CPD Whilst You Wee

Sickle Cell Crisis

Sickle cell disease is the UK's most common inherited blood disorder — and the fastest growing. Around 18,500 people in the UK live with sickle cell disease, with approximately 300 babies born with the condition every year.

A sickle cell crisis is a medical emergency. Would you know what to do? Here are 5 things to remember when someone presents in sickle cell crisis:

1

💊 **TREAT PAIN AS AN EMERGENCY**

Give appropriate analgesia within 30 minutes. Use the patient's individualised plan where available and reassess pain **every 30 minutes** until satisfactory control is achieved. This may include strong opiates in severe pain and patient-controlled analgesia if multiple boluses of strong opiate are required within the first 2 hours.

2

🫁 **THINK ACUTE CHEST SYNDROME**

Chest pain • fever • respiratory symptoms/signs • SpO_2 ≤95% • increasing O_2 requirement

Acute chest syndrome is a **life-threatening complication** and early recognition matters.

A **new pulmonary infiltrate on CXR** alongside fever and/or respiratory symptoms supports the diagnosis.

3

🚨 **SUSPECT ACUTE CHEST SYNDROME? ACT EARLY**

Don't wait for severe hypoxia or respiratory failure.

→ **CXR + bloods ± ABG** if hypoxic

→ **Oxygen** if hypoxic

→ **Treat suspected infection** with appropriate antimicrobials

→ **Involve Haematology early** ☎️ — consider **early transfusion** in hypoxic patients

→ **Escalate early to HDU/ICU** ⬆️ if severe features or clinical deterioration

4

⚠️ **KNOW YOUR OTHER EMERGENCIES –** don't miss:

🧠 Stroke | 🦠 Infection | 🩸 Aplastic crisis | 🩸 Splenic sequestration

5

👂 **LISTEN TO YOUR PATIENT**

People living with sickle cell are experts in their condition. Ask what normally works and whether this feels like their usual crisis. If the pain is atypical — or isn't responding as expected — **consider an alternative diagnosis**