Pacific Air Forces

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Medical Guidelines for Air Travel: Anemia



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Background

- Definitions
- Anemia
 - Sickle Cell Disease
- Sickle Cell Trait
- Airline Travel Recommendations



- Aerospace Medical Association (AsMA) Air Transport Medicine Committee requested in 2014 to update the 2003 anemia guidelines.
- Comprehensive and systematic review of the current scientific literature was performed to develop fitness to fly guidelines for the airline traveler with anemia.
- Limitations in adapting as clinical guidance by AsMA
 - Paucity of published evidence based research
 - Expert opinion and consensus





- Anemia
 - Defined by the World Health Organization (WHO) as:
 - Reduction in the number of red blood cells
 - Hgb < 13.0 g/dL (130 g/L) adult male</p>
 - Hgb < 12.0 g/dL (120 g/L) adult female (non-gravid)</p>
 - Oxygen-carrying capacity is insufficient to meet physiologic needs
- Global prevalence estimated at 25% and 400 types
- Aeromedical implications with reduced oxygen environment of flight
 - Tissue hypoxia
 - Lightheadedness
 - Dyspnea on exertion
 - Syncope



Anemia

- Caution for airline travelers with Hgb < 8.5 g/dL (85 g/L)</p>
 - Considerable variation in compensation
 - Comorbidities cardiac, cerebellar, pulmonary, etc.
 - Level of Fitness
 - Ambulate 50m or climb a flight of stairs
 - Age
 - Obesity
 - Smoking 15% reduction in O₂ carrying capacity
 - Alcohol use
 - Chronic/stable and not related to active bleeding





- Hereditary blood disorders with hemoglobin abnormalities
 - 16 genotypes described
 - Sickle Cell Anemia (Hb S/S)
 - Sickle Cell Hemoglobin C Disease (Hb S/C)
 - Sickle Cell β-Thalassemia (Hb S/β⁰ and Hb S/β⁺- thalassemia)
 - Under low O₂ tension can form abnormal rigid sickle shapes
 - Can occur as low as 1,500m (4,921ft) MSL
 - Vaso-occlusive crisis
 - Splenic sequestration
 - Hepatic sequestration
 - Ischemic/hemorrhagic stroke
 - Microvascular occlusive pain crisis



Sickle Cell Disease

- Hb S/S and Hb S/β⁰- thalassemia
 - Spleen spontaneously autoinfarcts (fibrosis)
 - Anecdotal reports/retrospective studies in literature traveling without supplemental O₂ quantify risk of crisis as low
 - Crisis can be life-threatening
 - EASA/FAA airliners must provide cabin altitude of at least 2,438m (8,000ft) MSL
 - Temporary cabin elevations authorized for traffic/weather
 - Predicting with certainty the stressors of flight is difficult
 - Should not travel by air without supplemental O₂
 - 2 L/min O₂ flow via nasal cannula (NC)



Sickle Cell Disease

- Hb S/C and Hb S/β+- thalassemia
 - At greater risk of an occlusive crisis
 - Numerous case reports of splenic infarction and sequestration during commercial air travel
 - Death attributed to long distance air travel (Hb S/C)

- Predicting with certainty the stressors of flight is difficult
 - Should not travel by air without supplemental O₂
 - 2 L/min flow via NC



Sickle Cell Trait

- Sickle Cell Trait (Hb S/A)
 - Definition of Hb S/A ≤ 45% Hb S
 - Tends to have little aeromedical significance
 - Sickling at rest tends to occur at 6,400m (21,000ft) MSL
 - One rare case report of splenic sequestration on pressurized transcontinental flight
 - Presented as diffuse abdominal pain
 - Occurred after consumption of an alcoholic beverage



Airline Travel Recommendations

- Caution advised for any airline traveler with Hgb < 8.5 g/dL</p>
 - Chronic not related to bleeding
 - Considerable compensatory variations among individuals
 - Comorbidities
- Sickle Cell Disease
 - Hb S/C and Hb S/β+- thalassemia at greatest risk
 - Crisis potential life threatening
 - Estimation of cabin altitude/stresses of flight inexact
 - Travel with supplemental O₂ (2 L/min NC)
- Sickle Cell Trait
 - If asymptomatic no restrictions recommended



Airline Travel Recommendations

- Considerations
 - Correct the underlying cause
 - Postpone travel
 - In-flight O₂ (2 L/min NC)
 - Stay well hydrated
 - Refrain from alcoholic beverages
 - Refrain from pre-flight tobacco use
 - Dress warmly for the cooler environment
 - Don't travel ill
 - Ambulate frequently for short durations



Questions?



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