

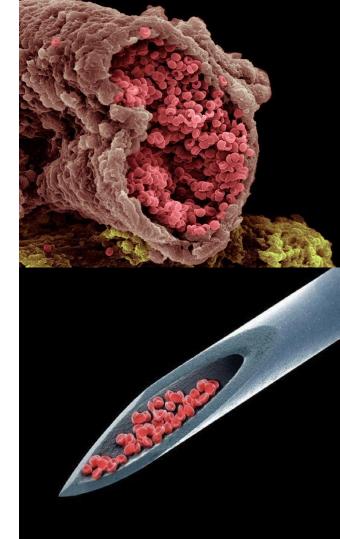
#### Lecture 6 Normal and Abnormal Red Blood Cells Morphology



#### **Outlines**

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

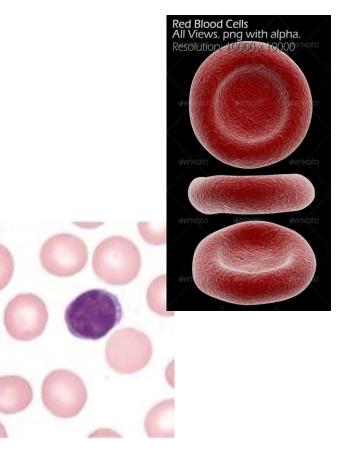
Blood Cells Abnormalities.



#### 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).



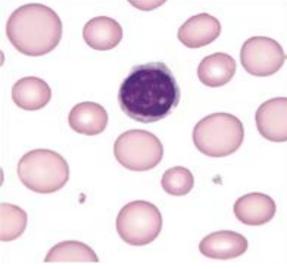
#### II. Variations of Red Blood Cells Abnormalities

## **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

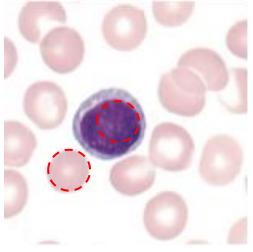
- Anisocytosis (aniso-unequal) is the variation in red blood cell <u>diameter</u> (or <u>volume</u>) on a blood film.
- This variation correlates with the **red blood cell distribution** width (RDW).
  - **Macrocytic**: associated with Megaloblastic anemias and alcohol intake.
  - **Microcytic**: Microcytosis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



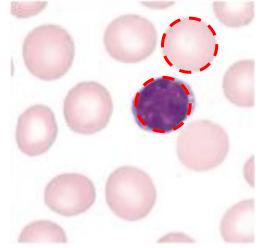
A *heterogeneous* population of erythrocytes, indicating *anisocytosis (RDW > 14.5%)*.

## 1. Anisocytosis

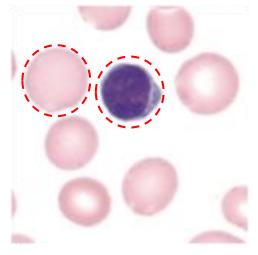
\* Remember, comparison of the **RBC** with **normal small mature lymphocytes** is helpful in classifying them as normocytic, microcytic, or macrocytic.



Microcytes (MCV < 80 fL.).



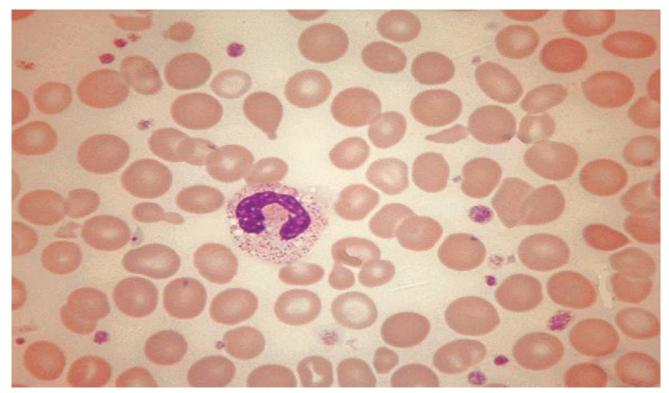
Normocytes (MCV 80-100 fL.).



Macrocytes (MCV > 100 fL.).

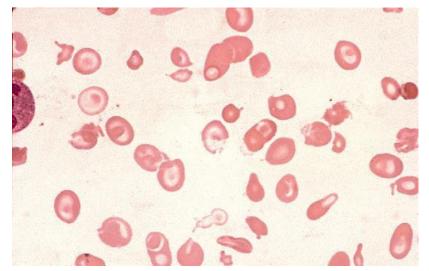
Normal erythrocytes are approximately the same size as the nucleus of a small lymphocyte.

### 1. Anisocytosis

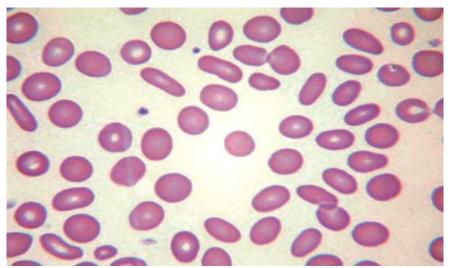


Shows moderate anisocytosis and poikilocytosis.

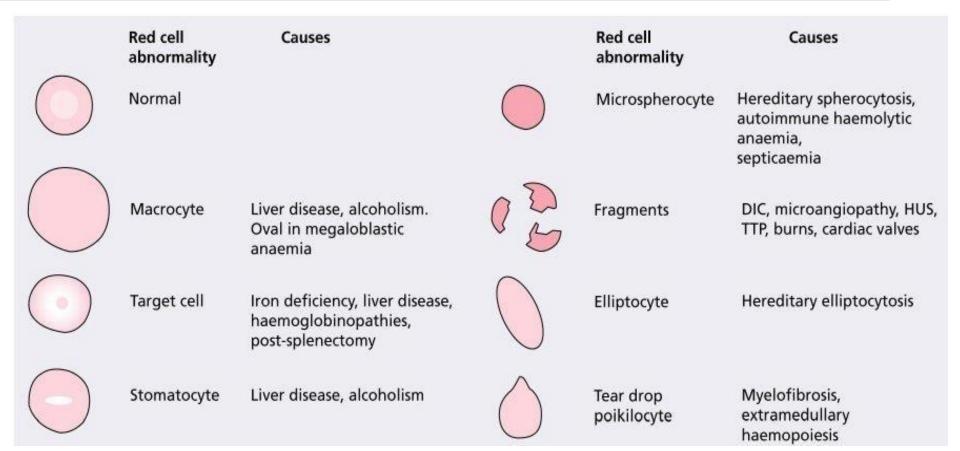
- **Poikilocytosis** (poikilo-varied): variation in <u>shape</u>.
- Poikilocytosis is a general term for the presence of <u>abnormally shaped</u> red blood cells.

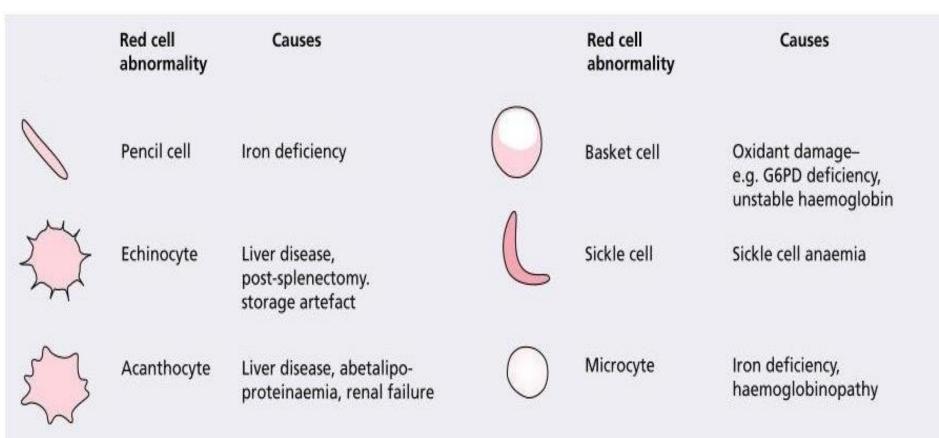


Shows marked anisocytosis and poikilocytosis.



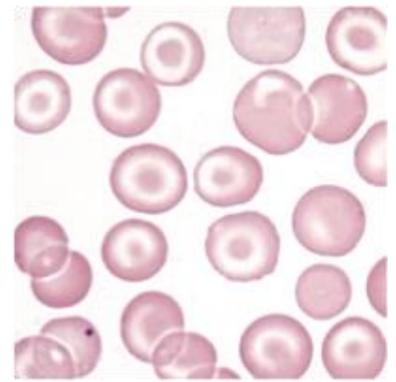
Shows many erythrocytes in elliptical or oval shape.





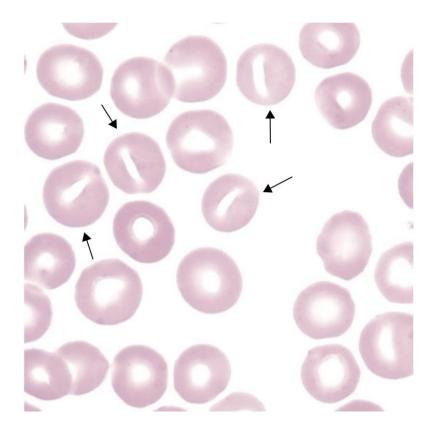
#### **Target cells**

- 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



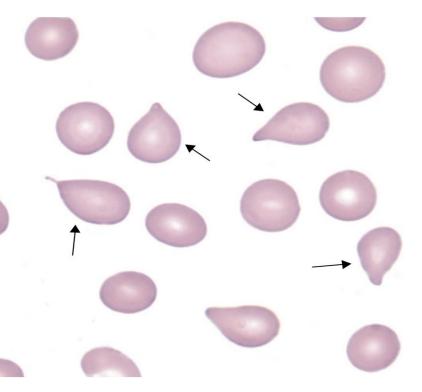
#### **Stomatocytes**

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



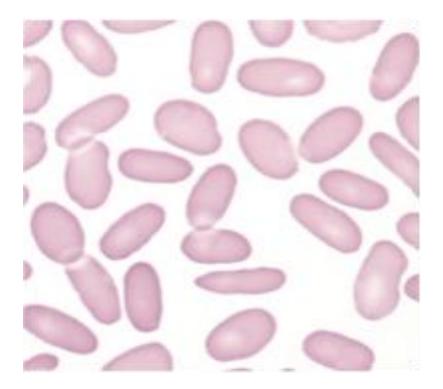
#### **Tear drop cells**

- **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.



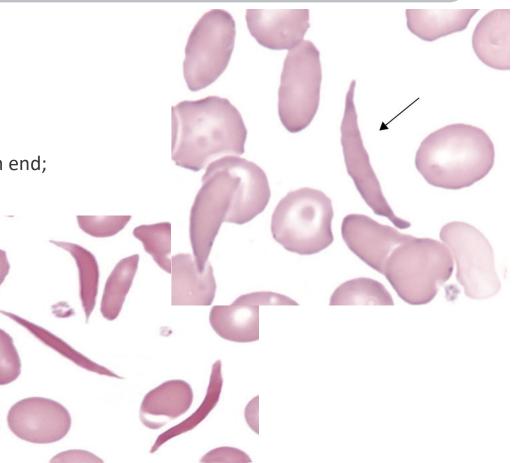
#### Elliptocytes

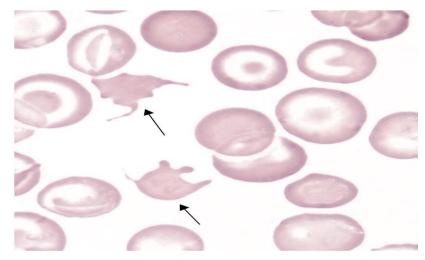
- **Description:** Elliptocyte—cigar-shaped erythrocyte.
- Associated with: Hereditary elliptocytosis.



#### 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).

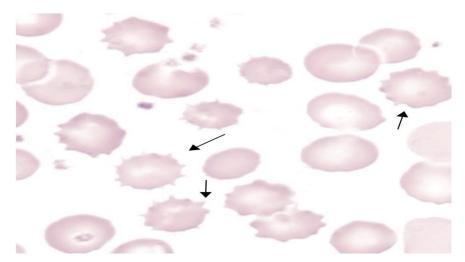




#### Acanthocytes

**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.

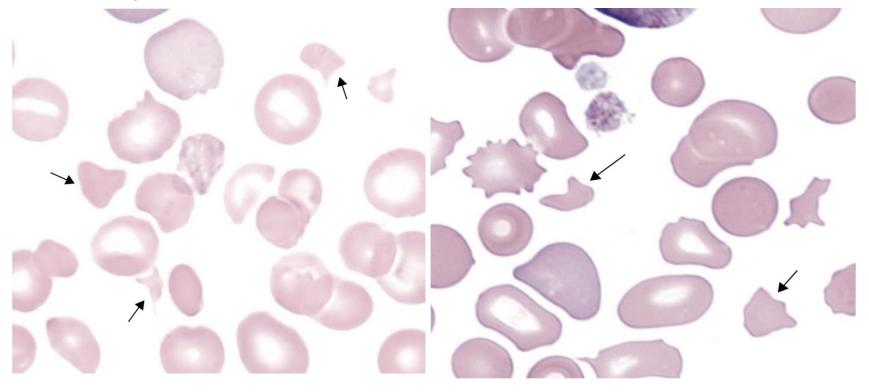


#### **Echinocytes/burr cells**

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

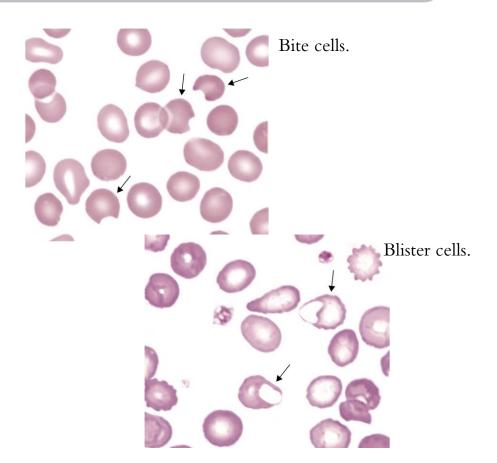
**Associated with:** Uremia, pyruvate kinase deficiency, microangiopathic hemolytic anemia, neonates (especially premature), storage artifacts.

**Schistocytes** are fragmented parts of a red blood cell.

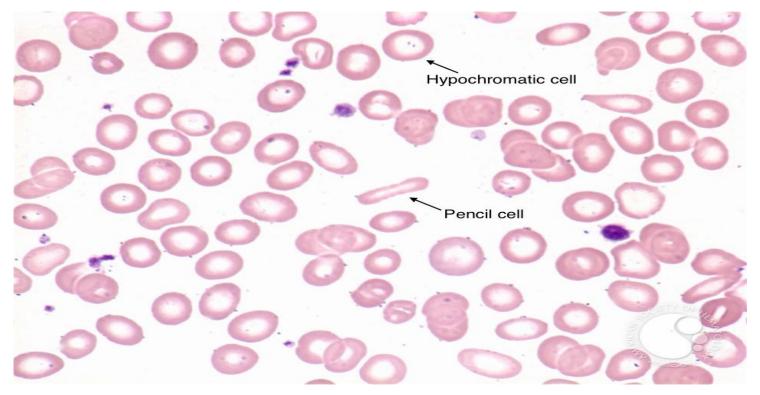


#### Bite and blister cells

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

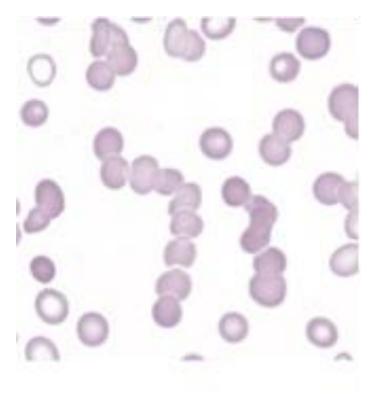


**Pencil cell** Associated with iron deficiency anemia (IDA).



#### 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.

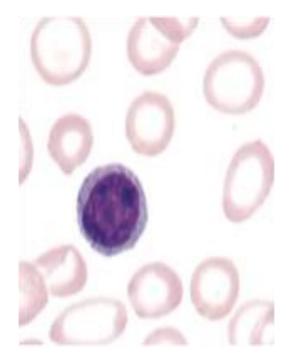


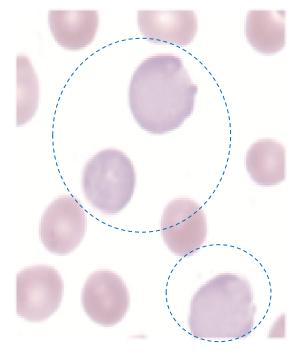


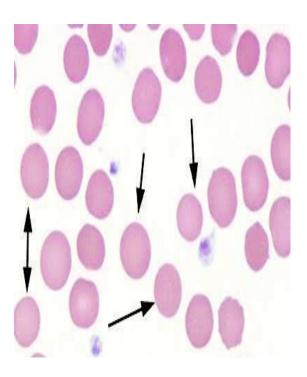




# 3. Variation in color of Erythrocytes





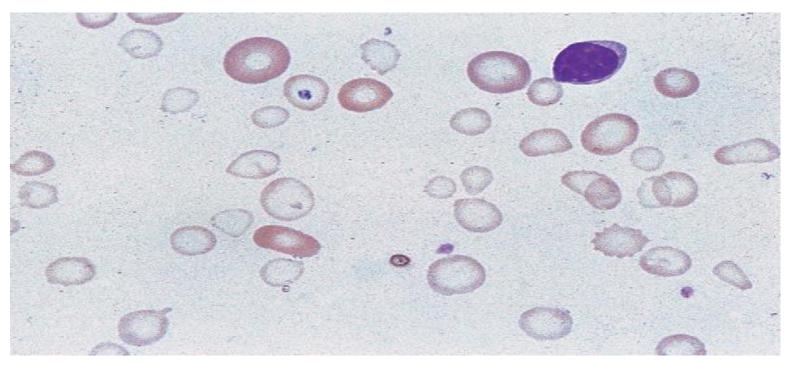


Hyperchromic erythrocytes

#### Hypochromic erythrocytes

**Polychromatic RBCs** containing RNA residues

# 3. Variation in color of Erythrocytes

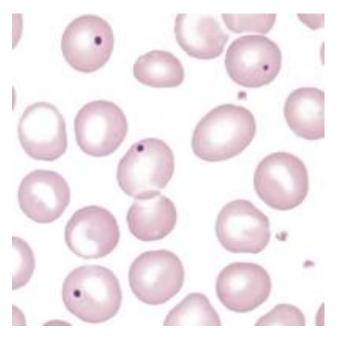


Shows a marked degree of microcytosis, marked anisocytosis, and mild poikilocytosis;

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
<b>Basophilic Stippling</b>	0	Ribosomes	Lead poisoning Thalassemia Sickle cell anemia MDS

## **4.1 Howell-Jolly bodies**

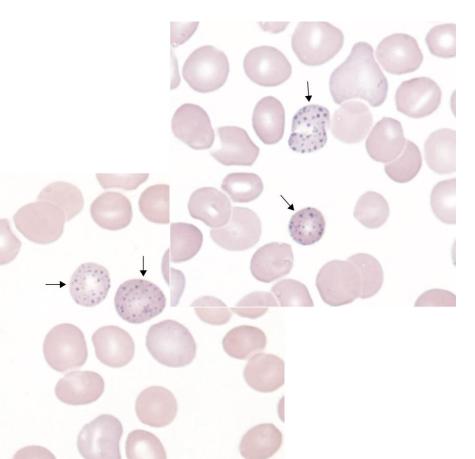
- Shape: Round to oval
- Number Per Cell: Usually 1.
- Composition: DNA
- Associated with: Splenectomy, hyposplenism, megaloblastic anemia, hemolytic anemia



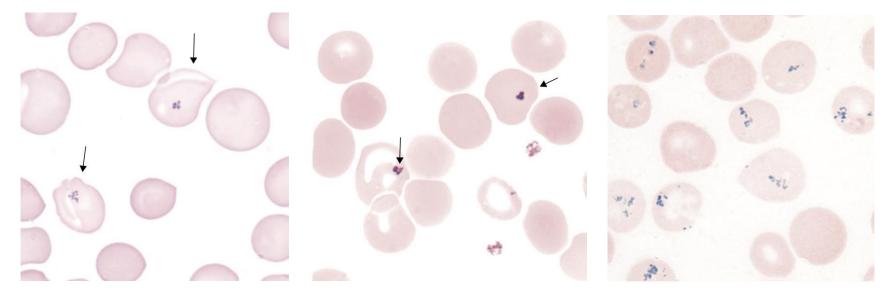
Howell-Jolly bodies.

# **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.

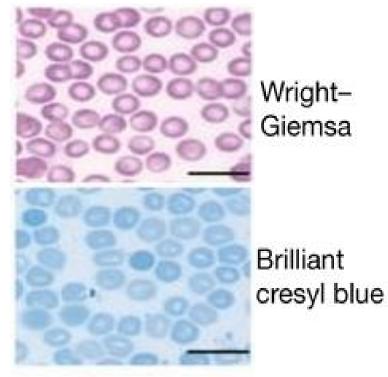
#### Composition: Iron

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

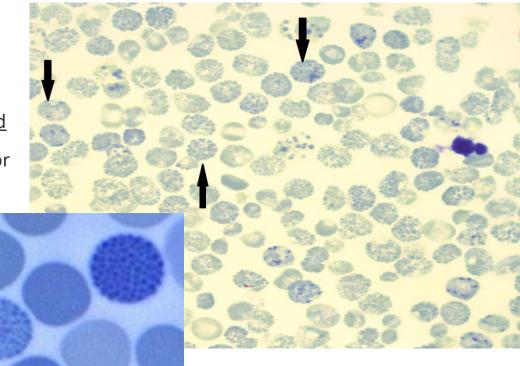
- Cell: Mature erythrocyte
- Composition: <u>Precipitated oxidized</u>
   <u>hemoglobin.</u>
- Number: Single or multiple, generally membrane- Bound
- Associated with: Unstable hemoglobin, some hemoglobinopathies, some erythrocyte enzyme deficiencies (e.g., glucose-6phosphate dehydrogenase(G6PD)).



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



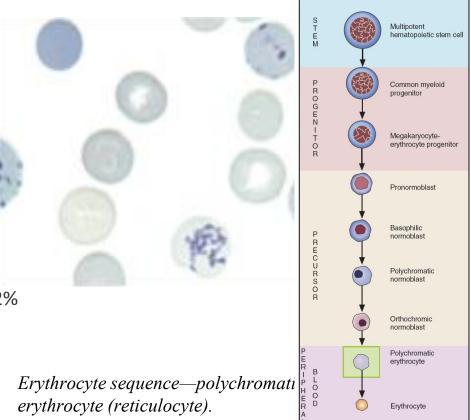
## **4.6 Reticulocytes**

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

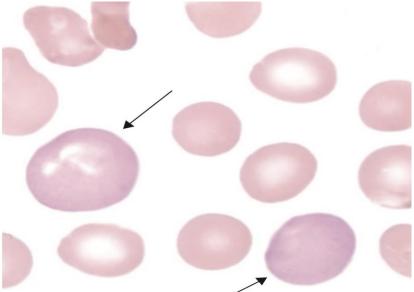
#### **Reference Interval:**

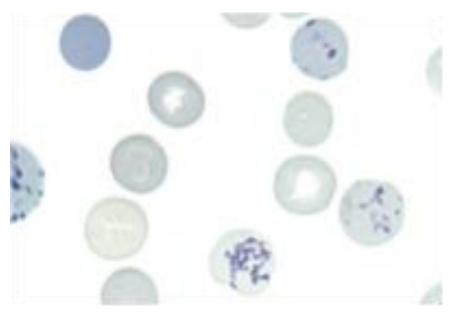
- Bone Marrow: 1%
- Peripheral Blood: 0.5% to 2.0%
- If present in peripheral blood, more than 2% is associated with <u>Hemolytic anemias</u> and

Blood loss.



### **4.6 Reticulocytes**

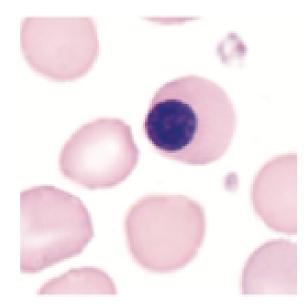




**Polychromatic erythrocyte** stained with Wright stains appears <u>Slight gray-blue color</u>.

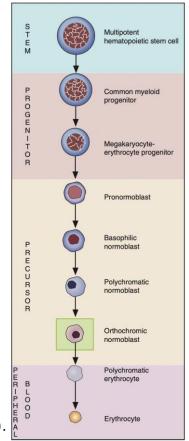
**Reticulocytes** Stained with <u>supravital stain (new</u> <u>methylene blue)</u> shows precipitated ribosomal material.

#### **4.7 Nucleated RBCs**



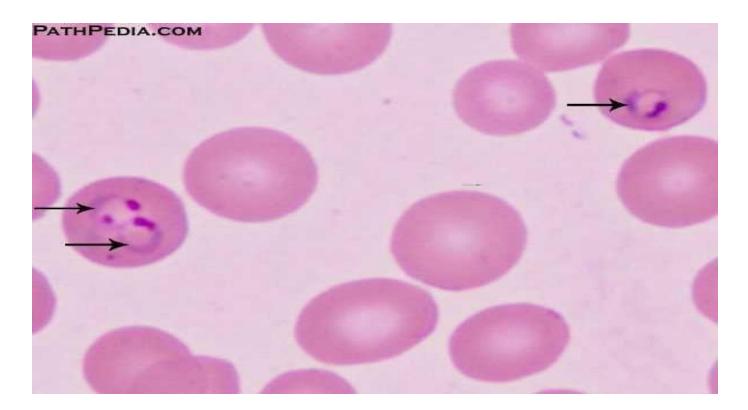
#### **Reference Interval:**

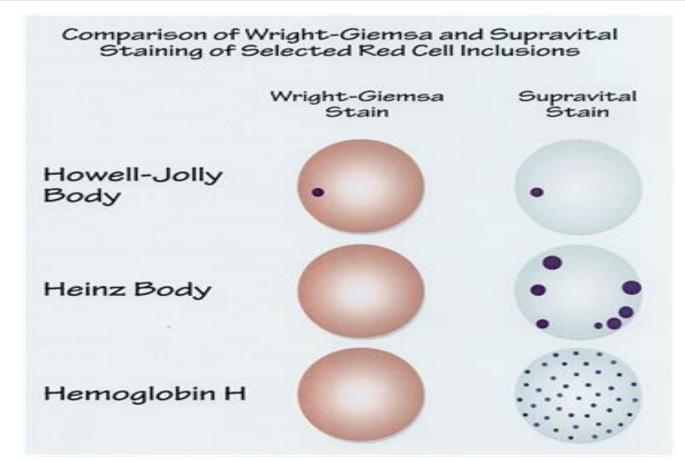
- Bone Marrow: 5% to 10%
- Peripheral Blood: 0%
- If present in peripheral blood is associated with <u>ineffective</u> <u>erythropoiesis.</u>

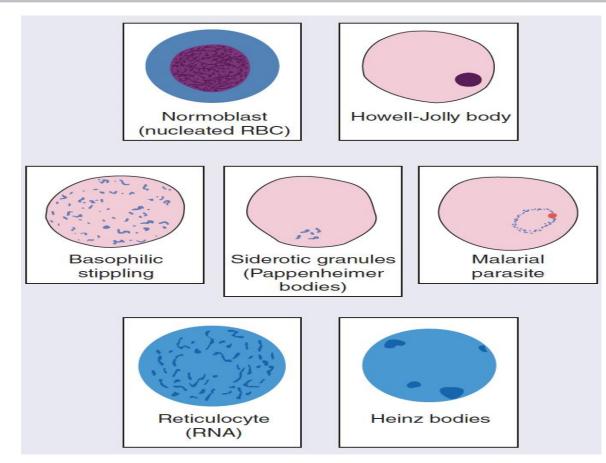


Erythrocyte sequence—orthochromatic normoblast (nucleated RBCs).

# 4.8 Plasmodium spp. (malaria)







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

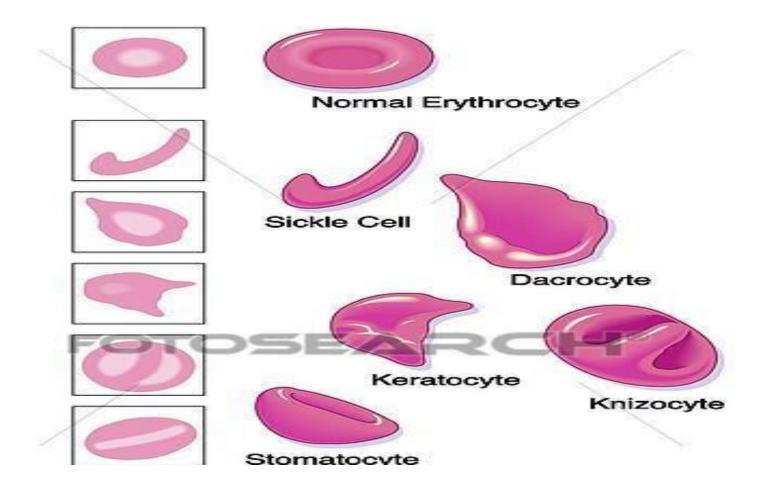
- The reticulocyte RNA and Heinz bodies are only demonstrated by <u>supravital staining (e.g.</u> with new methylene blue).
  - Heinz bodies are oxidized denatured haemoglobin.
  - Siderotic granules (Pappenheimer bodies) contain iron. They are purple on conventional staining but blue with Perls' stain.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

#### **TABLE 12-1** Staining Qualities of Erythrocyte Inclusion Bodies

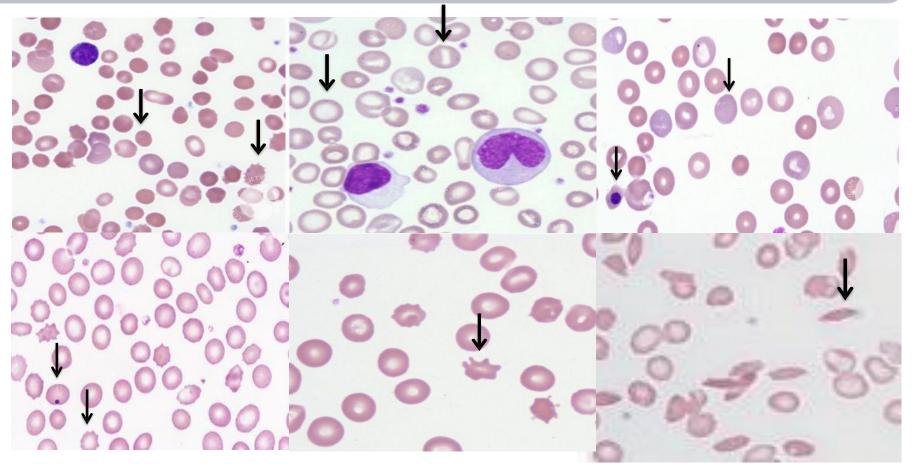
Inclusion	Composition	Wright- Giemsa Stain	New Methylene Blue (or Other Supravital Stain)	Prussian Blue (Iron)
Howell-Jolly body	DNA	+	+	0
Basophilic stippling	RNA	+	+	0
Pappenheimer body	Iron	+	+	+
Cabot ring	Remnant of mitotic spindle	+	+	0
Heinz body	Unstable hemoglobin	0	+	0
Hemoglobin H	β chains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

+, Positive; 0, negative.

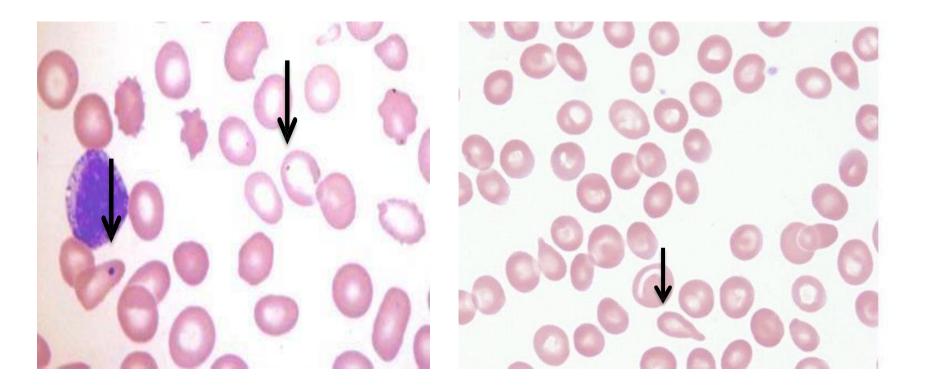
RED BLOOD CELL MORPHOLOGY								
Size variation	Hemoglobin distribution	Shape variation		Inclusions	Red cell distribution			
Normal	Hypochromia	Target cell	Acanthocyte	Pappenheimer bodies (siderotic granules)	Agglutination			
Microcyte	<b>O</b> <sup>2+</sup>	Spherocyte	Helmet cell (fragmented cell)	Cabot's ring				
Macrocyte	<b>O</b> <sup>3+</sup>	Ovalocyte	Schistocyte (fragmented cell)	Basophilic stippling	Rouleaux			
Oval macrocyte	<b>4</b> <sup>+</sup>	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