Spur Cell Anemia Associated with Alcoholic Cirrhosis

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A 56-year-old woman was admitted to our hospital with jaundice, massive ascites, hepatic encephalopathy and an intramuscular hematoma. She had severe liver dysfunction with a total bilirubin level of 9.0 mg/dL, indirect bilirubin level of 6.9 mg/dL, albumin level of 2.8 g/dL and prothrombin ratio of 43%. Her hemoglobin level was 6.8 g/dL, and a peripheral blood smear showed the presence of a large number of echinocytes and acanthocytes, i.e., spur cells (Picture 1). She frequently required blood transfusions due to persistent anemia. A liver biopsy revealed cirrhosis with marked pericellular fibrosis and iron overload (Picture 2). The patient’s clinical condition rapidly deteriorated, and she died of progressive liver failure.

Spur cell anemia is a type of hemolytic anemia that can develop in patients with liver failure. It is often associated with alcoholic cirrhosis and has a poor prognosis (1). Liver transplantation is the only effective therapy (2).

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References