

G6PD DEFICIENCY (Guidelines for Patients)

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G6PD deficiency is an inherited condition in which the body doesn't have enough of the enzyme glucose-6-phosphate dehydrogenase, or G6PD, which helps red blood cells (RBCs) function normally. This deficiency can cause **hemolytic anemia**, usually after exposure to certain medications, foods, or even infections.

Most people with G6PD deficiency don't have any symptoms, while others develop symptoms of anemia only after RBCs have been destroyed, a condition called **hemolysis**. In these cases, the symptoms disappear once the cause, or trigger, is removed. In rare cases, G6PD deficiency leads to chronic anaemia.

With the right precautions, a child with G6PD deficiency can lead a healthy and active life.

The following medicines can sometimes cause problems for people with G6PD deficiency and should be avoided if possible.

For malaria avoid:

- Maloprim (contains Dapsone)
- Primaquine
- Pentaquine
- Pamaquine
- Quinine
- Pyrimethamine

For other infections avoid:

- Nalidixic acid
- Nitrofurantoin
- Sulphonamides (some, including Co-trimoxazole = Septrin®, Bactrim®)
- Dapsone
- Ciprofloxacin

Avoid close contact with:

- Moth balls (Naphthaline)

Avoid eating:

- Fava (Broad) beans
- Chinese herbal medicines

Note:

There are many different kinds of G6PD deficiency and many medicines have been thought to cause haemolysis. Although this is not a comprehensive list of drugs, those listed are most likely to cause haemolysis in people who have G6PD deficiency. Very occasionally other medicines can cause problems and if a medicine which is not on the list is found to cause haemolysis in a particular person it should be avoided. In some medical situations it may be necessary for a person with G6PD deficiency to have one of the medicines listed above and if that happens your doctor will probably arrange to check your blood count while you are taking the medicine. Some additional drugs which can cause problems are not available in the UK but may be elsewhere and should also be avoided: Acetallid, Niridazole, Phenazopyridine, Phenylhydrazine. In people with severe G6PD deficiency haemolysis may also occur in other situations, in particular in association with infections.

It is a good idea to make sure that your general practitioner knows that you have been diagnosed as having G6PD deficiency.