Abstract

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A Case of Favism: When Getting an Adequate Clinical Story is Essential for Correct Diagnosis

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Introduction: Favism is an X-chromosome-linked genetic disease due to lack of glucose-6-phosphate-dehydrogenase (G6PD), characterized by crises of hemolytic anemia following the intake of broad-beans and other oxidizing agents. G6PD protects red blood cells from oxidative stress. Some substances contained in broad-beans have a powerful oxidizing effect and, in case of G6PD lack, may cause hemolytic crises.

Case report: Man 55-Year-Old in E.R. for abdominal pain, fever, and jaundice. Blood tests: anemia, thrombocytopenia, a massive increase in bilirubin, LDH, and ferritin. Abdominal ultrasound: splenomegaly. Similar episodes, milder, had already occurred in the past, without being followed by diagnostic investigations. Hospitalized in Medical Ward, the patient reported that, in all cases, about 24 hours before the episodes, he had ingested broad-beans; however, also on other occasions he had eaten broad-beans, without any disturbances. These anamnestic data, together with hemolytic anemia, raised the suspicion of G6PD deficiency. G6PD dosage: reduction in enzymatic activity (20%). Diagnosis: Favism.

Discussion: This case, in our opinion, underlines the importance of getting an adequate clinical story, to formulate a correct diagnosis. The patient, in fact, had already had previous episodes of acute anemia, never adequately investigated, despite having already been hospitalized for the same clinical picture.