

Complications: Splenic Sequestration

What is the spleen?

The spleen is a small organ located on the upper left side of the abdomen under the rib cage. It is an important part of the body's defense system against infections. The spleen filters out abnormal red blood cells and helps prevent reactions. In sickle cell disease (SCD), the spleen stops working when children are very young and it is not able to remove bacteria from the blood.

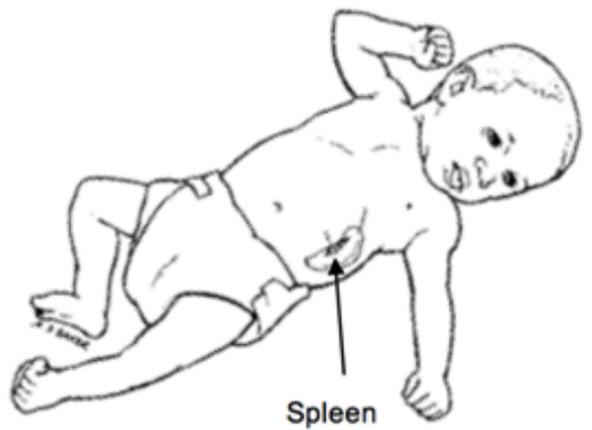
What is splenic sequestration?

Splenic sequestration happens when red blood cells get trapped in the spleen in children with SCD. As more blood gets trapped, the spleen gets bigger. When this happens the amount of hemoglobin and red blood cells (RBCs) drop in the rest of the body, causing severe anemia. Splenic sequestration can be painful.

Who should worry about splenic sequestration?

Children with any type of SCD (Hb-SS disease, Hb-SC disease, sickle beta thalassemia) **between the ages of 2 months and 2 years are at the highest risk of having splenic sequestration.** Symptoms of splenic sequestration include:

- Fever
- Pale or grayish lips, palms or soles of feet
- Unusually sleepy or tired
- Unusually cranky or irritable
- Swollen or painful belly, especially when touched



Is it serious?

Splenic sequestration can be serious, even life threatening. Enlargement of the spleen requires an immediate evaluation by a health care provider, close monitoring, and possibly medical treatment.

What else should I know about splenic sequestration?

- At each sickle cell clinic visit, your doctor or nurse will feel your child's spleen to see if it is enlarged.
- They will show you how to palpate (feel) your child's spleen size.
- Small increases of the spleen and minor episodes of splenic sequestration that do not cause severe anemia are common.
- If the spleen suddenly becomes larger than normal, you should call the hematologist-on-call and prepare to bring your child to the Emergency Department.
- Blood transfusions may be given to bring blood counts back to normal. If a child has had more than one severe splenic sequestration episode it may become medically necessary to remove the spleen by surgery.

KNOW THE SIGNS OF SPLENIC SEQUESTRATION:

- **fever**
- seems unusually tired
- pale skin, lips, palms, and/or feet
- seems unusually cranky or irritable
- swollen or painful belly, especially when touched

If your child has any of the above symptoms **call the sickle cell nurse or doctor and prepare to bring your child to the ED:**

312-227-4813 (M-F 9am to 5pm)

312-227-4000 (After hours, ask for hematologist on call)

The Comprehensive Sickle Cell Program

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