# 4

# **HEMATOCRIT**

#### **MODULE**

Hematology and Blood Bank Technique



# 4.1 INTRODUCTION

Hematocrit is a commonly performed investigation in hematological laboratories for evaluation of patients with anemia.



After reading this lesson, you will be able to:

- describe the methods of estimation of hematocrit
- describe the normal value and interpretation of result
- explain the calculation of red cell indices
- classify anemia.

# 4.2 HEMATOCRIT

Hematocrit or packed cell volume (Hct/PCV) is the volume occupied by red cells after blood is centrifuged at a high speed.

#### **Methods for estimation**

Hematocrit is measured by two methods:

- Microhematocrit method
- Automated method

The Macrohematocrit method which was used earlier is not used now.

Hematology and Blood Bank Technique



#### Microhematocrit method

Sample: Blood collected in EDTA

#### **Equipment required**

- 1. Capillary tubes 75 mm in length with an internal diameter of 1mm.
- 2. Microhematocrit centrifuge
- 3. Reading device

#### **Procedure**

- 1. Place the capillary tube in the venous blood sample allowing blood to enter the tube by capillary action. Leave the last 15mm unfilled.
- 2. Seal the tube with modeling clay. Make sure there is no air trapped between the clay and the column of blood.
- 3. Place the tube in the microhematocrit centrifuge with the sealed end to the outer rim and centrifuge at 12000g for 5min.
- 4. Read the result using a microhematocrit reading device.



Fig. 4.1: Capillary tubes (right) and the microhematocrit centrifuge (left)

#### Hematocrit



Fig. 4.2: Filled capillary tubes placed in the centrifuge

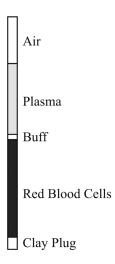


Fig. 4.3: The tube as it appears after centrifugation

#### **Precautions**

- 1. PCV increases with storage so it must be measured within 6 hrs of sample collection.
- 2. Capillary tubes must be of defined specifications.
- 3. Centrifuges must be checked at regular intervals for speed and accuracy.

#### Normal value

Men:  $0.45\pm0.05$ L/L or  $45\pm5\%$ 

Women:  $0.41 \pm 0.05 L/L$  or  $41 \pm 5\%$ 

# **MODULE**

Hematology and Blood Bank Technique



### **MODULE**

Hematology and Blood Bank Technique



Hematocrit

#### Significance of measuring hematocrit

- it is used as a screening test for anemia.
- along with red cell count and hemoglobin it is used for calculating red cell indices which are essential for classification of anemia.
- it can be used as a reference method for calibrating automated hematology analysers.
- it provides a rough guide to Hb measurement.

#### **Precautions**

- 1. PCV increases with storage so it must be measured within 6 hrs of sample collection.
- 2. Capillary tubes must be of defined specifications.
- 3. Centrifuges must be checked at regular intervals for speed and accuracy.

#### **Automated method**

This will be discussed in the chapter on automated cell analysers.

#### Normal value

Men:  $0.45\pm0.05$ L/L or  $45\pm5\%$ 

Women:  $0.41\pm0.05$ L/L or  $41\pm5\%$ 

**Reduced Hematocrit** is seen in anemia.

**Increased hematocrit** is seen in polycythemia.

#### Red cell indices

These indices are used in the morphological classification of anemia. They can be calculated manually. However, in most laboratories they are obtained by automated hematology analysers.

#### The three indices are

- Mean Corpuscular Volume (MCV)
- Mean Corpuscular Hemoglobin (MCH)
- Mean Corpuscular Hemoglobin Concentration (MCHC)

Mean corpuscular volume indicates the average volume of each red cell.

$$MCV = \frac{\text{Packed cell volume } \%}{\text{Red cell count (millions/mm}^3)} \times 10 \text{ femtolitres}$$

#### Hematocrit

Normal value 90±10fl

**Interpretation:** In the presence of anemia if

MCV < 80fl: microcytic anemia

MCV > 100fl: macrocytic anemia

MCV80-100 fl:normocytic anemia

**Mean corpuscular hemoglobin** reflects the average amount of Hb in each red cell.

$$MCH = \frac{\text{Hemoglobin (g/dl)}}{\text{Red cell count (millions/mm}^3)} \times 10 \text{ picogram}$$

Normal value:  $29.5 \pm 2.5 pg$ 

Interpretation: In the presence of anemia if

MCH < 27pg: hypochromic anemia

**Mean corpuscular hemoglobin concentration** is the average concentration of Hb in a given volume of packed red cells

$$MCHC = \frac{Hb (g/dl)}{PCV (\%)} \times 100 g/dl$$

Normal value: 33±1.5g/dl

**Limitation of red cell indices:** These are mean values and cannot express the variation that occurs within a population. They may be normal if the number of abnormal cells is small. If two populations of cells are present eg microcytic and macrocytic, the indices can again be normal.

Use of red cell indices: They are used in the classification of anemias.

Anemia: This is defined as a decrease in the red cell mass to adequately deliver oxygen to peripheral tissues. To establish the presence of anemia in the laboratory we can use Hb, hematocrit or packed cell volume and the red cell count. Because it is the easiest to measure, hemoglobin is the most frequently used parameter to detect anemia. Though the parameters can be measured manually it is best to measure them on an automated analyser.

#### Classification of anemia

I. Morphological classification: Anemia is classified on morphological grounds into three groups

#### **MODULE**

Hematology and Blood Bank Technique



#### **MODULE**

Hematology and Blood Bank Technique



Hematocrit

- Microcytic hypochromic anemia MCV<80fl,MCH<27pg</li>
- Macrocytic anemia MCV>100fl
- Normocytic,normochromic anemia MCV80-100fl, MCH27-32pg

#### Advantages of morphological classification

- 1. It is of practical, clinical value. Each subtype is associated with distinct causes and thus narrows the probable diagnosis.
- 2. It allows a comprehensive laboratory approach to be followed to reach a definitive diagnosis.
- 3. The initial step in making the classification depends on readily available laboratory tests.
- II. Kinetic classification: Divides anemias into 2 groups:
  - (a) Impaired erythrocyte production
  - (b) Increased erythrocyte production

The causes of each are given below

#### **Impaired production**

Iron deficiency anemia

Anemia of chronic disease

Hypoplastic anemia

Anemia due to infiltrative disorders

Megaloblastic anemia

Thalassemia

#### **Increased production**

Hemolytic anemia

Treated nutritional anemia



# **INTEXT QUESTIONS 4.1**

- 1. Calculate the MCV in this patient with Hct of 45% and red cell count of  $5\times 10^{12}/L$
- 2. If the Hb of this patient is 8g/dl, what will be the morphological subtype of anemia
- 3. The Hb of a male patient is 15g/dl and the red cell count is  $5x10^{12}/L$ . Calculate the MCH.

#### Hematocrit



# WHAT HAVE YOU LEARNT

Hematocrit is a commonly performed investigation. It is used to screen
for anemia and for calculation of red cell indices. Three red cell indices
can be calculated from Hb, Hct and red cell count. These are MCV, MCH
and MCHC. The red cell indices are helpful in the classification of anemia
on morphological grounds.



# TERMINAL QUESTIONS

- 1. Classify anemia
- 2. Describe the methods of Hematocrit measurement



# ANSWERS TO INTEXT QUESTIONS

#### 4.1

- 1. 90 fl
- 2. Normocytic
- 3. 30 pg

#### **MODULE**

Hematology and Blood Bank Technique

