

Presurgery Transfusion Cuts Risk In Sickle Cell

Michael Smith

Sickle cell patients who need low- or medium-risk surgery should be offered a transfusion first, a researcher said here.

That's because, in an abruptly terminated clinical trial, patients who did not have a preoperative transfusion had a surprisingly high rate of serious adverse events, according to Jo Howard, MD, of Guy's and St. Thomas Hospital in London, and colleagues.

The trial was halted with just over 15 percent of its planned 400-patient enrollment completed because of excess adverse events, including several cases of acute chest syndrome, Howard said at the annual meeting of the American Society of Hematology. Activate MedPage Today's CME feature and receive free CME credit on medical stories like this oneAction Points

Among other differences, 27.3 percent of patients in the nontransfusion arm of the study had acute chest syndrome, compared with 2.9 percent in the transfusion arm.

Surgery is risky for sickle cell patients, Howard noted, but there has been no consensus on whether they should be offered a pre-op transfusion to reduce the risk, and, indeed, the use of transfusions has been falling.

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