

TO FIND OUT RELEVANT CLINICAL FINDINGS OF IN BLEEDING DISORDERS THROUGH CLINICAL EXAMINATION & DETAIL HISTORY.

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Abstract

Background & Method: Present study was done with an aim to find out relevant clinical findings of in bleeding disorders through clinical examination & detail history. A blood pressure cuff inflates around the upper arm of patient. While the cuff is on the arm, a prick is given on the fingertip. It is just deep enough to cause a tiny amount of bleeding. The blood pressure cuff is immediately deflated. Blotting paper is touched to the cuts every 30 seconds until the bleeding stops.

Result: Out of 200 study cases, males are more commonly affected (104%) than females (96%). Most Common bleeding manifestation found to be Gum Bleeding in 33% cases. Among the bleeding disorders platelet disorders (74%) are more common than coagulation disorders (15%).

Conclusion: Our endeavour here is to evaluate bleeding disorders on the available resources in the department and help the clinicians to have an idea of the hematological changes seen on light microscopy, for deciding the treatment of the diseases. Bleeding time is prolonged in 36% cases while clotting time in 29% of patients Prolonged prothrombin time is seen 9% study cases where as activated partial thromboplastin time is increased in 13%.

Keywords: clinical, bleeding & disorder.

Introduction

The human body cannot handle excessive blood loss well. Therefore, the body has ways of protecting itself. Hemostasis is one of them. When, for some unexpected reason, sudden blood loss occurs, the blood platelets kick into action. When bleeding from a wound suddenly occurs, the platelets gather at the wound and attempt to block the blood flow. The mineral calcium, vitamin K, and a protein called fibrinogen help the platelets form a clot.

A clot begins to form when the blood is exposed to air. The platelets sense the presence of air and begin to break apart. They react with the fibrinogen to begin forming fibrin, which resembles tiny threads. The fibrin threads then begin to form a web-like mesh that traps the blood cells within it. This mesh of blood cells hardens as it dries, forming a clot, or "scab."

Bleeding disorders comprise a significant gathering of problems in hematology. Irregularities of platelet work and coagulating factors are described by clinical draining of differing seriousness. All infections of insufficient hemostasis have unconstrained dying (petechiae, purpura, mucous films, GI dying, hematuria, into joint spaces, or even abnormally substantial periods) or potentially exorbitant draining later injury or medical procedure.

The hemostatic framework comprises of platelets, coagulation factors, and the endothelial cells coating the

veins. Clinical assessment of a draining patient starts with taking a cautious history, considering the patient's age, sex, clinical show, previous history, drug history and family ancestry. While a draining history is being evoked, consideration ought to be coordinated to the sort of draining present. Certain signs and side effects are basically analytic of scattered hemostasis.

Material & Method

The present study is hospital based prospective being undertaken in the Department of pathology & Department of medicine (hematology) of Amaltas Institute of Medical Sciences, Dewas, M.P. The 200 cases presenting with bleeding manifestations in OPDs & Wards of hospitals & the cases retrieved from the archives reporting for complete blood picture during the period from May 2019 To April 2020.

Bleeding time is a blood test that looks at how fast small blood vessels close to stop bleeding. This test helps diagnose bleeding problems. Pre-requisites-Certain medications including dextran, nonsteroidal anti-inflammatory drugs (NSAIDs), and salicylates (including aspirin) may change the test results. So the patient should be told to stop taking these medicines if any, a few days before the test.

Procedure- A blood pressure cuff inflates around the upper arm of patient. While the cuff is on the arm, a prick is given

on the fingertip. It is just deep enough to cause a tiny amount of bleeding. The blood pressure cuff is immediately deflated. Blotting paper is touched to the cuts every 30 seconds until the bleeding stops. The time taken for the cuts to stop bleeding is recorded. Normal results-Bleeding normally

stops within 1 to 8 minutes. However, values may vary from lab to lab.

Results

Table 01: Gender Distribution

Sex	Frequency in No.	%(n=200)
Males	104	52
Females	96	48
Total	200	100

Out of 200 study cases, males are more commonly affected (104%) than females (96%).

Table 02: Clinical Manifestations

Symptoms	No of cases	%(n=200)
Gum bleeding	66	33
Epistaxis	60	30
Petechiae, purpura	64	32
Fever	56	28
Ecchymosis	36	18
Hematuria	08	4
Melena	18	9
Hemetemesis	14	7
Menorrhagia	32	16
Hematoma	04	2
Hemoptysis	10	5
Hemarthrosis	06	3
Post traumatic	06	3
Hematochezia	04	2
Umbilical bleeding	02	1

Most Common bleeding manifestation found to be Gum Bleeding in 33% cases.

Table 03: Distribution of cases according to type of Bleeding Disorders

Type of bleeding disorder	Total number of cases	%
Platelet disorders	148	74
Coagulation disorders	30	15
Other Systemic causes	22	11
Total	200	100

Among the bleeding disorders platelet disorders (74%) are more common than coagulation disorders (15%).

Discussion

SG Kibria, MDU Islam completed a review on predominance of hematological issue on 177 patients at Faridpur. Accordingly they viewed as greatest 41 (23.16%) cases were in 10-19 years age bunch and most reduced 6 (3.39%) in over 70 years age bunch. The age went from 3.5 years to greatest 80 years with a mean age 27.05 years. Out of 177 patients, 111 (62.71%) were male and 66 (37.29 %) were female in a proportion of 1: 0.59.

Sajid R, Khalid S, Mazari N, Azhar WB, Khurshid M in their review engaging investigation of 408 patients of hemostatic issue tracked down the middle age of 17 years with a scope

of three to 57 years There were 329 (80.6%) guys and 79 (19.3%) females. Sudhanshu Saxena and Shashikiran, directed a review where a sum of 164 cases were analyzed, greatest number of them has a place with 11-15 years age bunch. Out of these 152 were guys and 12 were females.

Similarly Naima Al-Mulla et al found in their review led in Qatar during the period 2000-2005 observed that 82% cases were between 1-10 years and guys had almost an equivalent dissemination 57.9% with females 42.1%

E. Oral, A. Çağdaş, et al broke down 25 patients with draining indications in Medical School of Istanbul University somewhere in the range of 1988 and 1995 and

noticed the mean age of the patients as 13.9 ± 1.6 (SD) a long time.

Adil SN, Burney IA over a 7.5 years time of segment information assortment of 144 patients, observed a middle of 17 years with ages went from 2 to 75 years. 112 (77.7%) patients were underneath the age of 30 years.

Neylon AJ, Saunders PW led a prospective investigation of 245 patients with draining issue between 1 January 1993 and 31 December 1999 in the previous Northern Health Region in UK tracked down 134 females and 111 guys (1.2:1). Overall rate was 1.6 per 105 for each annum. Outright frequency was comparative for the two genders, with most noteworthy age-explicit occurrence in those matured > 60 years.

In the review Naima Al-Mulla, Abdulbari Bener, the most well-known clinical elements were petechia (89.5%), swelling (67.7), and draining from different locales (47.4%) and epistaxis (22%) Preceding viral contamination was normal in 71%. Stalfelt AM, Brodin H in a review survey of the clinical and nursing records of 106 grown-up patients with AML who had passed on in 1995-1997 tracked down draining in 44% cases while contamination in 71%.

In our review, Hemarthrosis and draining later minor injury which are normal in coagulation issues are viewed as in 3 % of cases while hematoma in 2% cases. Comparably James M. Perrin, William E. MacLean et al in their a half year investigation of 97 hemophiliac subjects noticed 66% of draining occurrences happening into joints and 44% later injury.

In the review led by Gupta PK et al, draining indications included epistaxis (55%), unjustifiable delayed draining from paltry wounds (half) simple swelling (46%), menorrhagia (31%), gum drains (22%), GI drains (11%) haematuria (6%), and once in a while, haematomas and hemarthroses (4%). Saxena R, Gupta M directed a concentrate at All India Institute of Medical Sciences, New Delhi where 66% of the ladies with an acquired draining problem gave menorrhagia alone while 33% likewise had other related draining indications as drawn out draining from injury site, ecchymotic patches, epistaxis, haematomas, haemarthroses and major drains like intracerebral dying. The cross-sectional review was led by Abdul-Karim ET,

Mohammed SF in the Center of Congenital Coagulation Disorders, Al-Mansour Pediatric Teaching Hospital, Baghdad, Iraq between March 2008 and August 2008. Among 243 patients 52.7% of patients gave hemarthrosis and joint restrictions.

Conclusion

Our endeavour here is to evaluate bleeding disorders on the available resources in the department and help the clinicians to have an idea of the hematological changes seen on light microscopy, for deciding the treatment of the diseases. Bleeding time is prolonged in 36% cases while clotting time in 29% of patients Prolonged prothrombin time is seen 9% study cases where as activated partial thromboplastin time is increased in 13%.

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