

Leeching as a substitute for phlebotomy



Phlebotomy is a therapeutic technique that is commonly used in haemochromatosis and polycythemia vera. In some cases, phlebotomy cannot be performed because of intolerance or technical problems. We present an example of successful phlebotomy in hereditary haemochromatosis with the use of leeches. A 61-year-old female with a homozygous *HFE* C282Y mutation had previously needed venesection every 3 months to maintain a ferritin level below 100 µg/l. Because of severe vasovagal reactions during venesection, she switched to therapy with leeches. During a typical bloodsucking procedure of one hour's duration eight leeches (left figure) increased their body weight from 3 to 35 g. After the leeches had dropped off, bleeding continued for several hours (right figure). The wound dressing weighed 440 g more after therapy than before. This

added up to about 475 g loss of blood per session, and was comparable to a typical venesection. Five leeching procedures reduced the ferritin level from 100 µg/l to the very low level of 17 µg/l because of over enthusiasm.

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