TABLE 2. Differential diagnosis of sickling disorders (Hb S disorders).

	Hb A (%)	Hb S (%)	Hb A2 (%)	Hb F (%)	Hb (g/dl)	MCV (fl)	Retic (%)
Hb AS	55-60	40-45	<3.5 (2-3)	<1	13-15	75-90	1-2
Hb SS	0	90-95	<3.5 (2-3)	5-10 (usually)**	6-9	70-90	10-20
Hb AS/α^+-thalassaemia	62-70	28-33	<3.5 (2-3)	<1	13-15	normal or low	
Hb AS/α^0-thalassaemia	68-78	20-30	<35 (2-3)	<1	13	<70	
Hb SS/α- thalassaemia**	0	88-93	<3.5 (2-3)	1-10	9.2	normal or low	
Hb S β^0-thalassaemia (major)	0	90-95	>3.5 (3.5-6)	5-10	7-11 (8.8)	60-70	4
Hb S β^+-thalassaemia (minor)	5-30	60-90	>3.5 (3.5-6)	5-10	8-12 (11)	65-75	
Hb SC	0	50	<3.5 (2-3)	1 (1-7)	8-13 (11)	75-90	4
Hb S HPFH	0	70-80	<3.5 (2-3)	20-30	11-14	60-80	2
Hb SE	0	60	30-35 ***	4	13	<70	

* *Depending on the Hb S haplotype: most haplotypes have Hb F 5-10%, except Arab-Indian (Hb F ~20%). An Hb F level >10% diminishes the severity of sickle cell anaemia.*

** *Co-inheritance of sickle cell anaemia (Hb SS) with a^+ or a^0 thalassaemia diminishes the severity of sickle cell anaemia.*

*** *In fact, this is Hb E, not Hb A2 (Hb E migrates to the same position as Hb A2 on Hb electrophoresis, and is eluted at the same retention time as Hb A2 on HPLC)*