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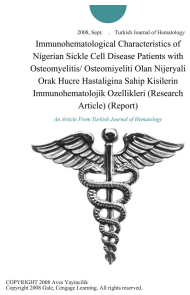
IMMUNOHEMATOLOGICAL CHARACTERISTICS OF NIGERIAN SICKLE CELL DISEASE PATIENTS WITH OSTEOMYELITIS OSTEOMIYELITI OLAN NIJERYALI ORAK HUCRE HASTALIGINA SAHIP KISILERIN IMMUNOHEMATOLOJIK OZELLIKLERI RESEARCH ARTICLE REPORT EBOOKS 2019



Author: Turkish Journal of Hematology

Realese Date: Expected @@expectedReleaseDate@@

Introduction Bone involvement in the form of painful vaso-occlusive crisis, osteomyelitis, bone necrosis, chronic arthritis, and impaired growth are common manifestations of sickle cell disease (SCD) [1]. The microvascular circulation of the bones is a common site for sickled red cells to lodge, leading to thrombosis, infarction, and necrosis of the bone [2,3]. Infarcted bones are easily colonized by bacteria following an episode of bacteremia [4], which could result from intravascular sickling of the bowel vessels as found in other tissues of patients with SCD. This may lead to ischemic infarction and devitalization of the bowel, thereby permitting loss of mucosal barrier [5] with consequent bacteremia. Other factors predisposing the SCD patients to infections, especially from encapsulated organisms, include abnormal antibody production, defective splenic function, and defects in the alternate complement pathway, leukocyte function, and cell-mediated immunity [6,7].

Melissa monek

Madame la colonelle

One to three

Madame de treymes

Madame et ses défenseurs mélanges politiques

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