

## **PANENDOSCOPY INDUCED SICKLE CELL CRISIS- THE FIRST CASE REPORT**

V.Arya, M.D., Y.Arya, M.D., S.Daggubati, M.D., S.Bhaskar, M.D., P.Sharma, M.D., J.Lo, M.D.

Wyckoff Heights Medical Center, Brooklyn, New York

**Background:** The diagnostic upper endoscopy examination is extremely safe and most complications are due in large part to sedative and analgesic medications. This is the first reported case of sickle cell crisis after EGD.

**Case report:** A 42 year old Hispanic female with past medical history of sickle thalassaemia, bronchial asthma underwent panendoscopy for the evaluation of epigastric abdominal pain and heart burn. The vital signs were within normal limits. Hgb was 11g/dl, Hct 34.7% MCV 67.9fl. After local xylocaine spray to oropharyngeal area, diazepam 3 mg intravenously was given. The registered nurse monitored BP 140/63mm of Hg, PR 85/min and Pulse Oxygen 98% before the procedure at 9:45 Am. After the procedure at 9:50 am the BP was 174/96 mm of Hg, PR 102/mm, Respiratory Rate 18/min and pulse oxygen 98%. The upper endoscopy showed small hiatal hernia and mild gastritis. The patients complained of severe headaches/bone pains and chest pains. She also complained of mild itching on right forearm at intravenous site. EKG was normal. At this time the diagnosis of sickle cell crisis was entertained. IV Demerol 12.5mg with IV Fluids 125 cc/hr were both given. Oxygen supplementation was started. The Hgb was 10.4g/dl, Hct 32.7%. The retic count was 4%. The Hgb electrophoresis revealed HbS 70% , HbA 25.8%, HbA2 4.2%. The hospital course was uneventful and patient was discharged home after 7 days.

**Conclusion:** Although hypoxia was not reported during endoscopy in our patient, esophageal intubation usually results in some fall in pulse oximeter readings. We suggest that the practice guidelines for sedation and analgesia by non-anesthesiologist should incorporate sickle cell trait, sickle cell disease and sickle thalassaemia as a comorbid condition with high risk for analgesia and sedation during endoscopy.