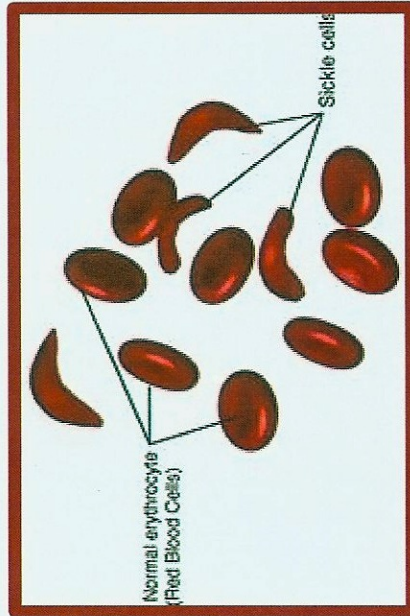




# September is Sickle Cell Disease Awareness Month



Dr. Yolonda P. Holmes (a carrier of the sickle cell trait (SCT), and her daughter Brooke (who was diagnosed at birth), serve as **Advocates** promoting Local, National, & Global Awareness for the Advanced Research, Treatment, and Cure of Sickle Cell Disease.

For more information visit their website [www.dirminyo.weebly.com](http://www.dirminyo.weebly.com) or send an email to: [hd44477@bellsouth.net](mailto:hd44477@bellsouth.net). We appreciate you!

God Bless,

*Dr. Yfa & Brooke*

Sickle Cell Disease (SCD) is an inherited disease of the hemoglobin that causes chronic illnesses affecting 70,000 to 100,000 people in the United States alone. It is the most common genetic disorder identified in African Americans (Source: BeTheMatch, 2014)







Piedmont Health Services  
and Sickle Cell Agency

## SICKLE CELL disease and trait

# FAQS



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**What is Sickle Cell Disease?** Sickle Cell Disease is a group of inherited red blood cell disorders. It is the most common genetic disease in the U.S. Over 90,000 Americans have Sickle Cell Disease. Normal red blood cells are round like donuts, and they move through small blood tubes in the body to deliver oxygen. Sickle red blood cells become hard, sticky and shaped like crescents (or sickles, a tool used to cut wheat). When those hard and pointed red cells go through the small blood tube, they clog the flow and break apart. This can cause pain, damage and a low blood count (anemia).

**What Makes the Red Cells Sickle?** There is a substance in the red cell called hemoglobin that carries oxygen inside of the cell. One little genetic change in this substance causes the hemoglobin to form long rods in the red cell when it gives away oxygen. These rigid rods change the red cell into a sickle shape.

**How Do You get Sickle Cell Anemia?** The abnormal Sickle Cell hemoglobin is inherited from both parents who may have the disease, or simply be carriers for the trait. You cannot catch it from another person. You are born with the abnormal hemoglobin and it is present for life.

**Does Sickle Cell Affect only African Americans?** Sickle Cell occurs in many nationalities including African Americans, Arabs, Greeks, Italians, Latin Americans and Indians. All races should be screened for the Sickle Cell hemoglobin at birth. In the U.S., 1 out of every 10 African Americans have sickle cell trait and 1 out of every 500 African American newborns have the disease. In North Carolina, 1 out of every 360 African Americans currently have Sickle Cell Disease.

**What is the Sickle Cell Trait?** Sickle Cell trait is when a person carries one sickle hemoglobin gene and one normal hemoglobin gene (these are inherited from their parents). Normal hemoglobin is called type A. Sickle hemoglobin is called type S. When you have the trait, your hemoglobin gene is referred to as AS. (Someone with the disease would have an SS gene). Having the trait will NOT cause sickle cell disease and usually doesn't cause any major issues for the person carrying the trait. Other hemoglobin traits common in the U.S. are AC and AE traits.

**How Can I Test for Sickle Cell?** A simple blood test called the hemoglobin electrophoresis can be done by your doctor or local Sickle Cell foundation. This test will tell if you are a carrier of the trait or if you have the disease.

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# SICKLE CELL disease and trait FAQS



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**Are Newborns Tested for Sickle Cell?** Most states now perform the sickle cell test when babies are born. Other types of traits may also be discovered including: Hemoglobin C trait, Hemoglobin E trait, and Hemoglobin Barts. If you are worried your child may have the trait or disease, be sure to ask your doctor about the test.

**Are There Different Types of Sickle Cell Disease?** There are three common types of Sickle Cell Disease in the United States:

1. Hemoglobin SS or sickle cell anemia
2. Hemoglobin SC disease
3. Hemoglobin sickle beta-thalassemia

Each of these can cause sickle pain episodes and complications, but some are more common than others. All of these may also have an increase in fetal hemoglobin which can protect the red cell from sickling and help prevent complications. The medication hydroxyurea also increases fetal hemoglobin.

**Where Can I Get More Information?** Visit the Piedmont Health Services and Sickle Cell Agency at [www.piedmonthealthservices.org](http://www.piedmonthealthservices.org) or by calling 336-274-1507 or 1-800-733-8297. For the Charlotte office, call 704-910-2002. Contact the Sickle Cell Disease Association of America at 1-800-421-8453.

**How Can I Help?** One way Sickle Cell patients receive treatment is through frequent blood transfusions. This will replace their sickled red cells with healthy cells and decrease the chance of pain crises. Because the majority of Sickle Cell patients are African American, the need for healthy African American blood donors is great. Due to the frequency of transfusions, Sickle Cell patients need very closely-matched blood in order to prevent transfusion rejection. This usually comes from African American blood donors.

**Is Blood Donation Safe?** Yes, blood donation is very safe. A mini-physical and health questionnaire ensure that you are healthy enough to donate blood each time you visit a donation center or mobile blood drive. Every donation uses sterile, single-use equipment. You are also able to prepare for donation by eating extra iron-rich foods and drinking plenty of water in the days before your donation.

**Donate Blood or Host a Blood Drive** To donate blood with the Community Blood Center of the Carolinas visit [www.cbcc.us](http://www.cbcc.us). When you donate with CBCC, your donation stays in this community, helping local patients. Also consider hosting a blood drive in your community, at work or at church. Call 704-972-4700 or 336-413-4995 to learn more.