The role of anemia in first simple febrile seizure in children aged 6 months to 5 years old

To the Editor

Heydarian and Vatankhah¹ in their attempt to assess the relationship between anemia and first simple febrile convulsion presented a questionable conclusion, as they compared only few hematological parameters between case and control groups, notably hemoglobin, hematocrit, and mean corpuscular volume. However, the 4 biochemical iron parameters (serum ferritin, serum iron, total iron binding capacity, and transferrin saturation), which are considered critical tools in the diagnostic algorithm of iron deficiency anemia (IDA)² were not compared. Despite that limitation, the result of Heydarian and Vatankhah’s study¹ could be added to the inconclusive data of the role of anemia in first simple febrile seizure in children reported worldwide.

It is estimated that 43.9% of Iranian children had anemia, and 29.1% had IDA.³

Mahmood D. Al-Mendalawi
Department of Pediatrics
Al-Kindy College of Medicine
Baghdad University, Baghdad
Iraq

Reply from the Author

We appreciate the valuable comments of Prof. Al-Mendalawi regarding our article entitled “The role of anemia in first simple febrile seizure in children aged 6 months to 5 years old”.⁴

Iron deficiency anemia can be detected in 42-84% of children in developing countries.⁴,⁵

In this article, we studied the role of anemia, but not the iron deficiency anemia in patients with first simple febrile seizure. Evaluation of hemoglobin and hematocrit are adequate to detect the patients who suffer from anemia. The serum levels of iron, ferritin, and total iron binding capacity were not necessary to evaluate our work.

Farhad Heydarian
Department of Pediatrics
Ghaem Hospital
Mashhad University of Medical Sciences
Mashhad, Iran

References


CASE REPORTS

Case reports will only be considered for unusual topics that add something new to the literature. All Case Reports should include at least one figure. Written informed consent for publication must accompany any photograph in which the subject can be identified. Figures should be submitted with a 300 dpi resolution when submitting electronically or printed on high-contrast glossy paper when submitting print copies. The abstract should be unstructured, and the introductory section should always include the objective and reason why the author is presenting this particular case. References should be up to date, preferably not exceeding 15.