STUDY OF SEX RATIOS, ABO AND Rh BLOOD GROUPS DISTRIBUTION IN SOME HAEMATOLOGICAL AND LYMPHATIC DISEASES IN IRAN

D.D. Farhud , MD , PhD , MG 1 ; H. Sadighi , MD 1 ; L. Andonian , MSPH 1 ; M. Saffari, BS 2

Key words: Sex ratio, haematological diseases, lymphatic diseases, ABO, Rh, Iran

Abstract

Associations of some haematological and lymphatic diseases with sex and ABO and Rh blood groups were studied in 2579 patients, compared with a control group of 126332 individuals, by the use of clinical as well as laboratory findings, in Tehran.

Highly significant increase of male/female ratio is shown in acute myelogenous leukemia , acute lymphocytic leukemia , chronic lymphocytic leukemia , aplastic anaemia and paroxismal nocturnal haematuria. Idiopathic thrombocytopoenic purpura shows a decrease of this ration.

In chronic myelocytic leukemia and acute lymphocytic leukemia, group O has the highest incidence, followed by groups A and B, and group AB has the lowest incidence.

Between various diseases, the highest frequency of blood group A was observed in Hodgkin's disease, and the lowset in NHL. Group B had highest frequency within PNH patients and the lowset in NHL. Group O had the highest frequency in NHL followed by ITP and MF, and the lowest in SA.

In AML patients there is a significant decrease of Rh negative patient (7.15%). The highest incidence of Rh negative was among the SA patients (18.18%) and the lowest in MM (3.70%).

¹⁻ Dept. of Human Genetics, School of Public Health and institute of public Health research, Tehran University of Medical Sciences, P.O.Box 14155-6446, Tehran, Iran.

²⁻ Dept. of Haematology, Emam Khomeini Hospital, School of Medicine, Tehran University of Medical Sciences, Tehran, Iran.

Introduction

The relationship between ABO and Rh blood groups and susceptibility to various diseases has been studied for at least the past forty years (4). The first study on association between ABO blood groups and diseases was carried out on patients affected with cancer of stomach (1). Extensive review of numerous investigations concerning the blood groups and diseases was made in 1978 (4).

There have been association studies with relatively poor clarification in the neoplasms of the haematopoietic and lymphatic tissues, and results have not, in most cases, been consistent. However, significant associations of ABO

blood groups with some of these diseases have been reported in various countries. Significant association between Rh blood groups have been reported with very few diseases (4).

Data about such studies in Iran so far is not available and the purpose of this investigation was to study the distribution of sex, ABO and Rh blood groups in numerous haematological and lymphatic diseases in the Iranian population.

Materials and method

The present study was conducted on patients suffering from various haematological and lymphatic diseases, with different etiologies, registered in the department of haematology, Tehran University of Medical Sciences. This center admits patients from the whole country. Final diagnoses were confirmed by clinical and laboratory findings in the same center. The information on a total of 2579 individuals, 1548 males and 1031 females, was taken from the data available in the records of the above mentioned department. ABO and Rh blood groups and sex ratios were estimated on the whole data (2579). The data of ABO and Rh blood groups distribution, on 126332 individuals, in a previous study in Iran were used as the control groups (3). Statistical analyses were performed by the use of chi-square method.

Results and discussions

Table 1 shows full identification, abreviation, total numbers of patients, percentage of each disease in our collection, male and female

numbers and sex ratios (M/F) and the statistical analyses of sex ratios in haematological diseases. AML, ALL, CLL, AA and PNH show increase of M/F ratios to a highly significant level; ITP shows a decrease of this ratio.

Table 2 shows the distribution of ABO blood groups among the same collection as identified in table 1. According to statistical analysis , in CML and ALL the highest incidences are in group O followd by groups A , B , and group AB has the lowest incidence , in a highly significant level.

The highest frequency of group A , among various diseases , was observed in HD (37.08%) and the lowest in NHL (25.58%). For group B , the frequency highest was among the PNH (33.33%) and the lowest for NHL (13.95%). Group O had the highest frequency in NHL (51.17%) , followed by ITP (48.44%) and MF (45.95%) , the lowest was in SA (31.82%).

Table 3 shows a significant decrease of Rh negative individuals among AML patients. The highest of Rh negative, between all the diseases, was among the SA patients (18.18%), followed by HA (12.50%), PNH (11.76%) and MF (10.81%). The lowest incidence was among the MM patients (3.70%).

Acknowledgment

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Table 1- Sex distribution in haematological and lymphatic diseases

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0.00	16.79	5/1	8	43	1.97	51	Paroxismal Nocturnal Haemoglobinuria PNH
0.065	3.40	2/1	18	36	2.09	54	Multiple Myeloma MM
0.47	0.52	1/1	15	22	1.43	37	Myelofibrosis MF
0.52	0.40	1/1	18	25	1.66	43	Non Hodgkin's Lymphoma NHL
0.003	8.45	1/2	45	19	2.48	64	Idiopathic Thrombocytopenic Purpura ITP
0.094	2.79	2/1	59	92	5.85	151	Hodgkin's Diseases HD
0.86	0.03	1/1	93	104	7.64	197	Thalassemia Thal
0.64	0.21	1/1	9	13	0.85	22	Sideroblastic Anaemia SA
0.28	1.13	1/1	28	20	1.86	48	Hemolytic Anaemia HA
0.41	0.67	1/1	145	130	10.66	275	Iron Deficiency Anaemia IDA
0.00	16.78	2/1	96	220	12.25	316	Aplastic Anaemia AA
0.00	14.9	3/1	28	80	4.18	108	Chronic Lymphocytic Leukemia CLL
0.001	10.14	2/1	68	140	8.03	208	Acute Lymphocytic Leukemia ALL
0.35	0.87	1/1	90	117	8.02	207	Chronic Myelocytic Leukemia CML
0.05	3.58	3/2	186	275	12.87	461	Acute Myelogenos Leukernia AML
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Table 2- ABO blood group distribution in haematological and lymphatic diseases

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