



# HEMATOPOIETIC & LYMPHATIC SYSTEM

-HAYAT BATCH-

SUBJECT : Biochemistry

LEC NO. : 4

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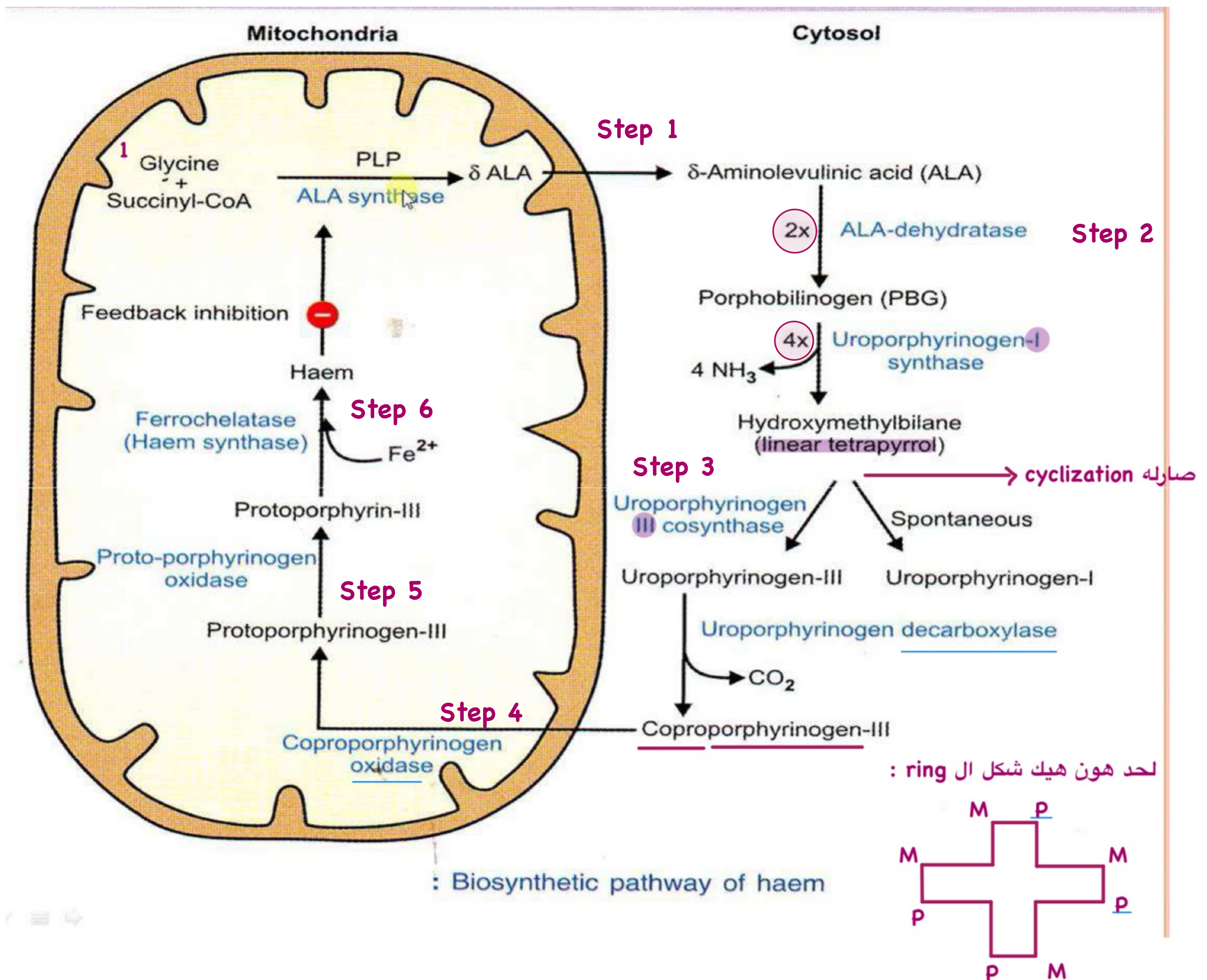
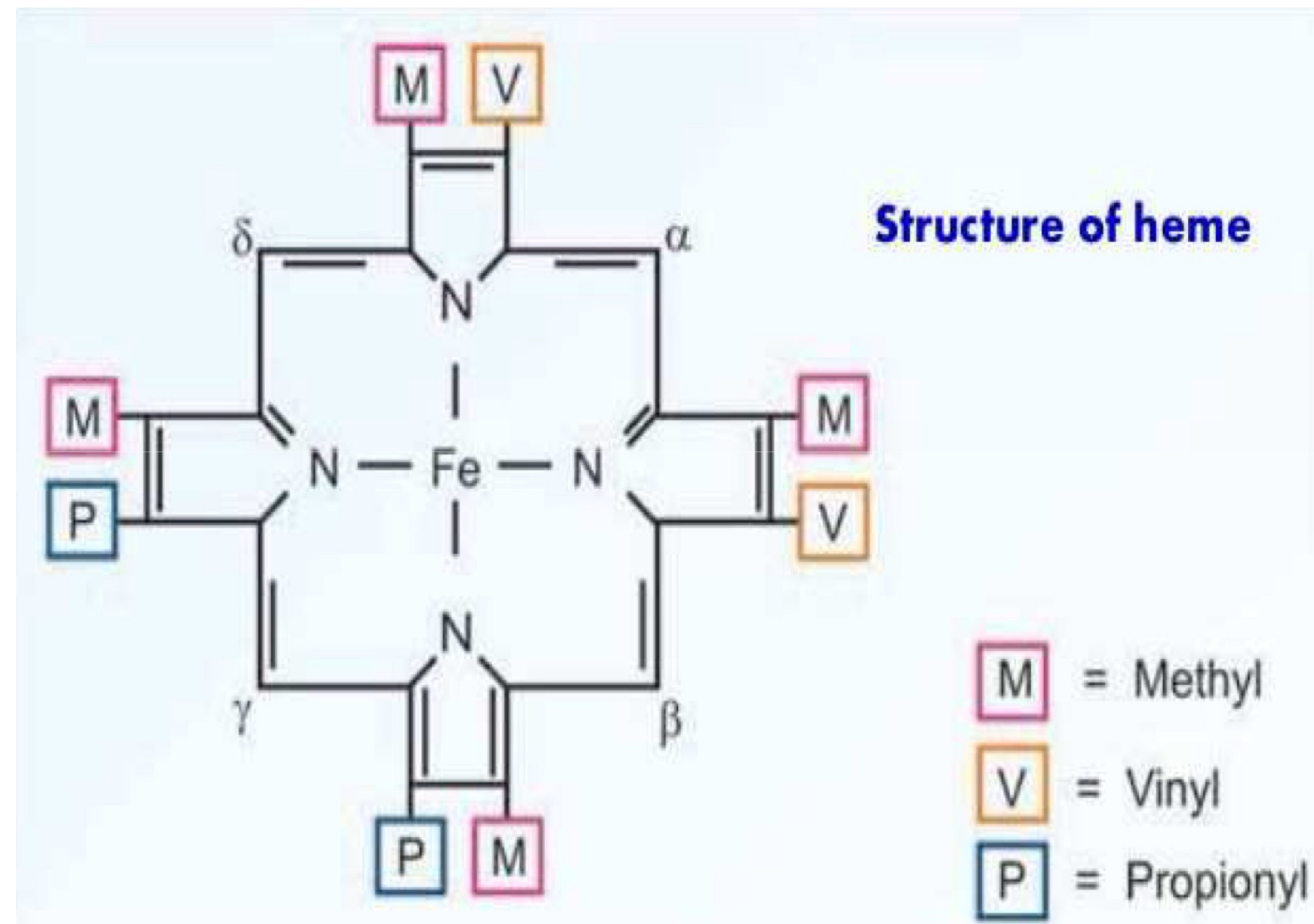
# Porphyria

\* Porphin ring : cyclic tetrapyrrole united by 4 methene (=CH-) bridges

\* Biosynthesis of heme occurs mainly in the liver and bone marrow (both in mitochondria and cytoplasm)

## 6 Steps :

1. Formation of  $\delta$ -aminolevulinic acid ( ALA )
2. Formation of porphobilinogen ( PBG )
3. Formation of uroporphyrinogen III
4. Formation of protoporphyrinogen III
5. Formation of protoporphyrin IX
6. Formation of heme



\* **Porphyria** : is a metabolic disease caused by congenital deficiency of one of the enzymes needed for heme synthesis

\* The symptoms depend on the site of the defect as following :

1) **Enzyme defect before the formation of porphyrinogens** : this occurs in acute intermittent porphyria due to deficiency of uroporphyrinogen 1 synthase leading to accumulation of a ALA and porphobilinogen

2) **Enzymes defect after the formation of porphyrinogens** : this occurs in porphyria cutanea tarda due to deficiency of uroporphyrinogen decarboxylase and hereditary coproporphyrin due to deficiency of coproporphyrinogen oxidase , patient will suffer from 1. photosensitivity 2. skin damage 3. scarring

## Hemolytic Anemias

1) **Intrinsic causes** : defect of RBCs cells membrane as in ( hereditary spherocytosis and hereditary elliptocytosis ) caused by abnormalities in the amount or structure of spectrin or causes inside the RBCs include ( hemoglobinopathies and enzymopathies )

2) **Extrinsic causes** : portal hypertension in hypersplenism , immunologic abnormalities ( SLE , rheumatoid ) and prosthetic heart valves recipient

\* **Laboratory investigations ( specific tests )** :

1. Hb electrophoresis (HbS)
2. Red cell enzyme (G6PD or PK deficiency)
3. Osmotic fragility (hereditary spherocytosis)
4. Coombs test

\* **Reticulocyte count** : provides information on the number of relatively immature RBCs in a person's blood sample

\* **Haptoglobin** : When large numbers of RBCs are destroyed , haptoglobin concentrations in the blood will temporarily decrease as the haptoglobin is used up faster than the liver can produce it

