disease Algorithm

This clinical pathway is intended to supplement, rather than substitute for, professional judgment and may be changed depending upon a patient's individual needs. Failure to comply with this pathway does not represent a breach of the standard of care.



Investigations:

Full Blood Count (FBC);

- Most patients with HbSS disease have a baseline haemoglobin level of 6 to 9 g/dL and tolerate this level of anaemia well because of physiologic adaptations.
- WBC is **NOT** a particularly sensitive nor specific indicator for infection

 $\textbf{Reticulocyte count -} \ normally \ elevated \ (>\!5\%). \ Levels < 5\% \ are \ a serious \ cause \ for \ concern \ as \ it \ signifies \ bone \ marrow \ hypo \ activity.$

In patients with worsened scleral icterus, back pain, fever, or signs that suggest haemolysis, additional tests would include; LFTs and LDH

Renal function tests

Blood typing and screening is necessary if haemoglobin has dropped > 1 mg/dL below baseline or if there is concern that the patient may need a transfusion. Indications for blood transfusion; Severe anaemia - \downarrow Hb > 2g/dL below steady state or < 6g/dL; Acute chest syndrome; Priapism; CVA in children; Before surgery