

Abstract

Aim of the study was to observe the clinicohaematological profile, bone marrow and serum iron indices of patients with chronic renal failure. **METHOD:** A total of 27 patients of chronic renal failure were selected, irrespective of their age, sex, clinical profile and etiology. These patients were not on dialysis, haematinics or erythropoietin therapy. They underwent series of biochemical and haematological investigation including bone marrow aspiration and also estimation of serum iron indices. **RESULTS:** The commonest cause of chronic renal failure in study group was diabetes mellitus (20%), glomerulonephritis (8%). Fifty percent of the patients on first presentation were in end-stage renal disease. Most patients presented with features of anaemia (94%), uraemia (63%) and fluid overload (96%). Severity of anaemia was correlating with degree of azotemia. Sixty percent of the patients had microcytic hypochromic anaemia, five percent had macrocytic anaemia while 30% had normocytic normochromic anaemia. The reticulocyte count was high in 46% of the patients. RDW-CV of greater than 14 was observed in 67%. Thrombocytopenia was found in 52% of the patients. Leucocyte count was within normal range in 75%. In differential leucocyte count and absolute eosinophil count was high in 32% of the subject. In bone marrow examination 61% of the patients had normal bone marrow cellularity, 75% were having erythroid hyperplasia. Fifty seven percent of the cases had bone marrow iron store of zero, 37.8% had normal bone marrow iron store, 6.5% had increased bone marrow iron store. Serum ferritin was low in 62% and serum iron was below normal in 74% of the patients. **CONCLUSION:** Majority (65%) of patient had microcytic hypochromic anaemia because of iron deficiency and 33% of patient had parasitic infestation