*If you notice any of the signs for avascular necrosis, you need to see your primary care doctor or your sickle cell doctor as soon as possible. Also, if your child is experiencing any problems with his or her sight, you should make an appointment to see your primary care doctor or eye doctor right away.



UAB Division of Pediatric Hematology and Oncology

1600 7th Avenue South, Suite 512 ACC Birmingham, AL 35233

Attending Physicians

Roger Berkow, MD
Gregory Friedman, MD
Lee Hilliard, MD
Thomas Howard, MD
Jeffrey Lebensburger, DO
Joseph Pressey, MD
Raymond Watts, MD
Kim Whelan, MD

Nurses

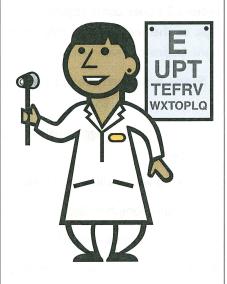
Misty Bagwell, CRNP
Heather Carlton, CRNP
Heather Collins, CRNP
Jasmine Hoggle, CRNP
Mary Jones, RN
Jennifer McDuffie, CRNP
Kristen Osborn, CRNP
Britney Snipes, CRNP
Carol White, CRNP

Phone: 205-939-9285 Fax: 205-975-1941

After office hours, please call (205) 939-9100 and ask for the Hematologist on call.



Avascular Necrosis and Retinopathy in Sickle Cell Disease



UAB Division of Pediatric Hematology and Oncology

copyright © 2001 UAB Division of Pediatric Hematology—Oncology

Avascular Necrosis

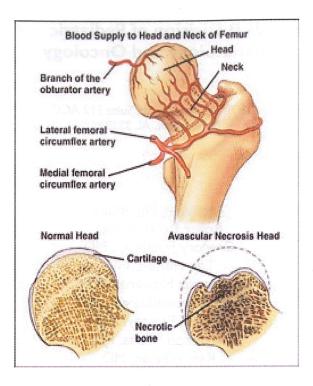
Avascular necrosis is the death of a part of the bone due to a blocked blood supply. This occurs over time when red blood cells sickle in the bone marrow. The bone marrow is located inside the middle of most bones. This is where your blood cells are made. This most commonly occurs in the larger joints (where 2 bones come together) like the hips, or the knees. Once this occurs, the bone begins to "wear away".

Signs and symptoms to watch for:

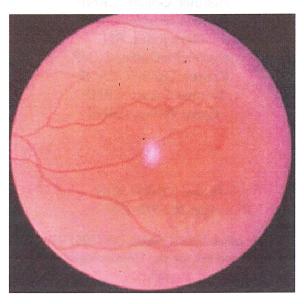
- A continuous, nagging pain of the hip or leg
- A limp with walking or running
- Unequal length of legs

Treatment:

Avascular necrosis can be seen on x-rays of the hips or legs, This is often painful for the patient and may require medication for pain control. Sometimes this even means going into the hospital for a while. If the problem is severe, joint replacement may be suggested by your sickle cell doctor.

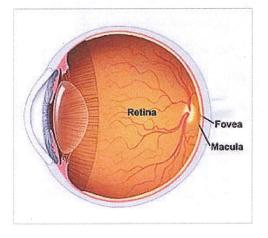


Retinopathy in a Hemoglobin SC patient



Retinopathy

Retinopathy is when there is non-inflammatory damage to the retina of the eye. It is most commonly due to problems with the blood supply to the retina. The retina is the light-sensitive inner layer of the eye.



Retinopathy occurs in sickle cell patients due to "sickling" in the blood vessels in the eyes over time. This causes damage to the small blood vessels found in the retina. In order to detect this problem early, we recommend yearly eye exams with an ophthalmologist beginning at age 12 years. Retinopathy from sickle cell disease is more common in patients with Hemoglobin SC disease.

If your child has any problems with his or her vision, any eye pain, or headaches, they should have an eye exam to look for this problem. Treatment for retinopathy may include glasses, eye surgery, and any other treatments as decided by an eye specialist.

copyright © 2001 UAB Division of Pediatric