



**CAN YOU  
TELL IT'S  
SICKLE  
CELL?**

SICKLE CELL IS AN  
INVISIBLE DISORDER BUT  
**SICKLE CELL CRISIS** CAN  
BE FATAL.

# Awareness of Sickle Cell Disorder (SCD) Presentation

For Urgent Care Administration staff

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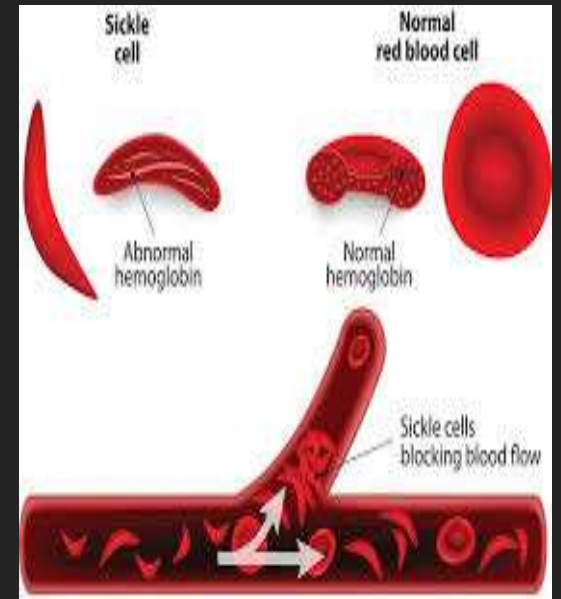
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# What is Sickle Cell Disorder?

Sickle cell disorder is the name for a group of serious inherited red blood cell disorders.

People with sickle cell disease produce unusually shaped red blood cells that cause excruciating pain and other problems.



**Anyone** can be born with Sickle Cell Disorder. However, it is most common amongst people from a black Caribbean, black African, Greek, Italian, Arab and Asian background.



# Living with Sickle Cell Disorder

Sickle Cell Disorder is a serious and lifelong health condition, although treatment can help manage many of the symptoms, reduce organ damage and prolong life.

Painful episodes are referred to as sickle cell crises. Treatment includes strong painkillers such as morphine to control the pain, intravenous fluids and oxygen.

All patients presenting with acute sickle pain **must** receive initial analgesia within **30 minutes** and have achieved good pain relief within **two hours**.

Delaying analgesia is associated with **higher death rate** and **prolonged hospital stay**.

# The role of patient as teacher



## Invisibility limiting involvement

*"You can't see my pain. I can feel it, but you can't see it. I'm not bleeding. I don't have a gaping wound, my knee isn't cut off. But I'm in pain."* (Alice, age 26).

**Campbell et al., 2010, Miles et al., 2019**

## Key signs and symptoms

Pain that may fluctuate

Signs of infection including fever

One-sided paralysis or weakness in the face, arms or legs

Confusion

Difficulty walking or talking

Sudden visual changes

Unexplained numbness

Severe headache

Breathlessness, chest pain or low oxygen levels

If a person has any of these symptoms, immediate action should be taken as they could be signs of a Sickle Cell crisis or complication

## **Acting quickly can save lives**

If someone has these symptoms, and they are at home they should seek urgent medical attention – this should be via A&E and they should be treated immediately.

There are **967** patients identified as having Sickle Cell disease across the **NW region**

**Who  
should be  
contacted  
next?**

Patients admitted to the hospital for sickle cell complications should be referred promptly to and treated by haematologists or clinicians with expertise in sickle cell disorders



**How can  
you help?**

Be aware of Sickle Cell

Be sympathetic to the patient and family - this is an excruciatingly painful lifelong disorder.

Ensure they are fast tracked to triage.

Ensure the patient is aware of any delays and why.

Call the specialist nurse to see the patient and tell the patient you have done this.

## SICKLE CELL IN SECONDARY CARE: NOT A PRIORITY?

- Sub-standard care on general wards and in A&E
- Failings in providing joined-up sickle cell care
- Low awareness of sickle cell among healthcare professionals
- Inadequate training and racial inequalities
- Negative attitudes towards sickle cell patients
- Inadequate investment in sickle cell care

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# NO ONE'S LISTENING:

AN INQUIRY INTO THE AVOIDABLE DEATHS  
AND FAILURES OF CARE FOR SICKLE CELL  
PATIENTS IN SECONDARY CARE



# Any Questions?

Contact: [mft.haemoglobinopathy@nhs.net](mailto:mft.haemoglobinopathy@nhs.net)



**KNOWING THE SIGNS  
AND ACTING QUICKLY  
CAN SAVE LIVES.**

**PAIN**

**SIGNS OF INFECTION  
INCLUDING FEVER**

**ONE-SIDED PARALYSIS OR  
WEAKNESS IN THE FACE,  
ARMS OR LEGS**

**CONFUSION**

**DIFFICULTY WALKING  
OR TALKING**

**SUDDEN VISION CHANGES**

**UNEXPLAINED NUMBNESS**

**SEVERE HEADACHE**

**BREATHLESSNESS, CHEST PAIN  
OR LOW OXYGEN LEVELS**

If someone has these symptoms, they should seek urgent medical attention – this may be via A&E, 999 or their local haematology unit – and should be treated immediately.

A new training module to support NHS staff with increased knowledge of the condition and how to treat it is now available at [www.e-lfh.org.uk/programmes/health-inequalities/](http://www.e-lfh.org.uk/programmes/health-inequalities/)

# References

Public Health England:

<https://campaignresources.phe.gov.uk/resources/campaigns/148-can-you-tell-it/resources>

Novartis – Switch-Up on Sickle Cell: Switch-up on Sickle | Code Red | Real-life perspectives (switchuponsickle.co.uk)

No One's Listening Report:

<https://www.sicklecellsociety.org/wp-content/uploads/2021/11/No-Ones-Listening-Final.pdf>