

# Anaemia





# Definition and Etiology




Anaemia is defined as an absolute decrease in the red cell mass as measured by RBC count, hemoglobin concentration, and PCV.

It can develop from loss, destruction, or lack of production of RBC




# Anaemia- Classification

- **Anemia is classified as**
  - **Regenerative**
  - **Non regenerative**
- 




# Regenerative anaemia

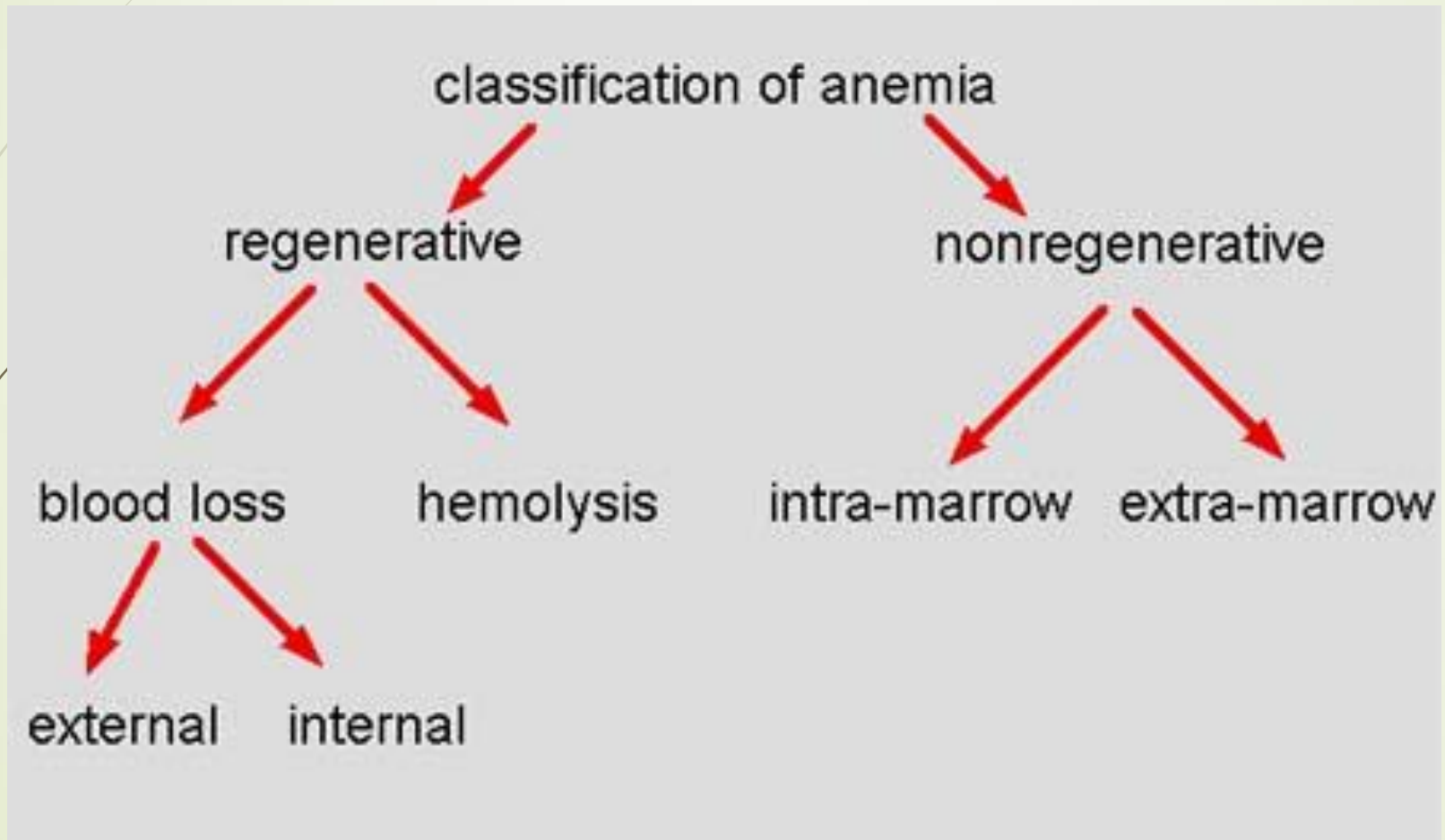
- ▶ In a regenerative anemia, the bone marrow responds appropriately to the decreased red cell mass by increasing RBC production and releasing reticulocytes.
  - ▶ Anaemias due to hemorrhage or hemolysis are usually regenerative.
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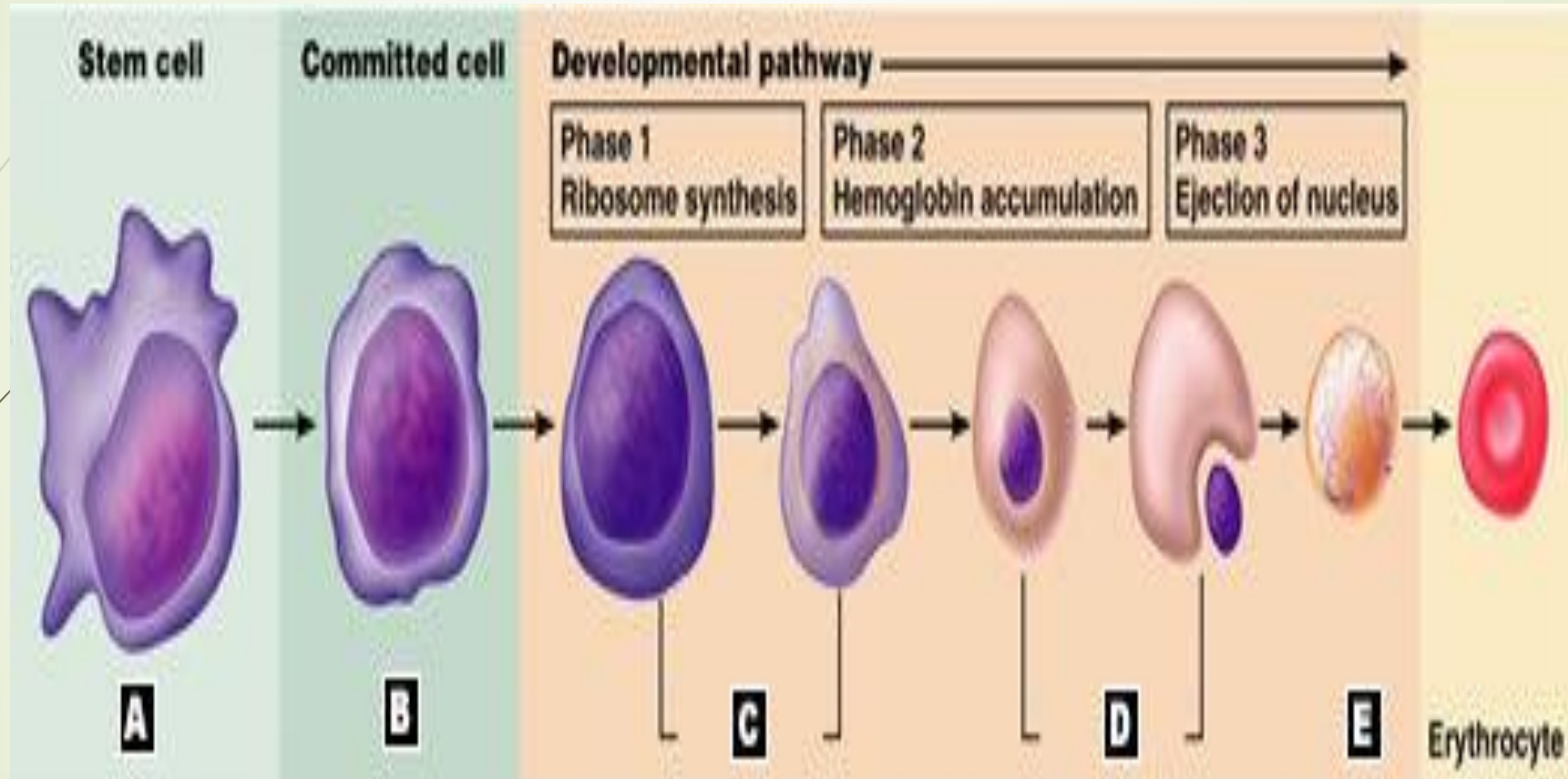
# Non – regenerative anaemia

- ▶ In a non regenerative anaemia, the bone marrow responds inadequately to the increased need for RBC.
  - ▶ Anaemias that are caused by decreased erythropoietin or an abnormality in the bone marrow are non regenerative
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# Classification

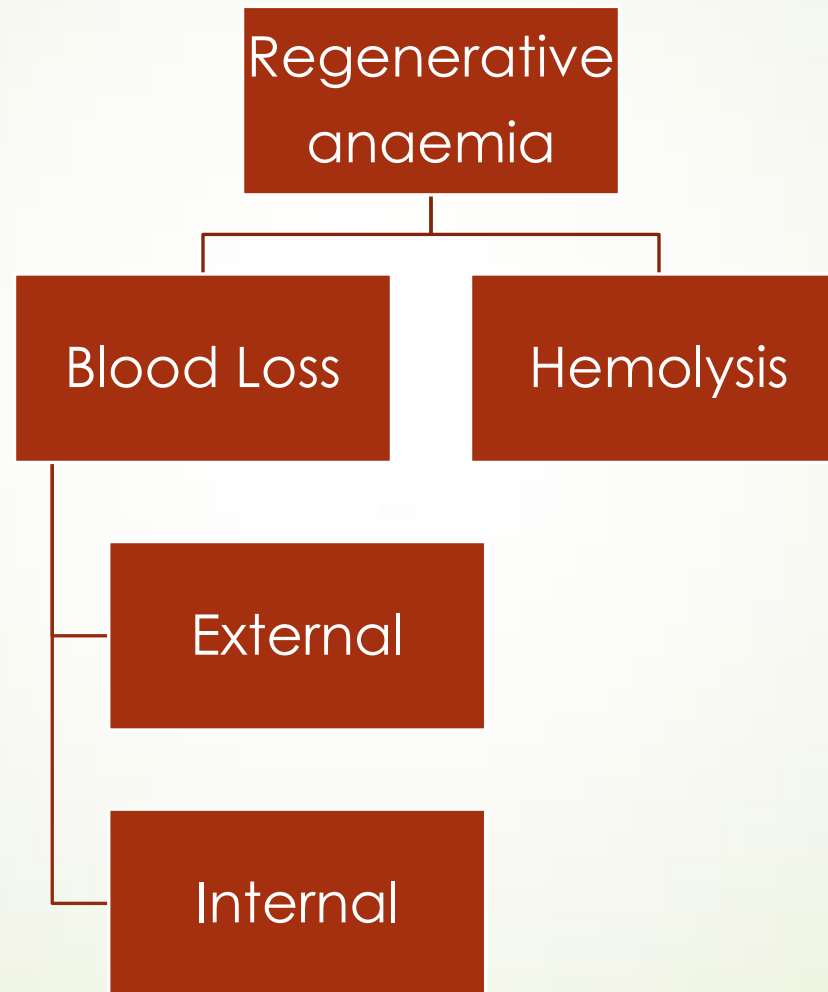


# Developmental process of RBC



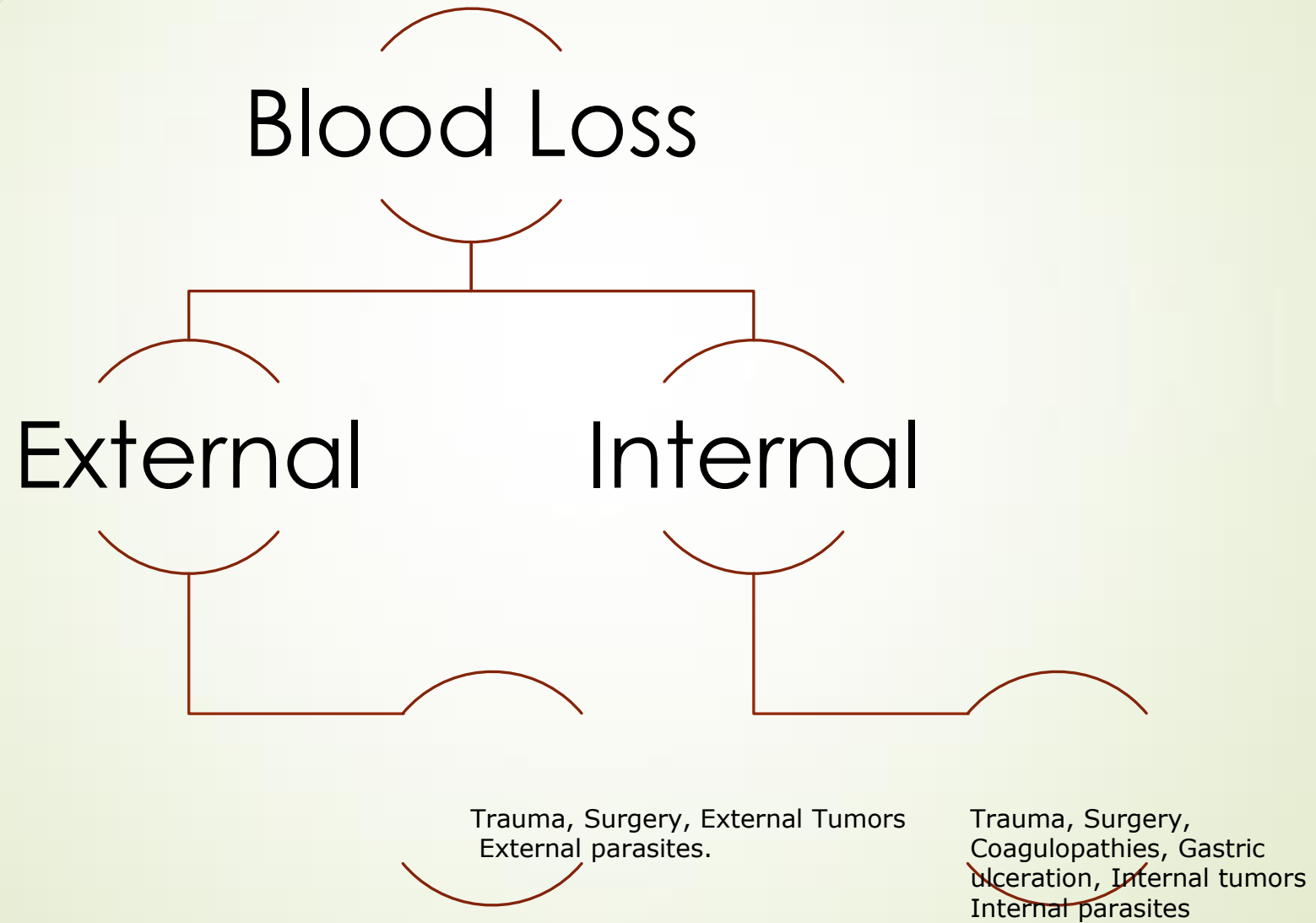
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# Regenerative anaemia

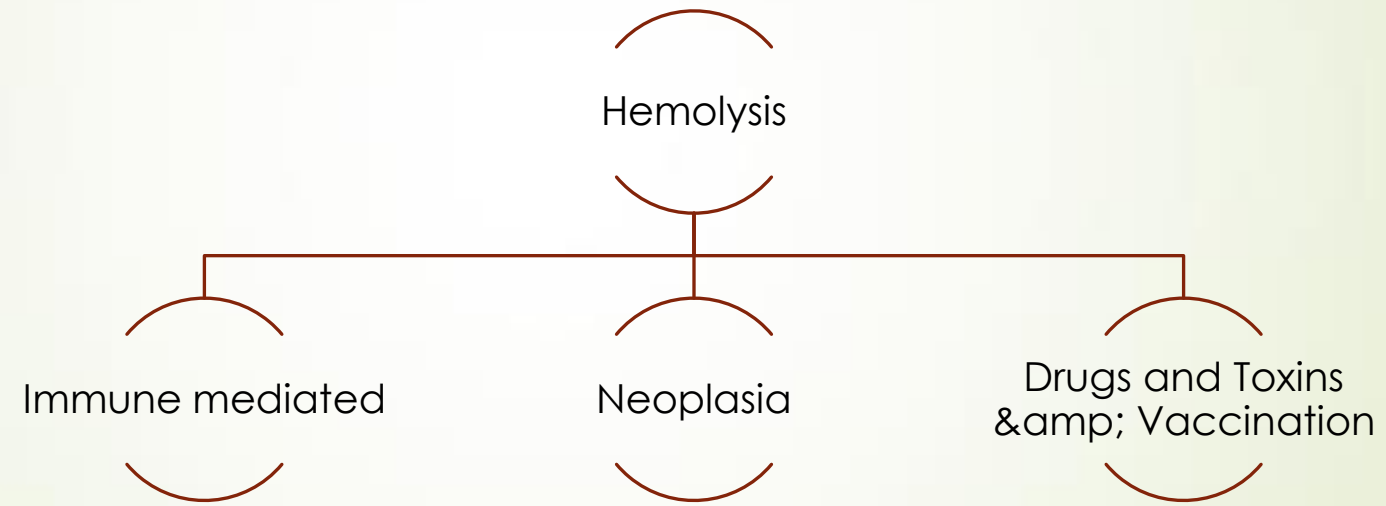




# Blood Loss



# Hemolysis



# Toxic Cause of hemolysis

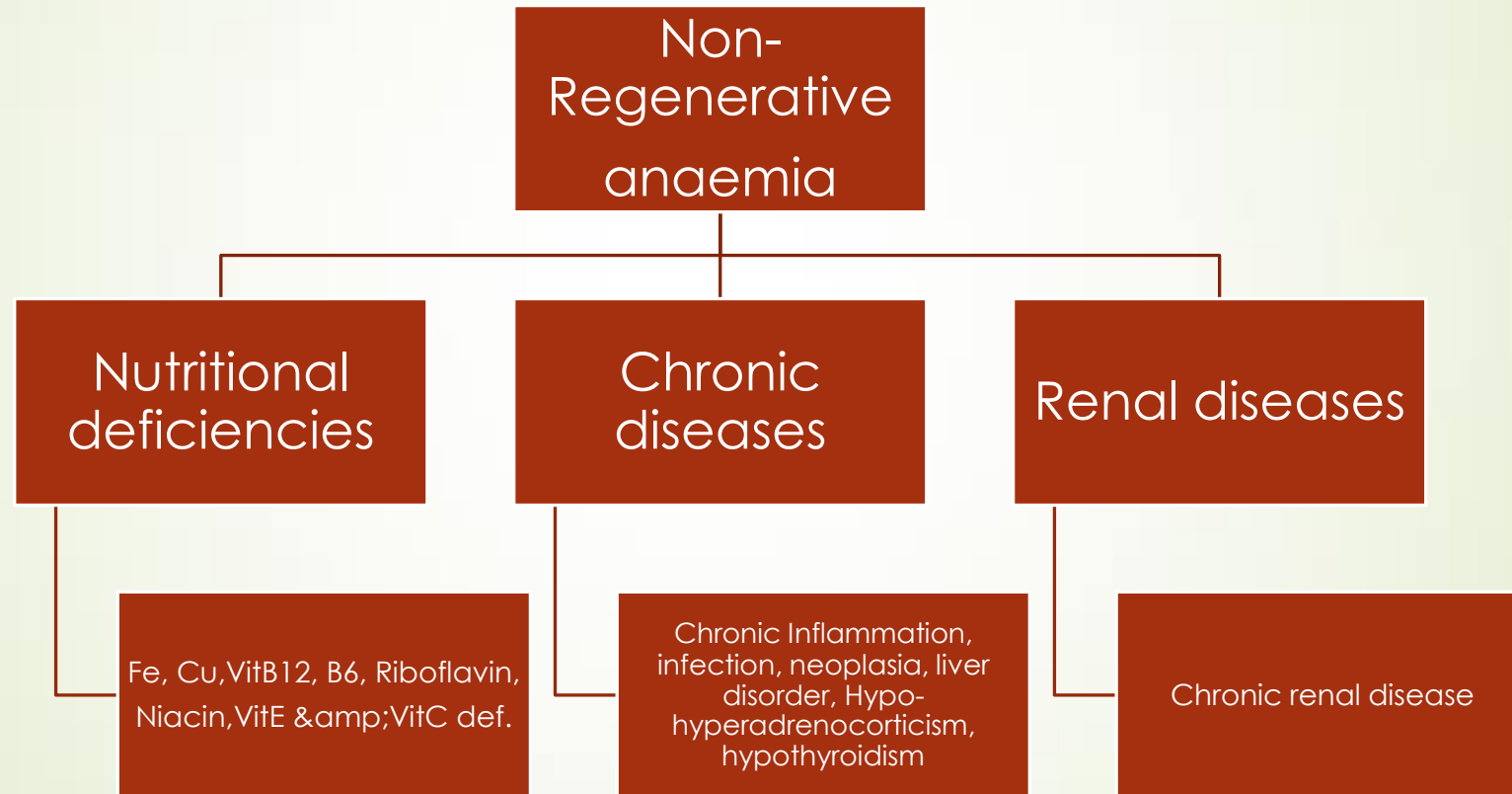
<b>Drugs</b>	<b>Plant products</b>	<b>Chemicals</b>
Acetaminophen, benzocaine, dapsone, nitrofurans, primaquine, propofol, quinacrine	Bracken fern sweet clover	Lead
Aspirin, naproxen	onions,	Selenium
Amphotericin, cephalosporins, chloramphenicol, estrogen, fenbendazole, griseofulvin, meclofenamic acid, phenobarbital, phenothiazine, phenylbutazone, , quinidine, sulfonamides, thiacetarsamide		Copper Zinc



# Infectious cause

<b>Bacterial</b>	<b>Viral</b>	<b>Rickettsial</b>	<b>Protozoal</b>
Clostridium Leptospira	Equine infectious anaemia. Feline leukemia virus	Mycoplasma Anaplasma Ehrlichia	Babesia Theileria Trypanosoma

# Non-regenerative anaemia






# Clinical signs :

- Lethargy and exercise intolerance
- Mucous membrane pallor
- Tachycardia
- Low grade haemic murmur
- Prominent femoral pulse
- Tachypnoea
- Episodic collapse (excitement or stress-induced )
- Jaundice (in haemolytic anemia)



# Pathogenesis of anemia

- Reduced oxygen carrying capacity of the blood.
  - Inadequate tissue oxygenation
  - Development of clinical signs
  - Compensatory mechanism
- 



# Diagnosis:

- Hb and PCV value measurement
- Complete Blood Count
  - **Red Blood Cell morphology**
  - **Reticulocyte count**
  - **Erythrocytic Indices**
  - **Platelet count**





# Packed Cell Volume

- PCV - 30 to 37 – mild anemia,
- PCV - 20-29- moderate anemia
- PCV - < 20 – severe anemia

PCV - < 12 poor prognosis



# Red cell morphology

<b>Type of anemia</b>	<b>Red cell morphology</b>
<b>Acute blood loss</b>	<b>Normocytic , normochromic No evidence of regeneration for 3-4 days.</b>
<b>Chronic blood loss</b>	<b>Hypochromasia, microcytic if iron deficiency present</b>
<b>Hemolytic</b>	<b>Spherocytosis</b>
<b>Non-regenerative</b>	<b>Normocytic, normochromic</b>



## Reticulocyte count

Indicates degree of regeneration

### Erythrocytic Indices

- *Mean Corpuscular Volume (MCV)*
- *Mean Corpuscular Hemoglobin Concentration (MCHC)*

**Platelet count < 20,000/  $\mu$ l**

- **Thrombocytopenia**
- **DIC**
- **Intramedullary or extramedullary suppression of platelet production.**



## **Faecal examination/ faecal occult blood test**

Severe upper gastrointestinal bleeding - black, tarry feces

## **Bone marrow Evaluation**

Nonregenerative anemia


Leukopenia

Unexplained thrombocytopenia

Pancytopenia



# Treatment of anemia

- ▶ Emergency stabilization
  - ▶ Blood transfusion
  - ▶ Specific treatment of underlying cause
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# Blood transfusion

- **PCV < 15%**
- **Selection of donor animals**
- **Major and minor cross**
- **Blood collection**
- **Blood transfusion**



# Other treatments-

## Anabolic Steroids

- Nandrolone decanoate ( 1 to 2 mg/kg/week, im)
- Oxymetholone – 1-5 mg/kg, PO, every 18-24 hr
- Stanozolol (dogs: 1-4 mg, PO, bid)



# Hemostatics

- **Astringents**
- **Epinephrine** and **norepinephrine**
- **Vitamin K**
- **Calcium therapy**
- **Desmopressin**
  
- **, Component therapy:**
  - Fresh Frozen Plasma and Platelet therapy