Quick Facts about Five White Blood Cells

By studying white blood cells, we can quickly obtain important information about the patient's health. Information that can help you quickly make a diagnosis and provide the right treatment.

The total number of white blood cells has a reference interval of $3.5-8.8 \times 10^9$ /L and is analyzed with a particle counter. These cells can also be counted with a microscope in the usual way.

Neutrophil granulocytes, which make up 50–75 % of the white blood cells are responsible for the greatest changes in the total number of white blood cells.

N.B.! Children have a different distribution compared to adults, primarily a higher percentage of lymphocytes.

Reference: Laurells Klinisk Kemi i praktisk medicin (Laurell's Clinical Chemistry in Practical Medicine), 2003, 8th edition.

NEUTROPHIL GRANULOCYTES

APPEARANCE

Band or segmented cells (the proportion of band cells increases when new cells are mobilized).



- inflammatory reactions (infectious and non-infectious)
- leukemoid reaction (> 50)
- corticosteroids



REFERENCE INTERVAL: 1.7-7.5 x 10⁹/L

FUNCTION

Primarily to provide defense against bacteria and fungi. Pus largely consists of dead neutrophils.



- medication
- cytostatics
- immunological reactions (SLE, Felty's Syndrome, B12 and folate deficiency, leukemia)
- agranulocytosis (bone marrow damage or bone marrow disease)

LYMPHOCYTES

APPEARANCE

cytoplasm.



- acute viral infections
- rubella
- mononucleosis (variant lymphocytes)

Large nucleus with smaller amount of

chronic lymphocytic leukemia

REFERENCE INTERVAL: 1.1-4.8 x 10⁹/L

FUNCTION

Primarily as an agent for cellular and anti-body-mediated immunity.

🖌 LYMPHOCYTOPENIA

- corticosteroids
- cytostatics
- Hodgkin's disease (and other lymphomas)
- celiac disease
- SLE
- AIDS

BASOPHIL GRANULOCYTES

REFERENCE INTERVAL: 0.0-0.2 x 10⁹/L

Mainly mediate allergies, normally < 0.5 % of circulating blood cells in healthy people, contain large amounts of histamine which triggers the allergic

APPEARANCE

Bi-lobed or tri-lobed nucleus.



🕈 BASOPHILIA

- atopic diseases (allergic rhinitis and asthma)
- polycythemia vera
- chronic myeloid leukemia

EOSINOPHIL GRANULOCYTES

APPEARANCE

Bi-lobed nucleus, cytoplasm is full of small granules.



REFERENCE INTERVAL: 0.0-0.6 x 10⁹/L

FUNCTION

FUNCTION

reaction.

LOW VALUES

Primarily to protect us from endoparasites.

No clinical significance



LOW VALUES

corticosteroids (without signs of disease)

T EOSINOPHILIA

- allergic conditions
- asthma
- parasites
- rheumatoid arthritis
- vasculitis
- chronic myeloid leukemia
- Hodgkin's disease
- hypereosinophilic syndrome

MONOCYTES

APPEARANCE

Kidney-shaped nucleus, a lot of cytoplasm.



- prolonged inflammatory conditions
- infectious conditions (endocarditis, TB)
- non-infectious conditions (Crohn's disease, sarcoidosis, chronic myelomonocytic leukemia, chronic myeloid leukemia, acute myeloid leukemia)

REFERENCE INTERVAL: 0.1-1.0 x 10⁹/L

FUNCTION

Primarily to present antigen to lymphocytes.



corticosteroids

