

Evidence-Based Guidelines Are Important for Sickle Cell Disease

Sickle cell disease (SCD) is a genetic disorder that affects about 100,000 U.S. patients and is predominantly found in African-Americans. The disease affects a patient's hemoglobin, making it difficult for red blood cells to deliver oxygen to cells throughout the body. It can trigger an acute sickle cell episode which causes excruciating pain by restricting blood flow and, if left untreated, can damage vital organs and result in death.

Emergency Department (ED)¹ and mortality² rates increase substantially when SCD patients transition from pediatric to adult care. Between the ages of 19 and 24, the percent of deaths among those with SCD increases from 5% to 15% before peaking at 25% around 30 years old.

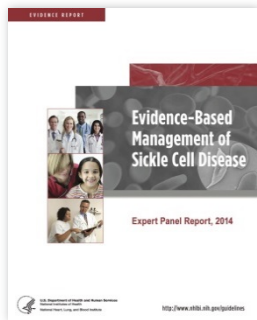
Because family physicians aren't comfortable treating patients with SCD, many don't receive routine preventive care and end up seeking care in the ED where personnel may not have proper training. For example, research has shown that sickle cell patients have to wait up to 50% longer³ to receive help in the ED compared with other patients experiencing pain.

Evidence-based guidelines for improving the management of Sickle Cell Disease, created by the National Heart, Lung, and Blood Institute (NHLBI), have existed since 2002 (updated in 2014), yet many healthcare providers are not aware of them.

“The growing numbers of adult sickle cell patients require better education of ED providers so that adults with SCD are adequately treated and unnecessary deaths are prevented.” – Hematologist specializing in SCD

So what can you do?

Download the Guidelines:



Areas of focus include:

- Health Maintenance for People with SCD
- Managing Acute Complications of Sickle Cell Disease
- Managing Chronic Complications of Sickle Cell Disease
- Hydroxyurea Therapy in the Management of Sickle Cell Disease
- Blood Transfusion in the Management of Sickle Cell Disease

<https://www.nhlbi.nih.gov/health-topics/evidence-based-management-sickle-cell-disease>

Watch this video: Patricia Kavanagh, M.D., a renowned ED physician, talks to other ED physicians and hospital leadership about implementing the guidelines in the ED.

Seize the Day: Improving Care for Sickle Cell Disease in the Emergency Department and Beyond

<http://www.resources.exchange/courses/seize-the-day-improving-care-for-sickle-cell-disease-in-the-emergency-department-and-beyond>

Get the app: A Sickle Cell Disease toolbox made for doctors by doctors is also available. The SCD Toolbox App – was developed by the Division of Hematology and Department of Medicine at Duke University Medical Center and is available for download. <https://www.scdtoolbox.com>

Develop a multidisciplinary team to evaluate SCD care in your facility.

1. Blinder MA et al. Age-related emergency department reliance in patients with sickle cell disease. J Emerg Med. 2015;49:513-22.

2. Hassell KL. Population estimates of sickle cell disease in the US. Am J Prev Med. 2010;38(4S):S512–S521.

3. Haywood C, Tanabe P, Naik R, et al. The impact of race and disease on patient wait times in the emergency department. J Emerg Med. 2013;31(4):641-762.