

University of Diyala/ College of Medicine Department of Physiology Physiology Lab

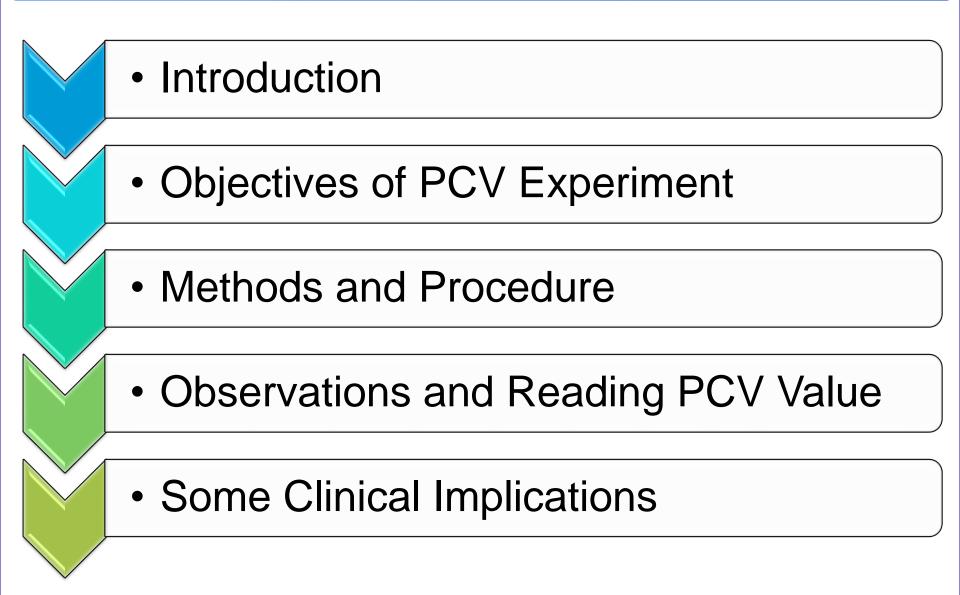
Determination of Packed Cell Volume (PCV) OR Hematocrit (Hct) Value

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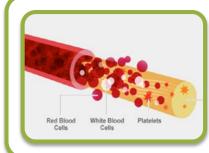


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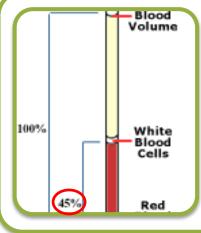
Introduction



Blood consists of a *liquid plasma portion* and a *solid cellular portion*. The solid portion is comprised of red blood cells (RBCs), white blood cells (WBCs), and platelets.

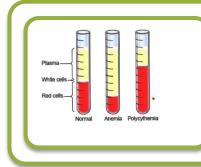


PCV or Hct is defined as the volume of RBCs per unit volume of the whole blood.

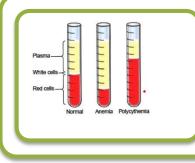


The *PCV* is a mathematical expression of the number of RBCs, or packed cell volume, expressed as a percentage of whole blood. *For example*, a packed cell volume of 45% means that a 100-mL sample of blood contains 45 mL of packed RBCs, which would reflect an acceptable level of RBCs for a patient of any given age.

Introduction



A decrease in the number or size of red cells also decreases the amount of space they occupy, resulting in a lower PCV.



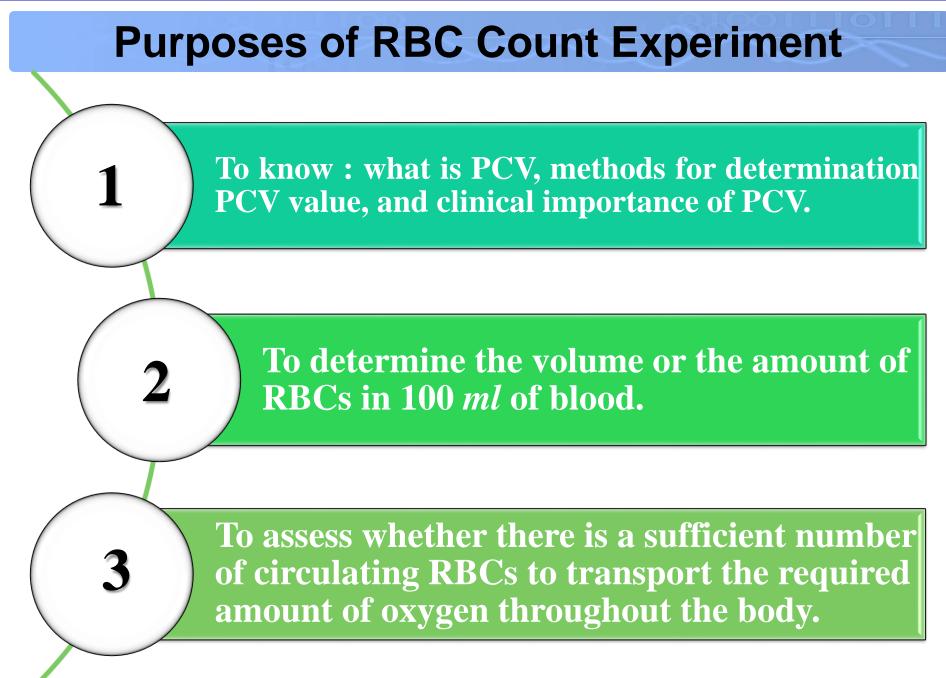
An increase in the number or size of red cells increases the amount of space they occupy, resulting in a higher PCV.



Measurement of packed cell volume (PCV) is the *most accurate* and *simplest of all tests* in clinical hematology for detecting the presence and degree of anemia or polycythemia. In comparison, *hemoglobin* estimation is *less accurate*, and *RBCs* count is *far less accurate*.

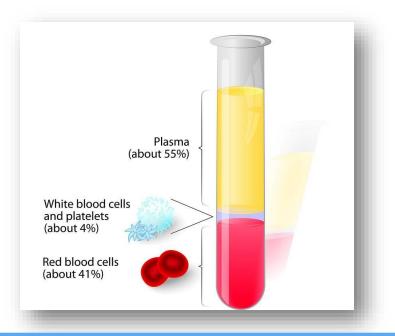
Introduction

- PCV depends primarily on the *number of RBCs*, however the *average size of the RBCs* influences the PCV. Conditions that cause RBC size to be increased (e.g. swelling of the RBC due to change in osmotic pressure related to elevated sodium levels) may increase the PCV while conditions that result in smaller than normal RBCs (e.g. microcytosis related to iron deficiency anemia) decrease the PCV.
- In general, high PCV indicates either increase in the number of RBCs or decrease in plasma volume as seen in cholera. On another hand, a low PCV indicates either decrease in RBCs number or increase in plasma volume.
- The normal values of PCV vary according to the age and sex of the individuals. The normal ranges are:
- Males: 40 %–54 %
- Females: 37 %-47 %
- Newborns: 53-65 %
- \blacktriangleright Critical value of PCV = <15 % or >60 %.



Principle of PCV

- Hematocrit is derived from Greek words 'Haima' meaning "blood", 'krites' meaning "to separate". Together "Hematocrit" means 'to separate blood' where blood cells and plasma are separated by centrifugation.
- When a known volume of blood is centrifuged, the *cells* being heavier, settle down leaving a clear column of *plasma* above.



Methods

Microhematocrit Method

Requires less blood and less time to get the value of PCV (commonly used). It is the method that we are going to use in today lab.

Macrohematocrit Method

- Also known as a Wintrobe method.
- Time consuming, requires large amount of blood, and has a higher degree of plasma trapping.

Automated Method

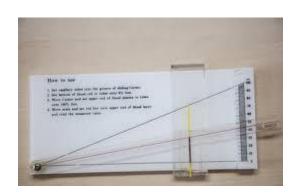
• Automated hematology Analyzer.

Materials and Instruments

- 1. Microhematocrit tube (capillary tube) which is 75 mm in length and 1 mm in diameter . It contains heparin and shows a red ring at one end of the tube.
- 2. Microhematocrit centrifuge device.
- 3. Plastic seal to seal one end of the capillary tube.
- 4. Microhematocrit reader.
- 5. Lancet, Alcohol 70%, and Cotton.



Microhematocrit tube



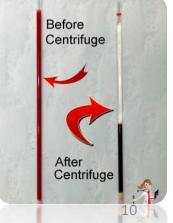




Microhematocrit centrifuge

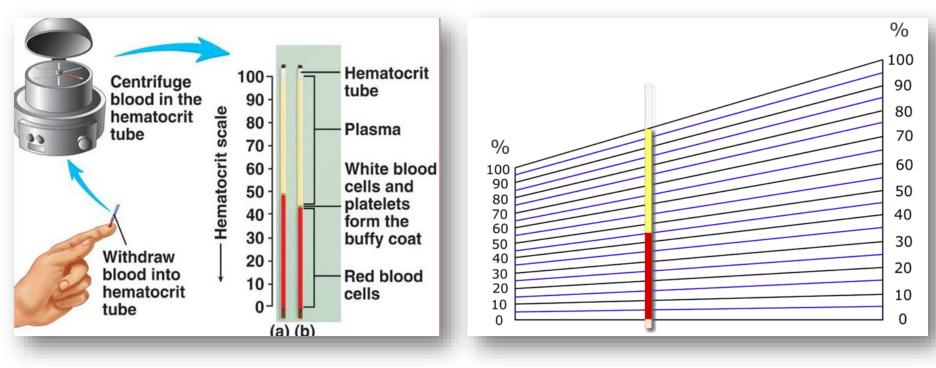
Procedure and Observations

- Clean your finger with 70% alcohol and let it dry.
- Blood is drawn into the tube by capillary phenomenon. By holding the tube in a horizontal manner and allow 2/3 to 3/4 of the tube to be filled with blood.
- Seal the dry end of the tube by plastic seal.
- The sealed tube then is placed in the radial grooves of the Microhematocrit centrifuge for 5 min at 11000 R.P. m.
- Balance the tubes in the centrifuge with the clay ends facing the outside away from the center(place the tubes opposite each other in the centrifuge). Looking at a centrifuged hematocrit tube, you will see three distinct layers:
- *A tall upper layer of clear plasma* slightly yellow-colored. It should not be pink or red which would indicate hemolysis of red cells in the sample or within the body in hemolytic diseases.
- *A greyish-white (buffy layer)* thin layer (about 1 mm) in thickness consisting of platelets and WBCs.
- *A tall bottom layer of RBCs* which have been closely packed together
- Using the hematocrit reader (ruler), read the PCV (Htc) value.



Reading PCV Value

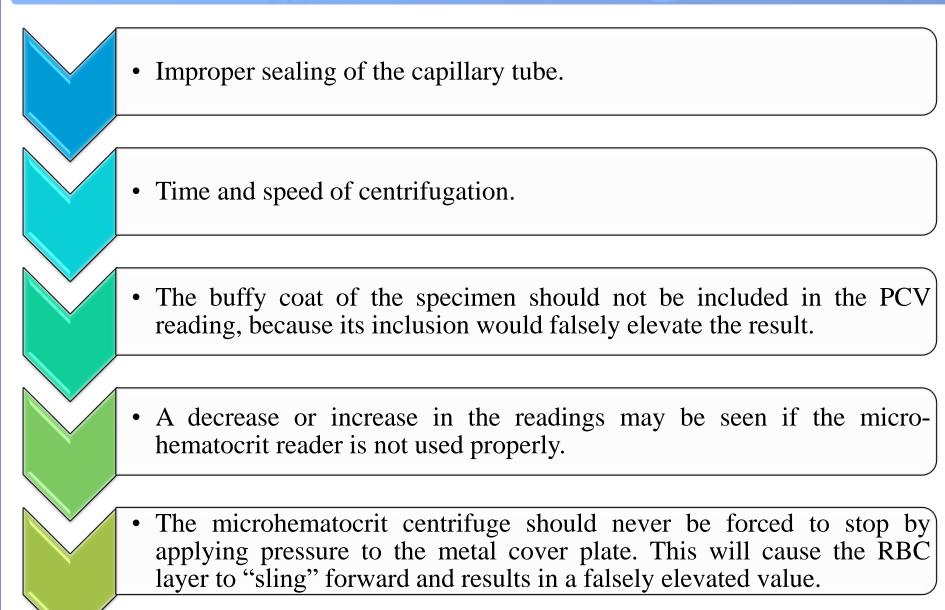
• The capillary tube should be parallel to graduation and lower level of RBCs on zero line of the scale and the upper level of the scale and the upper level of the clear plasma on 100 % line). Do not include the buffy coat (WBCs and platelets) when reading PCV value.



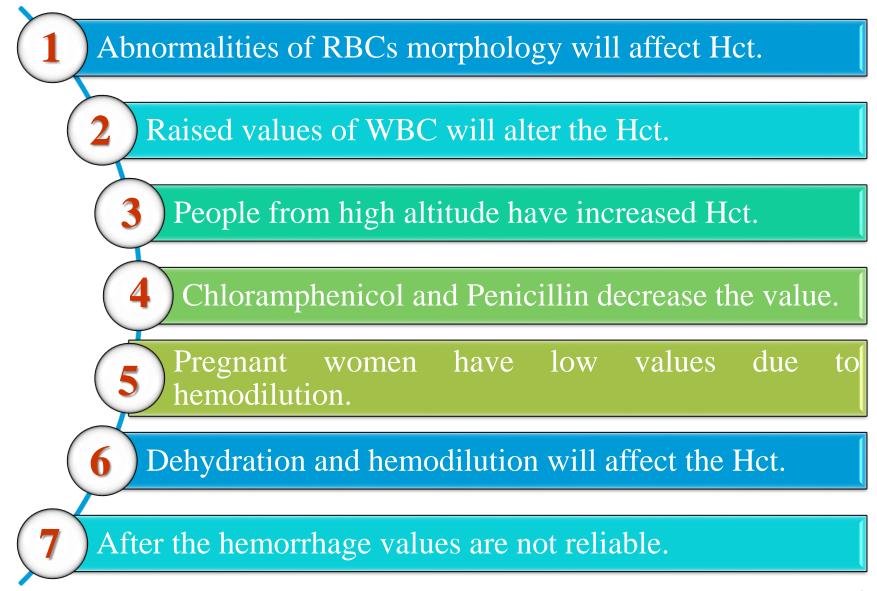
Procedure of PCV experiment

Reading of PCV value

Sources of Errors



Some Factors that affect Hct (PCV)



Clinical Implications

PCV increases in polycythemia and this could be either:

Physiological

• High Altitude and extreme physical exercise or excitement.

Pathological

• Polycythemia Vera, Dehydration leading to Hemoconcentration e.g. diarrhea, burns, and vomiting, Congenital heart failure , and Severe chronic obstructive pulmonary disease (COPD).

Clinical Implications

PCV decreases in :

- ✓ Anemia.
- ✓ Hemoglobinopathies.
- ✓ Cirrhosis.
- ✓ Hemorrhage.
- ✓ Bone marrow failure
- ✓ Renal diseases.
- ✓ Normal pregnancy.
- ✓ Autoimmune diseases.
- ✓ Malignancies like lymphoma, leukemia, multiple myeloma, and Hodgkin's diseases.

Advantages Versus Disadvantages of Microhematocrit Method

Advantages

- ✓ Small sample volume
- ✓ Relatively fast analysis
- Hemolysis detected when result is read
- ✓ No dilution needed

Disadvantages

- Careful preparation required (sealing of capillaries, etc)
- ✓ Leakage of sealing gives falsely low results (more RBCs will be lost than plasma).
- ✓ In blood with abnormally sized or shaped RBCs, more plasma will be trapped, causing a higher positive bias of Hct.
- ✓ Clots will lead to false packing of the cells, giving falsely high Hct.

