

Title: ENDOCRINE DISORDER – A CHALLENGE FOR THALASSEMIC PATIENTS

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Thalassemia with an increasing incidence now a days, caused by the reduced (beta^{+}) or absent (beta^{0}) synthesis of the beta globin chains of the hemoglobin tetramer resulting in variable phenotypes ranging from severe anemia to clinically asymptomatic individuals. The extent of imbalance between the alpha and non-alpha globin chains is responsible for further severity. Individuals usually present with vast variety of clinical symptoms such as severe anemia, growth retardation, pallor, jaundice etc. In recent years, several authors reported a high incidence of endocrine abnormalities in children, adolescents and young adults suffering from thalassemia major. However the incidence of the various endocrinopathies changes among different series of the patients due to a mixture of reasons other than iron overloads. Variety of treatment protocols and procedures has been established to extend the life expectancy of individuals. The combination of transfusion and chelation therapy has dramatically extended the life expectancy of thalassemic patients. It is very important to compensate for treatment response that is frequent blood transfusion in turn can lead to iron overload which may result in hypogonadism, diabetes mellitus, hypothyroidism, hypoparathyroidism and other endocrine abnormalities. Diagnosis of thalassemia is based on hematologic, radiological and molecular genetic testing. High prevalence of endocrine and metabolic complications among our thalassemics signifies the importance of therapeutic interventions. The differences of these abnormalities in different series of patients may be due to variations in treatment protocols or different susceptibilities and demand more detailed studies. Prognosis for individuals with beta-thalassemia has improved substantially in the last 20 years following recent medical advances in transfusion, iron chelation and bone marrow transplantation therapy. However, cardiac disease remains the main cause of death in patients with iron overload.

Biography

Dr. Mehran Kaiser is a recent graduate from Karachi Medical and Dental College, Pakistan. He was born on 8th november, 1992. He has been a versatile doctor throughout his acdemics and clinicals. He has keen interest in researches and has published case reports. He has gained immense experience during his clinicals and is very coperative and concerned towards patients.

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