

Brief Note on Pediatric Anemia

Keseroglu H*

Department of Dermatology, Himalayan Institute of Medical Sciences, Dehradun, India

*Corresponding author: Keseroglu H, Department of Dermatology, Himalayan Institute of Medical Sciences, Dehradun, India, Tel: +90 312 596 2000; E-mail: keseroglu@yahoo.com

Received date: December 06, 2021; **Accepted date:** December 20, 2021; **Published date:** December 27, 2021

Citation: Keseroglu H (2021) Brief Note on Pediatric Anemia. Clin Pediatr Dermatol Vol.7 No.5: e003.

Description

Anemia is a common condition in children, about 20% of children in the U.S. will be diagnosed with anemia at the some point. Hemoglobin is a special type of protein in RBC (Red Blood Cells). Hemoglobin allows red blood cells to carry oxygen to other cells in the body. Anemia has 3 main causes they are, Loss of red blood cells from bleeding, Inability to make enough red blood cells, a medical condition that causes the destruction of red blood cells. Regular Screening for anemia is an important part of caring for a child. Problems caused by anemia can be prevented when anemia in children is diagnosed at an early stage. Most of the cases, anemia can be diagnosed with a few simple blood tests. The Academy of Pediatrics currently advises screening for anemia with a hemoglobin test at age 1. It should include risk factors for iron deficiency anemia. If the hemoglobin level is low, testing is needed to determine the type of anemia. If a child has risk factors at any age, a test for anemia should be done. Most of the children with anemia have no symptoms, so routine blood tests are important for children to have to check for the condition. Some of the signs and symptoms that suspect anemia in a child include Pale skin, Irritability, Weakness, Dizziness, Sore tongue, Rapid heartbeat, Rapid breathing, and skin color. Diagnose of anemia involves a blood, to get a blood sample, a healthcare provider will insert a needle into a vein, usually in the child's arm or hand. A tourniquet may be wrapped around the child's arm that helps the healthcare worker find a

vein. Blood may be drawn up into a syringe. In some cases, blood can be taken by using a needle prick. Blood tests cause a little discomfort while the needle is inserted. There is a possible to have persistent bleeding, nerve damage, or infections from a blood test. But these risks are very low. In most of the cases, a child will not need any special preparation or care after a blood test. Hemoglobin and hematocrit is often the first screening test for anemia in children. It measures the amount of hemoglobin in the blood and the amount of red blood cells in blood sample. Complete blood count (CBC) this test is used to diagnose whether the hemoglobin or hematocrit is abnormal, a complete blood count may be done. This test adds important information about the blood, including the size of the red blood cells (called the mean corpuscular volume, or MCV). Peripheral smear test is done with a smear of blood on a slide that is examined under a microscope. Reticulocyte count test is used to diagnose reticulocytes, that are immature blood cells. A reticulocyte count measures the amount of the newly formed red blood cells in the child's blood sample. Anemia is caused by not enough red blood cells being made results in a low reticulocyte count. Anemia is caused by too many red blood cells being lost causes a high reticulocyte count. Treating anemia in children based on the type of anemia and its cause. In some cases, treatment may involve simply a change in diet or the use of diet supplements. In other cases, a blood transfusion or long-term treatment is needed.