

International Conference on

Leukemia and Hematologic Oncology

October 17-18, 2016 Rome, Italy

HCV related thrombocytopenia

Alaa Efat Abdelhamid, Ali Zaki Galal, Sabry Abdullah Shoieb, Mohammed Abdelhafez, Nahla Fekry, Waleed Shehab Eldin and Walaa Metwally
Menoufia University, Egypt

Background: PRL is involved in the activation of many immunological responses, it enhances the progression of the immune process in autoimmune diseases. Autoimmunity is a common finding in chronic hepatitis C. There is a significant association between HPRL and infection with HCV genotype 3.

Aim: The aim of this study was to evaluate serum levels of prolactin in a group of patients with HCV-related thrombocytopenia compared with patients with HCV and normal persons.

Methods: This study was carried at Internal Medicine Department, Menoufia University Hospital from the period of May 2014 till December 2014. Subjects were classified into group I: 41 chronic hepatitis C patients with thrombocytopenia; group II: 35 chronic hepatitis C patients without thrombocytopenia and group III: 25 control healthy individuals of matched sex and age.

Results: This study detected moderate hyperprolactinemia in patients with HCV-related thrombocytopenia and it was significantly higher than in patients with chronic hepatitis C patients without thrombocytopenia and than controls.

Conclusion: HCV related thrombocytopenia is a major challenge especially in areas with high infection prevalence rate and the viral infection itself causes immune disturbances as direct action or by disturbing other systems and inflammatory state.

alaaefat@yahoo.com

Hematologic oncology diseases: What is the role of internal medicine?

Carlos Antonio Moura
Hospital Santo Antonio—Serviço de Reumatologia e Clínica Médica, Brazil

Hematologic oncology diseases are common worldwide. Eradicating these diseases is challenging and demands various measures and early diagnosis. All physicians know that cytopenias, lymphadenopathy, splenomegaly, among others, indicate possible hematologic diseases, but when these symptoms and signs occur associated with multiple comorbidities in the same patient, it is not uncommon to delay the correct diagnosis and, therefore, slow up the adequate treatment by the hematologist. So, our role as non-hematologists is early identification of these patients and referral to the specialist. Therefore, 5 real cases will be illustrated pointing clues that must aware all physicians about possible hematologic oncology diseases.

caggmoura@yahoo.com.br