

# SICKLE CELL 101

## The Basics of Sickle Cell

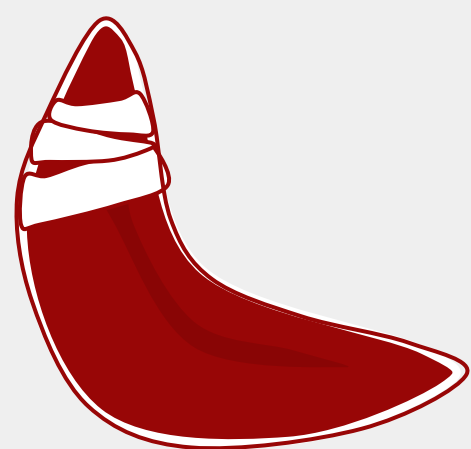
## SICKLE CELL 101



Sickle cell occurs in multiple races and ethnicities. It can be commonly found in people in sub-Saharan Africa, the Mediterranean, the Middle East and southeast Asia.

Complications can occur in any part of the body, because sickle cell is a blood disorder.

Sickle cell is a blood disorder characterized by rigid, sticky, fragile, and crescent (or sickle) shaped red blood cells.

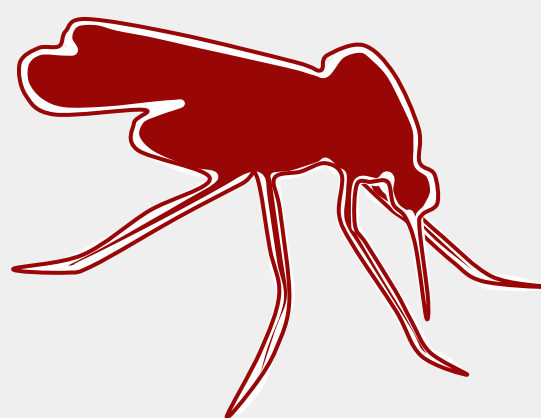


There is currently no universal cure for sickle cell disease.

Bone marrow transplant (stem cell transplant) is currently available and there are many investigational therapies currently being researched.

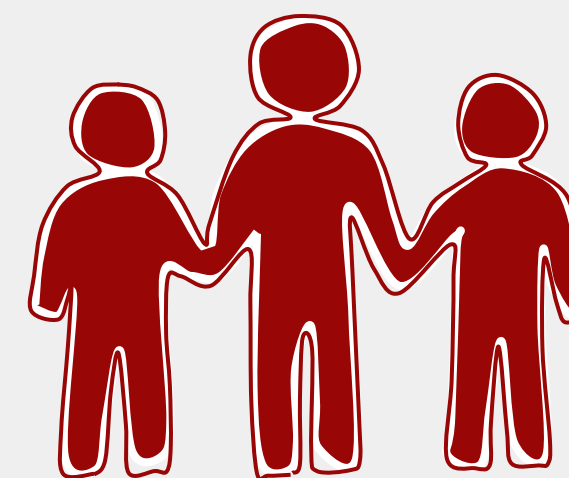
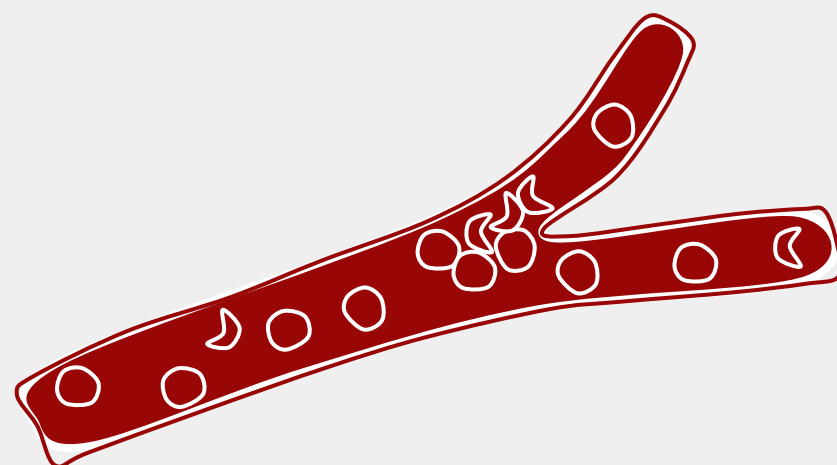
Sickle cell is one of the most common genetic disorder in the world. Frequency of sickle cell in other parts of the world can be as high as 25% percent.

The sickle cell gene evolved to combat a deadly strain of malaria. Those who have sickle cell trait have increased resistance to malaria.



Vaso-occlusive crises (or pain crisis) occurs when sickle shaped red blood cells get stuck within blood vessels due to their shape and stickiness.

This slows or stops blood flow, which damages surrounding body tissue and can cause extreme pain, often resulting in hospitalization.



Sickle cell is a genetic disorder meaning it is passed down from parent to child.

Only one sickle cell gene is present in individuals with sickle cell trait.

If both parents have sickle cell trait, there is a 25% chance of having a child with sickle cell disease.

Common complications associated with sickle cell disease are: infections, anemia, and pain crisis. Severe complications include stroke, pneumonia, acute chest syndrome, and organ damage.

There are a limited number of ways to manage sickle cell disease. Options include blood transfusions, FDA approved hydroxyurea and endari, and pain management.

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