

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

اقْرَأْ بِاسْمِ رَبِّكَ الَّذِي خَلَقَ (1) خَلَقَ الْإِنْسَانَ
مِنْ عَلَقٍ (2) اقْرَأْ وَرَبُّكَ الْأَكْرَمُ (3) الَّذِي عَلَّمَ
بِالْقَلَمِ (4) عَلَّمَ الْإِنْسَانَ مَا لَمْ يَعْلَمْ (5)

(سورة العلق (الآيات من 1 الي 5

Dedication

To my darling parents who always support me
and encourage me to success.

To my helpful sisters for their endless help and
motivation

To my friend and collages who gave me the
possibility of completing this thesis.

To every one who help me to learn new things
and to reach this level.

Acknowledgment

I would like to thank Allah who guided my steps in this study.

I would like to thanks Dr. Mohilden for his supervision, suggestions and continuous support throughout the course of this work.

My appreciation also extended to all doctors, sisters medical staff of Renal dialysis unit, AlRibat hospital for their help and assistant during this study.

I wish to express my thank to Ustaz Gassim for helping me during this study.

Also I would like to thank all my friends and colleagues for their encouragement and support during the preparation of this thesis.

Abstract

This is a hospital based analytical descriptive case-control study was conducted in Al Ribat hospital during the period from March to July 2011, to determine the morphological pattern of anemia and iron status among anemic chronic renal failure patients attending Ribat hospital. Blood samples were collected under sterile condition from one hundred patients with chronic renal failure as case group, and fifty from healthy individuals as control group, the hematological parameters and serum ferritin were measured using automated machine sysmex kx 21 and chemistry analyzer selectra X-L respectively. Data obtained were analyzed using software program SPSS.

The results showed that the means of hemoglobin (9.4 g/dL), hematocrit (28%) and RBCs count (3.2×10^{12} cells/L) of case group were statistically significant lower than means of control p value (< 0.05).

The study showed that the frequency and percent of anemia among case group 71 (71%) were anemic and remaining 29 (29%) were non anemic individuals.

Patients with chronic renal failure develop a normocytic normchromic anemia (100%).

The study showed that a highly significant level of serum ferritin in chronic renal failure patient the mean 621 μ g/L when compared to the mean of control group the mean 73 μ g/L, p value (< 0.05).

ملخص البحث

أجريت هذه الدراسة التحليلية الوصفية (حالة وحالة ضابطة) بمستشفى الرباط الوطني خلال الفترة من مارس حتى يوليو 2011. هدفت الدراسة لتحديد الانماط المورفولوجية لفقر الدم وحالة الحديد بين مرضى الفشل الكلوي الذين يترددون علي مستشفى الرباط. أخذت عينات دموية من مائة مريض مصابين بالفشل الكلوي المزمن وخمسون عينة من اشخاص اصحاء كحالة ضابطة وتم قياس مكونات الدم بالإضافة لمستوي الحديد باستخدام جهاز عدد الخلايا وجهاز التحليل الكيميائي علي التوالي وتم تحليل النتائج باستخدام برنامج الحزم الاحصائية للمجتمع. وكشفت الدراسة أن هناك انخفاض ذو دلالة معنوية في متوسطات خضاب الدم (g/dl 9.4) والخلايا المكدسة (28%) من الدم الكلي وعدد كريات الدم الحمراء ($10 \times 3.2 \text{ cells/L}$) عند مقارنتها مع المجموعة الضابطة (P value 0.00). وأشارت الدراسة إلى أن انتشار فقر الدم بين المرضى المصابين بالفشل الكلوي كانت 71 حالة (71%) و 29 (29%) المتبقية هم الأفراد غير مصابين بفقر الدم. وجد ايضا أن نوع فقر الدم من الناحية المورفولوجية المنتشر بين مرضى الفشل الكلوي المزمن هو نوع فقر دم السوي. اوضحت الدراسة ان هناك زيادة في مستوي الحديد في الدم عند المرضى المصابين بالفشل الكلوي المزمن عند مقارنه بالحالة الضابطة وهذا المستوي العالي للحديد أسبابه كانت نسبة لتلقيهم كميات من الحديد.

List of Contents

No.	Contents	Page
الاية		I
Dedication		II

Acknowledgement	III
Abstract (English)	IV
Abstract (Arabic)	V
List of Contents	VI
List of Tables	XI
List of Figures	X
List of abbreviations	XI
Chapter One	
Introduction and literature review	
1.1	General Introduction 1
1.2	Literature review 3
1.2.1	Anemia 3
1.2.1.1	Definition of Anemia 3
1.2.1.2	Classification of Anemia 3
1.2.1.2.1	Morphological Classification of Anemia 3
1.2.1.2.2	Etiological Classification of anemia 4
1.2.1.2.3	Physiological Classification of anemia 6
1.2.1.3	Signs and symptoms of anemia 7
1.2.1.4	Frequency of Anemia 8
1.2.1.5	Causes of Anemia 8
1.2.1.6	Diagnosis of anemia 9
1.2.2	Renal failure 10
1.2.2.1	Causes of renal failure 10
1.2.2.2	Acute renal failure 11
1.2.2.3	Chronic renal failure 12
1.2.2.4	Diagnosis of chronic renal failure 13
1.2.2.5	Anemia in chronic kidney disease 14
1.2.2.6	Management of anemia in (CKD) 15
1.2.3	Erythropoietin 16
1.3	Rationale 19
1.4	Objectives 20
1.4.1	General objectives 20
1.4.2	Specific objectives 20
Chapter Two	
Materials and methods	
2	Materials and Methods 21
2.1	Study design 21
2.2	Study population 21
2.3	Sample size 21

2.4	Inclusion criteria	21
2.5	Exclusion criteria	21
2.6	Sample collection	21
2.7	Ethical consideration	22
2.8	Complete blood count	22
2.8.1	Principle of sysmex KX-21 hematological analyzer	22
2.8.2	Thin blood films spreading and staining	23
2.9	Serum ferritin	23
2.9.1	Serum ferritin principle and value	23
2.9.2	Selectra-Xl back ground and principle	23
2.10	Statistical analysis	24
Chapter Three		
Results		
3	Results	25
Chapter Four		
Discussion		
4	Discussion	37
Chapter Five		
Conclusion and recommendations		
5	Conclusion and Recommendations	
5.1	Conclusion	39
5.2	Recommendation	40
Chapter Six		
References		
6.0	References	41
	Appendices	44

List of Tables

No.	Title	Page
3-1	Frequency and percent of demographic data of participants	25
3-2	Mean, STD, minimum and maximum of Hb g/dl, Hb% RBCs count, and PCV, MCV, MCH, MCHC, age and serum ferritin among case group	26
3-3	Mean of Hb g/dl, Hb% RBCs count, and PCV, MCV, MCH, MCHC, age and serum ferritin among control group	27
3-4	Relation between case and control in hemoglobin level (g/dl), Hb (%), RBCs count, PCV and serum ferritin	28
3-5	Frequency and percent of anemia among case group	29
3-6	Frequency and percent of morphological pattern of anemic group	29
3-7	Relation between anemic and control in hemoglobin level (g/dl), Hb (%) RBCs count, PCV, MCV, MCH, MCHC and serum ferritin	30

List of Figures

No.	Title	Page
3-1	The mean Hb (g/dl) in age group adult and elderly groups	31
3-2	The mean RBCs count in age group adult and elderly groups	32
3-3	The mean PCV in age group adult and elderly groups	33
3-4	The mean Hb (g/dl) among sex figure	34
3-5	The mean RBCs among sex	35
3-6	The mean PCV among sex	36

List of abbreviations

K² EDTA	Ethelene Diamine tetra acetic acid
RBCs	Red Blood Cells
WBCs	White Blood Cells
HICN	Cyano met hemoglobin
PCV	Packed Cell Volume

FL	Femto litre
RPI	Reticulocyte Production Index
CBC	Complete Blood Count
CKD	Chronic Kidney Disease
ESRD	End Stage Renal Disease
ARN	Acute Renal Necrosis
GFR	Glomerular Filtration Rate
CKD C	Chronic Kidney Disease
PC	Programmed Computer