Hemoglobinopathies in Germany—A Longitudinal Study Over Four Decades
by Prof. Dr. med. Elisabeth Kohne, em. Prof. Dr. med. Enno Kleihauer
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**HbA1c Falsely High or Low**
The study reported by Kohne and Kleihauer (1) deserves attention from diabetologists in Germany: in patients with hemoglobinopathies, their HbA1c assay may yield falsely high or low results (2) which do not correspond to the results of blood glucose monitoring by the patients.

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**Equal Opportunity**
We welcome a publication in a German language journal about the large variety of hemoglobin diseases that are to be found in Germany today due to migration. Thanks to Prof. Kohne a laboratory has been established in Ulm that not only offers high quality diagnostic competence but also features a staff experienced in clinical counseling. Prof. Kohne’s paper, however, fails (probably because of space restriction) to mention the fact that most migrants are completely left alone with the problems resulting from carriership (screening, offer of prenatal diagnosis) or hemoglobin disease (treatment according to international standards). Unfortunately, clinical, diagnostic and therapeutic knowledge regarding hemoglobin diseases is very sparse in the German medical community. Medical students—neither during medical school nor during their further education—are not taught to consider thalassemias and hemoglobinopathies as a part of our daily work spectrum. Maternity guidelines for early pregnancy require only hemoglobin measurement, but not a full blood count with red cell indices. As a consequence microcytosis in mothers who are carriers of thalassemia is missed and carriership not diagnosed early enough to eventually test the partner too. Hemoglobin disease prevention in obstetrics as depicted in Box 2 is our goal, but sadly not the reality in Germany. German physicians need to revise their attitude towards hemoglobin diseases. They need to consider them just as worthy of their attention and interest as cancer or diabetes.

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**Conflict of interest statement**
The authors of both contributions declare that no conflict of interest exists according to the guidelines of the International Committee of Medical Journal Editors.

The authors of the article have chosen not to publish a reply.