OMICS International
conferenceseries.com

3rd International Conference on
Hematology & Blood Disorders
November 02-04, 2015   Atlanta, USA

Bone and spleen uptake of technetium-99m-methylene diphosphonate in a patient with sickle-cell disease: A case report from Sudan

Suliman Salih
Taibah University, KSA

This case report demonstrates that the bone uptake of technetium-99m-methylene diphosphonate can play an important role in the diagnosis and follow-up of bone lesions in sickle-cell anemia. In this case, the whole-body scan revealed remarkably increased activity in the spleen region, in the right ulna and in the left femoral head, consistent with bone infarcts. Bone scanning is a reliable imaging method for early detection and diagnosis of osseous and extraosseous crises in sickle-cell anemia.

salim_suliman@hotmail.com

Age-adjusted D-dimer cut-off in outpatients with suspected venous thromboembolism

Tienan Zhu, Chengwu Han, Yongqiang Zhao, Wenli Cheng, Jing Yang, Jie Yuan, Yuehong Zheng and **Xueying Yu**
Chinese Academy of Medical Sciences, China

Background: D-dimer testing has been widely used in the exclusion of venous thromboembolism (VTE), but its clinical usefulness is limited in older patients because of a lower specificity.

Objective: To evaluate the diagnostic performance of STA-Liatest D-dimer assay and validate the age-adjusted cut-off value in Chinese outpatients with suspected VTE in a prospective non-interventional study.

Methods: Symptomatic patients suspected of having deep venous thrombosis or pulmonary embolism was recruited from 2 participating centers. STA-Liatest D-dimer assay, clinical pretest probability assessment and diagnostic imaging test including complete compression ultrasonography or computed tomography pulmonary angiography were performed among all participants. The performance of D-dimer test was assessed with an age-adjusted D-dimer cut-off (age×0.01 μg/ml in patients aged >50 years) and with conventional cut-off (0.5 μg per ml at all ages).

Results: A total of 594 eligible outpatients were included in this study and VTE was diagnosed in 195 (32.8%) patients. In those patients with a low or moderate pretest probability (n=373), the increase in the proportion of patients with a D-dimer below the age-adjusted cut-off value compared with the conventional cut-off value was 5.9% (95% confidence interval; 3.8-8.7%). The sensitivity, specificity and negative predictive value of STA-Liatest D-dimer test were 95.0% (83.5-98.6%), 84.1% (79.8-87.6%) and 99.3% (97.5-99.8%), respectively, using the age-adapted diagnostic strategy.

Conclusions: The application of age-adjusted cut-off of D-dimer test combined with clinical probability greatly increases the proportion of Chinese older outpatients in whom VTE can be safely excluded.

tienanzhu@gmail.com

Notes:

J Blood Disord Transfus
ISSN: 2155-9864 JBDT, an open access journal

Hematology 2015
November 02-04, 2015

Volume 6, Issue 5

Page 113