

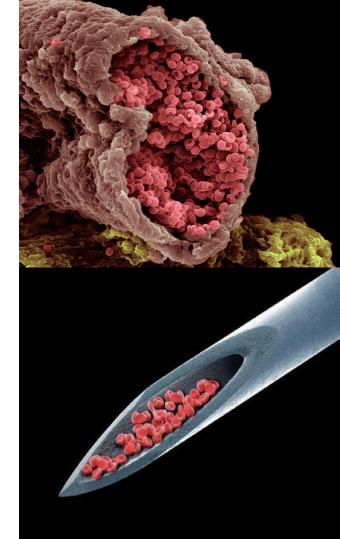
Lecture 6 Normal and Abnormal Red Blood Cells Morphology



Outlines

- I. Normal Red Blood Cell Morphology
- II. The Different Types of Variations of Red

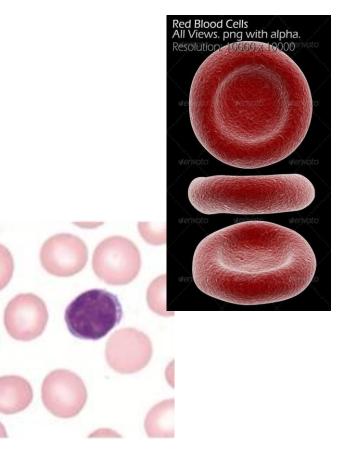
Blood Cells Abnormalities.



I. Normal Red Blood Cell Morphology

Red blood cell morphology

- Normal RBCs are biconcave in shape with a central pale area that accounts for 1/3 of the diameter of the cell.
- RBCs with normal color are described as normochromic.
- The average size of RBCs is about 7-8 μm in diameter (Normocytic).



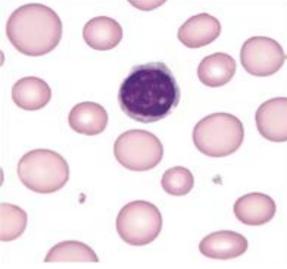
II. Variations of Red Blood Cells Abnormalities

Red Cell Abnormalities

- Causes of the presence of abnormal RBC:
 - 1) Abnormal erythropoiesis (production of RBC only).
 - 2) Decreased Hb formation.
 - 3) RBC damage after production.
 - 4) Changes due to an increase in Erythropoiesis.
- These causes result in the following variation:
 - 1. Anisocytosis \rightarrow variation in <u>size</u> (Microcytic or Macrocytic).
 - 2. Poikilocytosis \rightarrow variation in <u>shape</u>.
 - 3. Variation in <u>color</u> \rightarrow (Hypochromic or hyperchromic).
 - 4. Variation in content \rightarrow The presence of <u>inclusions</u> in erythrocytes.

1. Anisocytosis

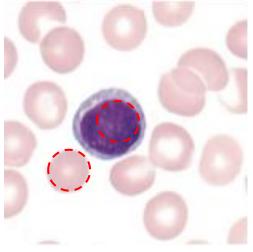
- Anisocytosis (aniso-unequal) is the variation in red blood cell <u>diameter</u> (or <u>volume</u>) on a blood film.
- This variation correlates with the **red blood cell distribution** width (RDW).
 - **Macrocytic**: associated with Megaloblastic anemias and alcohol intake.
 - **Microcytic**: Microcytosis is characteristic of iron deficiency and thalassemia.



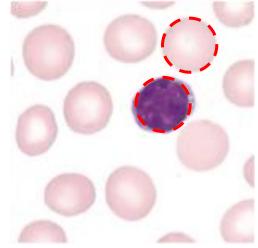
A *heterogeneous* population of erythrocytes, indicating *anisocytosis (RDW > 14.5%)*.

1. Anisocytosis

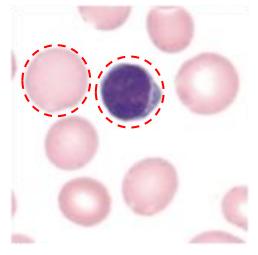
* Remember, comparison of the **RBC** with **normal small mature lymphocytes** is helpful in classifying them as normocytic, microcytic, or macrocytic.



Microcytes (MCV < 80 fL.).



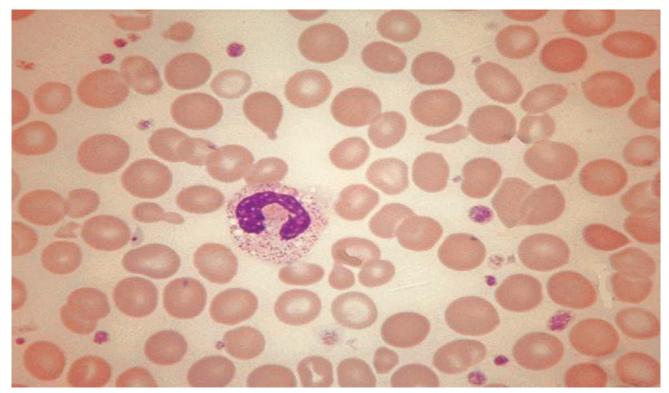
Normocytes (MCV 80-100 fL.).



Macrocytes (MCV > 100 fL.).

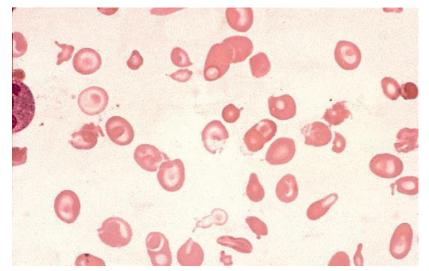
Normal erythrocytes are approximately the same size as the nucleus of a small lymphocyte.

1. Anisocytosis

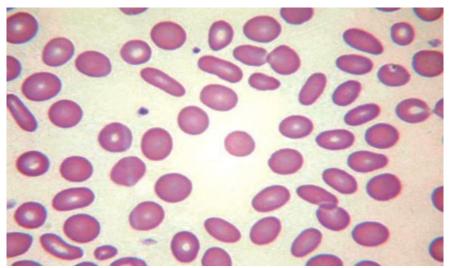


Shows moderate anisocytosis and poikilocytosis.

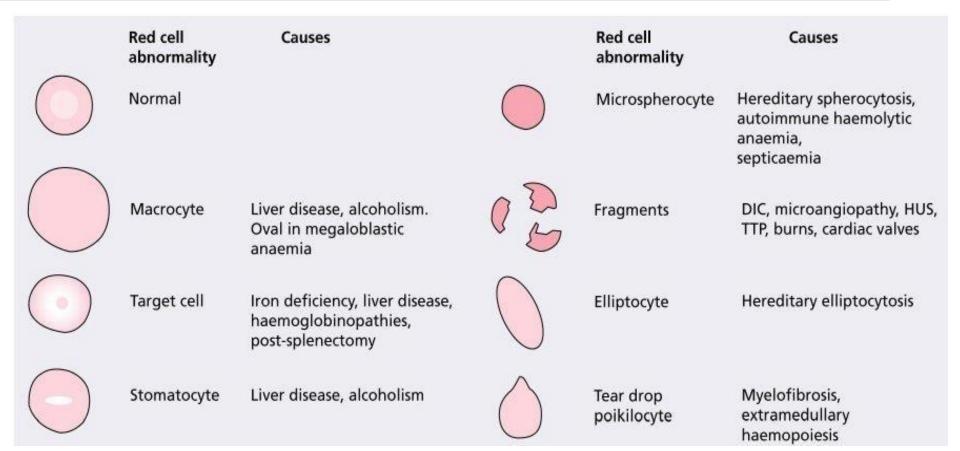
- **Poikilocytosis** (poikilo-varied): variation in <u>shape</u>.
- Poikilocytosis is a general term for the presence of <u>abnormally shaped</u> red blood cells.

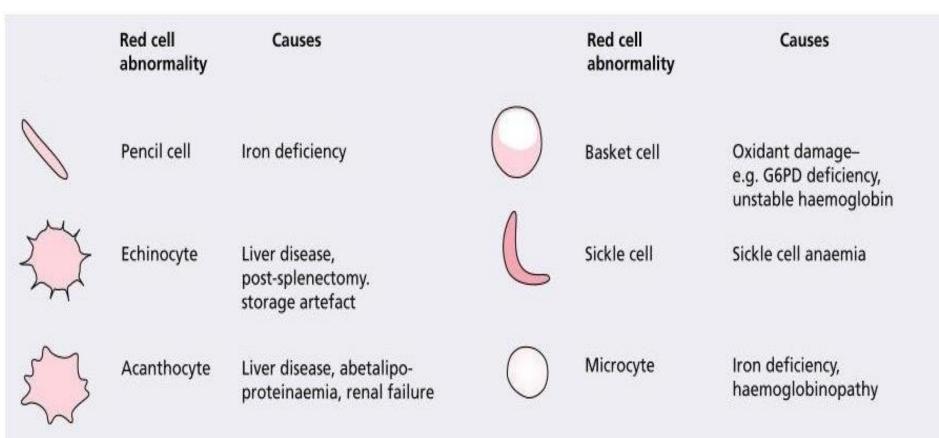


Shows marked anisocytosis and poikilocytosis.



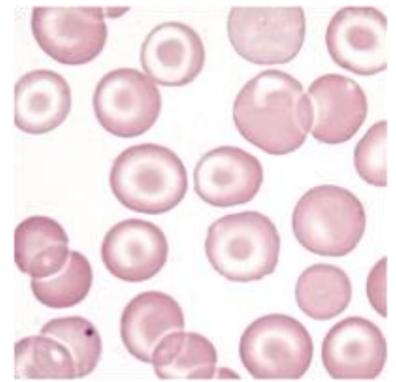
Shows many erythrocytes in elliptical or oval shape.





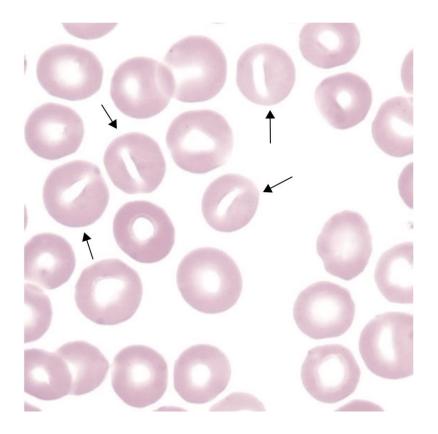
Target cells

- Shape: Bull's eye; central concentration of hemoglobin surrounded by a colorless area with a peripheral ring of hemoglobin resembling bull's eye.
- Associated with: Hemoglobinopathies, thalassemia, iron deficiency anemia, splenectomy, obstructive liver disease



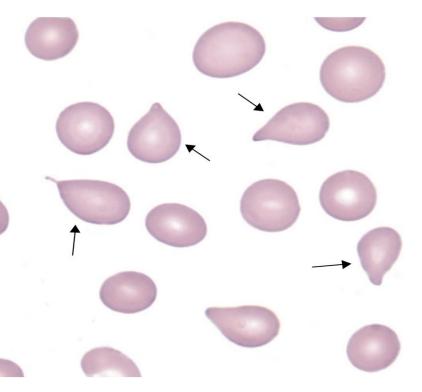
Stomatocytes

- **Description:** Erythrocyte with a slitlike area of central pallor (similar to a mouth or stoma).
- Associated with: Hereditary stomatocytosis, alcoholism, liver disease.



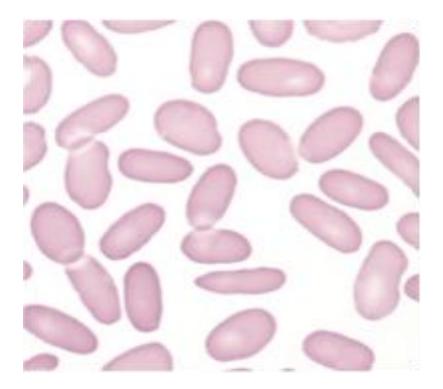
Tear drop cells

- **Description:** Erythrocyte shaped like a tear drop or pear; may have one blunt projection.
- Associated with: Primary myelofibrosis, thalassemia, and other causes of extramedullary hematopoiesis.



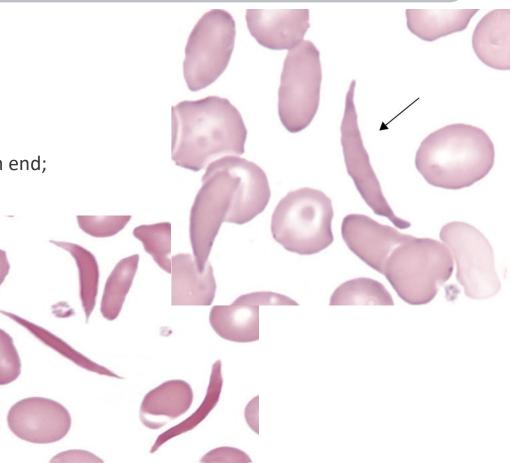
Elliptocytes

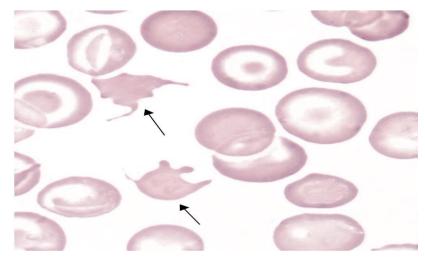
- **Description:** Elliptocyte—cigar-shaped erythrocyte.
- Associated with: Hereditary elliptocytosis.



Sickle cells

- Shape: Elongated cell with a point on each end; may be curved or S-shaped
- Composition: Hemoglobin S
- Associated with: Sickle Cell Anemia (Homozygous hemoglobin S patient).

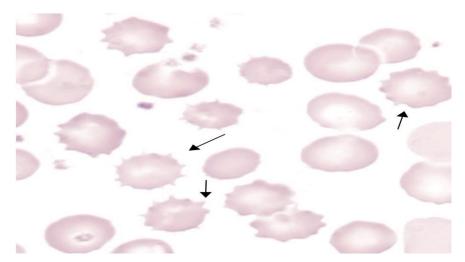




Acanthocytes

Description: Erythrocytes <u>with irregularly spaced</u> <u>projections</u> that vary in width, length, and number; usually dense, lacking central pallor.

Associated with: Severe liver disease, splenectomy.

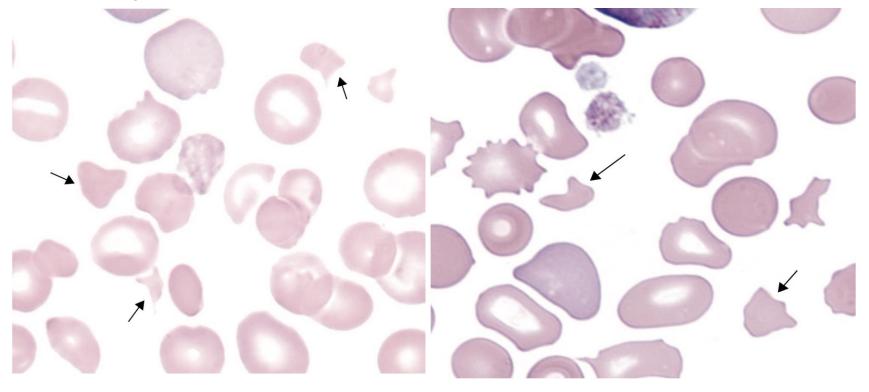


Echinocytes/burr cells

Description: Erythrocyte with short, <u>evenly spaced</u> <u>projections</u>, usually with central pallor.

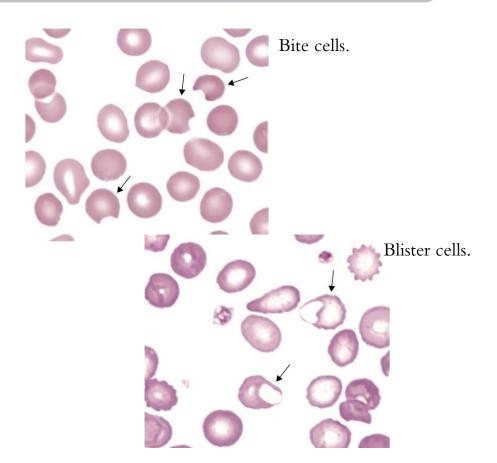
Associated with: Uremia, pyruvate kinase deficiency, microangiopathic hemolytic anemia, neonates (especially premature), storage artifacts.

Schistocytes are fragmented parts of a red blood cell.

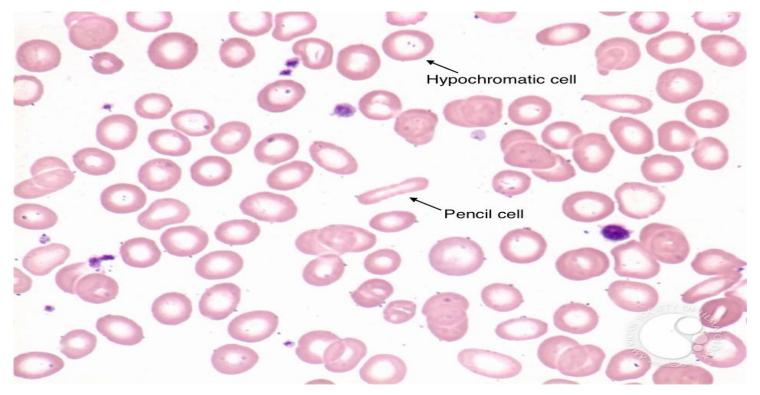


Bite and blister cells

- Associated with: G6PD deficiency.
- Bite and blister cells are the results of splenic pitting of Heinz bodies.

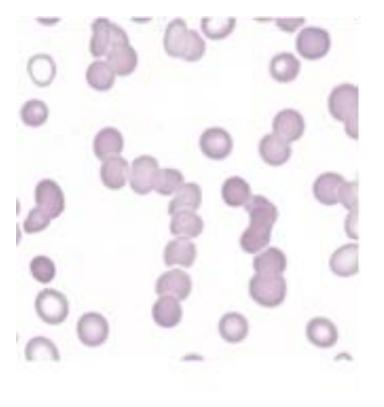


Pencil cell Associated with iron deficiency anemia (IDA).



ROULEAUX

- Description: Erythrocytes are arranged in <u>rows like</u> <u>stacks of coins.</u>
- Associated with: Acute and chronic <u>inflammatory</u> disorders, plasma cell <u>myeloma(increased</u> <u>production of Antibody).</u>



3. Variation in color of Erythrocytes

- Hypochromia (hypo-under): pale red cell.
 - Associated with: Iron deficiency anemia (commonly), thalassemia.

- Hyperchromasia (hyper-over): deep staining of the red cells with a lack of central pallor.
- Polychromesia (Poly-many and chromesia color) is present due to <u>immature</u> Hyperchromic RBC <u>red blood cells</u> which uptake Eosin Y Red (Hb) and Azure B Blue (RNA).
 They have a grayish-blue color.
 - Associated with: Acute and chronic hemorrhage, hemolysis, effective treatment for anemia, neonates.

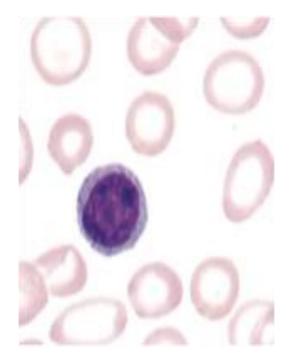


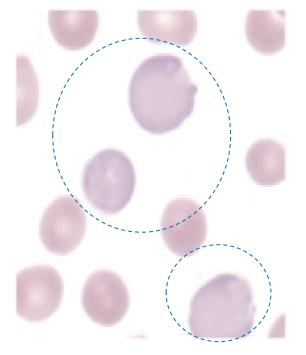


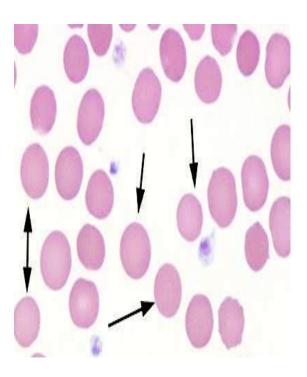




3. Variation in color of Erythrocytes





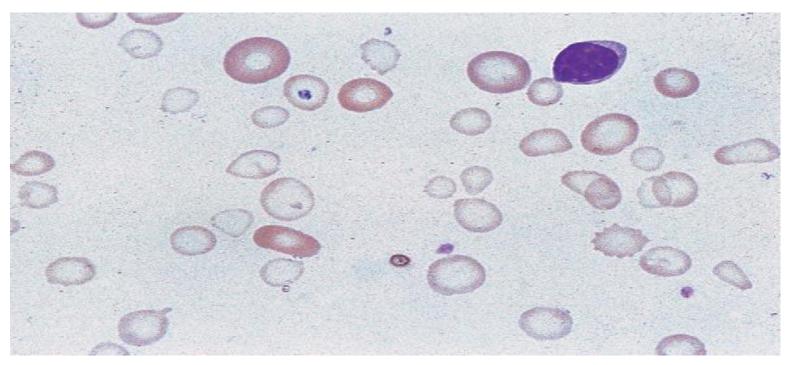


Hyperchromic erythrocytes

Hypochromic erythrocytes

Polychromatic RBCs containing RNA residues

3. Variation in color of Erythrocytes

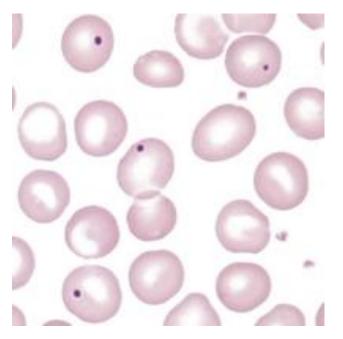


Shows a marked degree of microcytosis, marked anisocytosis, and mild poikilocytosis;

Common RBC Inclusions	Cartoon Image	Inclusion	May be associated with
Howell Jolly Bodies	0	DNA	Hyposplenism Asplenism Severe hemolytic anemia
Heinz Bodies	Supravital stain	Hemoglobin	G6PD deficiency Oxidant drugs Unstable hemoglobin
Pappenheimer Bodies	0	Iron deposits	Thalassemia Sideroblastic anemia Hemolytic anemia Post-splenectomy
Hemoglobin H Inclusion	Supravital stain	Hemoglobin	Hemoglobin H disease
Basophilic Stippling	0	Ribosomes	Lead poisoning Thalassemia Sickle cell anemia MDS

4.1 Howell-Jolly bodies

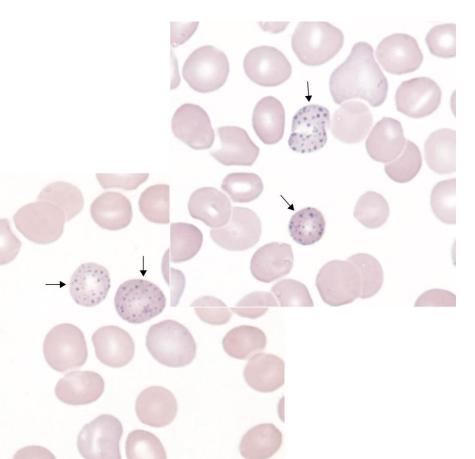
- Shape: Round to oval
- Number Per Cell: Usually 1.
- Composition: DNA
- Associated with: Splenectomy, hyposplenism, megaloblastic anemia, hemolytic anemia



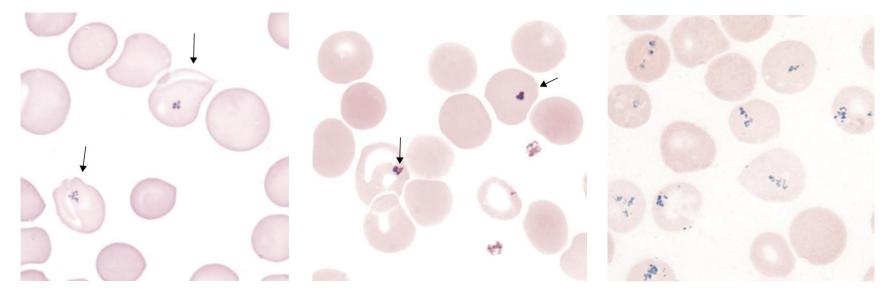
Howell-Jolly bodies.

4.2 Basophilic stippling

- Shape: Fine or coarse punctate granules.
- Number Per Cell: <u>Numerous</u> with fairly even distribution.
- Composition: <u>RNA</u>.
- Associated with: Lead intoxication, thalassemia, abnormal heme synthesis.



4.3 Pappenheimer bodies



Pappenheimer bodies (Wright stain). Pappenheimer bodies (Wright stain).

Siderotic granules (iron stain).

Shape: Fine irregular granules in <u>clusters</u>

Number Per Cell: Usually one cluster; may be multiples; often at the periphery of the cell.

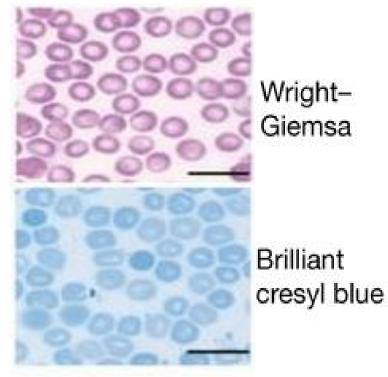
Composition: Iron

Associated with: Splenectomy, hemolytic anemia, sideroblastic anemia, megaloblastic anemia, hemoglobinopathies

4. Inclusions With Supravital Stain

Inclusions Observed With Supravital Stains are:

- 1. Heinz bodies.
- 2. Hemoglobin H.
- 3. Reticulocytes.
- The most commonly used supravital stains in hematology are <u>new methylene blue</u> and <u>brilliant</u> <u>cresyl blue</u>.



4.4 Heinz bodies

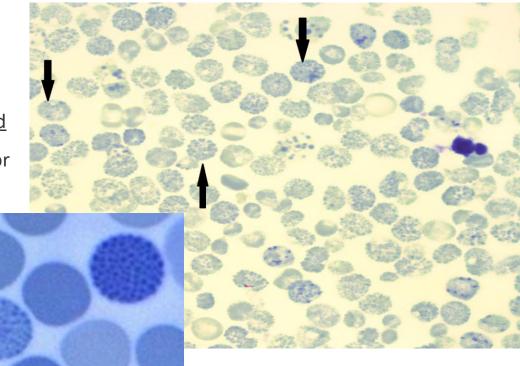
- Cell: Mature erythrocyte
- Composition: <u>Precipitated oxidized</u>
 <u>hemoglobin.</u>
- Number: Single or multiple, generally membrane- Bound
- Associated with: Unstable hemoglobin, some hemoglobinopathies, some erythrocyte enzyme deficiencies (e.g., glucose-6phosphate dehydrogenase(G6PD)).



Stained with New Methylene Blue

4.5 Hemoglobin H

- **Cell**: Mature erythrocyte.
- Composition: <u>Hemoglobin beta</u> <u>chains.</u>
- Number: <u>Multiple evenly dispersed</u> granules described <u>as "golf balls"</u> or "raspberries"
- Color: Dark blue



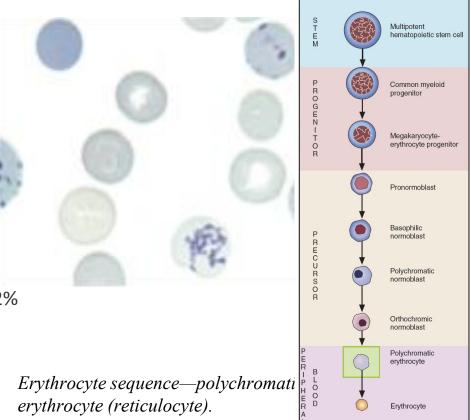
4.6 Reticulocytes

- **Cell**: Anuclear <u>immature</u> erythrocyte.
- Composition: Precipitated RNA
- Number: >2 per cell
- Color: Dark blue

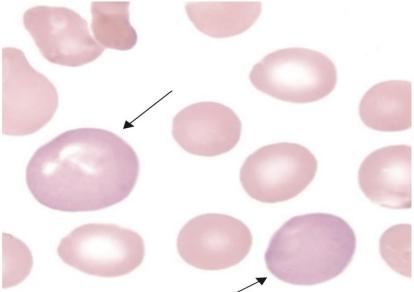
Reference Interval:

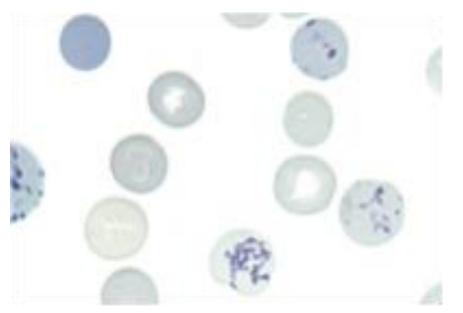
- Bone Marrow: 1%
- Peripheral Blood: 0.5% to 2.0%
- If present in peripheral blood, more than 2% is associated with <u>Hemolytic anemias</u> and

Blood loss.



4.6 Reticulocytes

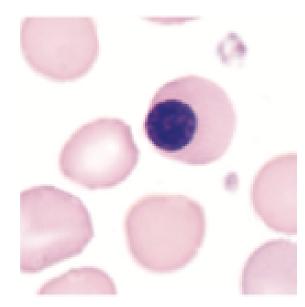




Polychromatic erythrocyte stained with Wright stains appears <u>Slight gray-blue color</u>.

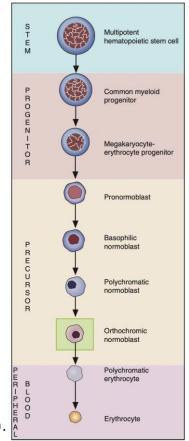
Reticulocytes Stained with <u>supravital stain (new</u> <u>methylene blue)</u> shows precipitated ribosomal material.

4.7 Nucleated RBCs



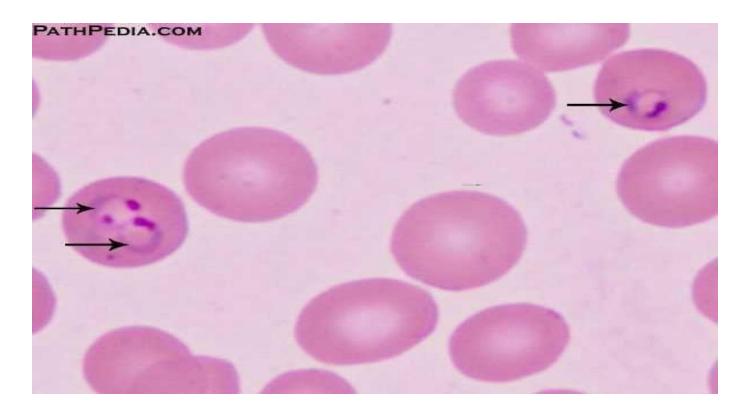
Reference Interval:

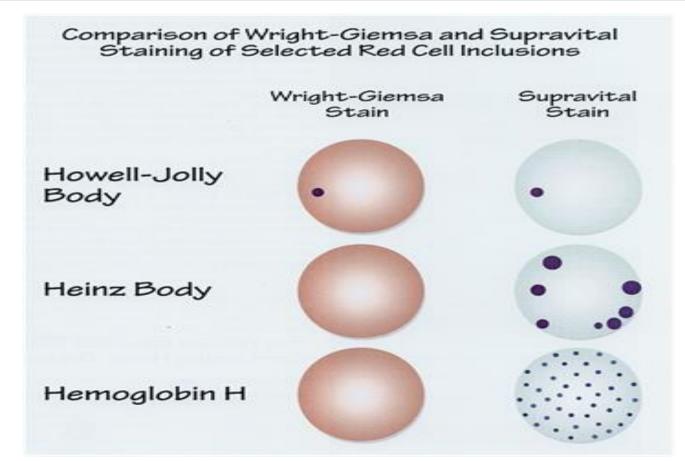
- Bone Marrow: 5% to 10%
- Peripheral Blood: 0%
- If present in peripheral blood is associated with <u>ineffective</u> <u>erythropoiesis.</u>

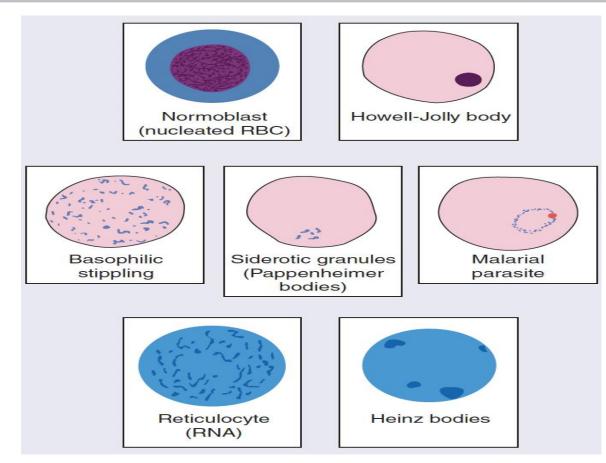


Erythrocyte sequence—orthochromatic normoblast (nucleated RBCs).

4.8 Plasmodium spp. (malaria)







Red blood cell (RBC) inclusions which may be seen in the peripheral blood film in various conditions.

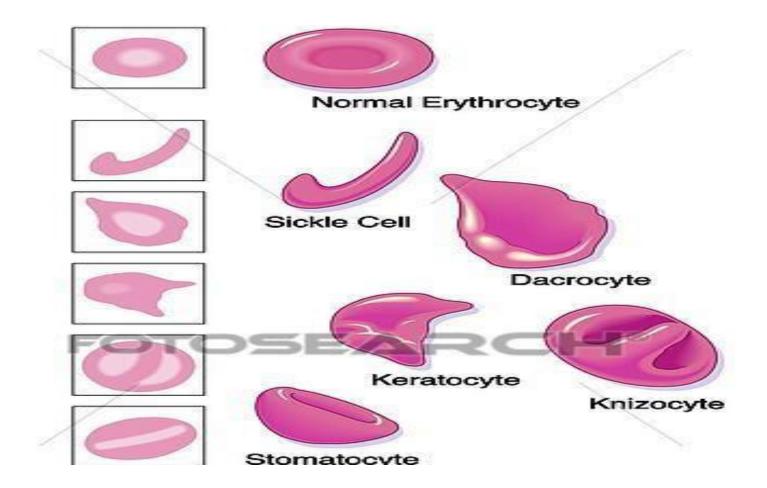
- The reticulocyte RNA and Heinz bodies are only demonstrated by <u>supravital staining (e.g.</u> with new methylene blue).
 - Heinz bodies are oxidized denatured haemoglobin.
 - Siderotic granules (Pappenheimer bodies) contain iron. They are purple on conventional staining but blue with Perls' stain.
- The Howell–Jolly body is a DNA remnant. Basophilic stippling is denatured RNA.

TABLE 12-1 Staining Qualities of Erythrocyte Inclusion Bodies

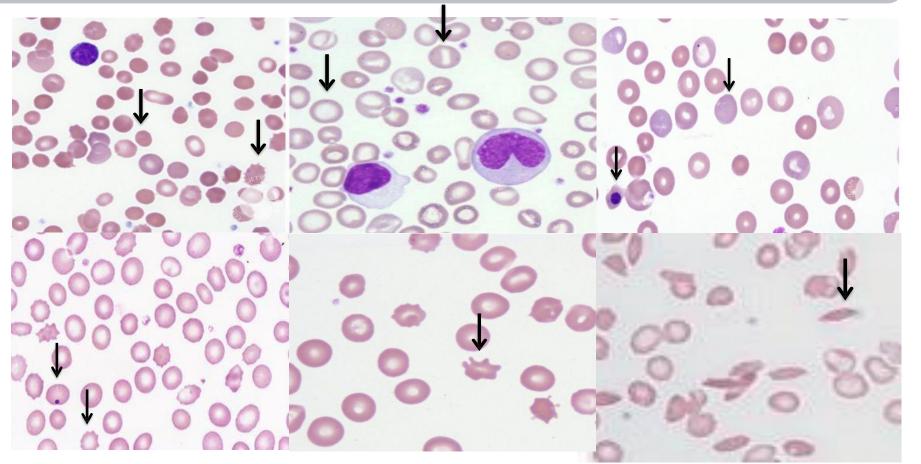
Inclusion	Composition	Wright- Giemsa Stain	New Methylene Blue (or Other Supravital Stain)	Prussian Blue (Iron)
Howell-Jolly body	DNA	+	+	0
Basophilic stippling	RNA	+	+	0
Pappenheimer body	Iron	+	+	+
Cabot ring	Remnant of mitotic spindle	+	+	0
Heinz body	Unstable hemoglobin	0	+	0
Hemoglobin H	β chains	0	+	0

+, Positive; 0, negative.

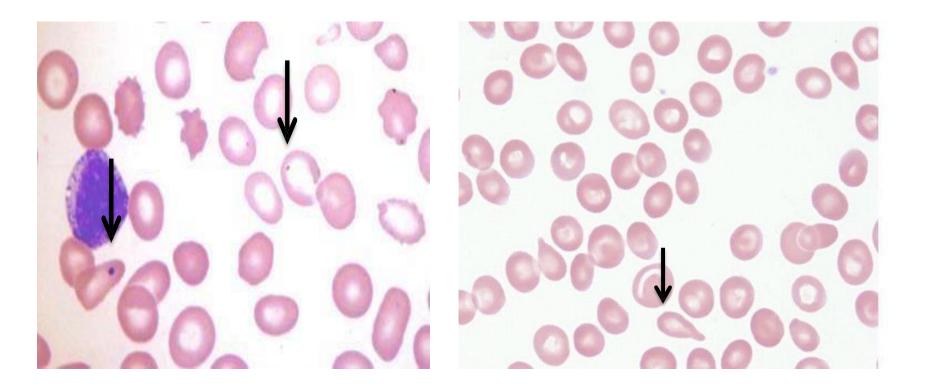
RED BLOOD CELL MORPHOLOGY								
Size variation	Hemoglobin distribution	Shape variation		Inclusions	Red cell distribution			
Normal	Hypochromia	Target cell	Acanthocyte	Pappenheimer bodies (siderotic granules)	Agglutination			
Microcyte	O ²⁺	Spherocyte	Helmet cell (fragmented cell)	Cabot's ring				
Macrocyte	O ³⁺	Ovalocyte	Schistocyte (fragmented cell)	Basophilic stippling	Rouleaux			
Oval macrocyte	4 ⁺	Stomatocyte	Tear drop	Howell-Jolly	6			
Hypochromic macrocyte	Polychromasia	Sickle cell	Burr cell	Crystal formation				
	(Reticulocyte)			HbSC	HbC			



Review



Review



Microscopy check list

Practice finding all of the following cells:

- 1. Normal red cell
- 2. Elleptocyte
- 3. Schistocyte
- 4. Microcytic hypochromic cell
- 5. Macrocytic cell
- 6. Sickle cell
- 7. Target cell
- 8. Normocytic hypochromic cell
- 9. Tear drop cell
- **10**. Howel jolly bodies
- **11**. Bite cell
- 12. Polychromisia
- 13. Nucleated RBC
- 15. Spherocyte (hyperchromic microcytic)
- 16. Malaria