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Research Article

USE OF PYTHON AND COMPLETE BLOOD COUNT PARAMETERS FOR COST-EFFECTIVE THALASSEMIA SCREENING IN RESOURCE-LIMITED SETTINGS: DEVELOPMENT AND VALIDATION OF A SCREENING PROGRAM

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ABSTRACT

Objective: Thalassemia screening is typically performed using high-performance liquid chromatography (HPLC), which is an accurate but expensive method that is not widely available. To overcome this issue, researchers have looked into alternative screening methods such as using erythrocytic indices obtained from a complete blood count (CBC) test. This approach has proven to be highly sensitive and specific, making it an attractive and cost-effective solution for excluding normal populations from thalassemia screening programs. Consequently, it can improve the efficiency of screening programs, particularly in settings with limited resources.

Methods: We have developed a Python program based on a novel methodology aimed at effectively excluding normal populations from chromatographybased screening programs for thalassemia mutation screening. The program was implemented in Python 3.8 using the Spider Integrated Development Environment. It takes input parameters such as hemoglobin, red blood corpuscles, mean corpuscular volume, and hematocrit from CBC tests to determine an individual's thalassemia status. To validate the program, we utilized a dataset of 3,000 students who had undergone CBC testing at a local clinic. To ensure privacy protection, the dataset was anonymized.

Results: Our study showed that CBC parameters accurately identified individuals with thalassemia through the Python program-based thalassemia screening approach with no false-positive samples. We validated its performance on a large dataset of students and found that it can improve screening efficiency and accuracy, particularly in resource-limited settings.

Conclusion: However, additional validation studies are necessary to confirm its generalizability and usefulness in diverse populations.

Keywords: Thalassemia screening, Erythrocyte indices, Hemoglobin, Validation dataset, Spider Integrated Development Environment

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INTRODUCTION

High-performance liquid chromatography (HPLC) is the gold standard for thalassemia screening, demonstrating its ability to detect hemoglobin variants accurately and with a high level of sensitivity. HPLC testing can be costly and may not be available in all areas, particularly in places that have limited resources. Therefore, it is necessary to consider other methods to screen for thalassemia [1].

A potentially viable replacement to HPLC-based screening is the use of erythrocyte indices from complete blood count (CBC) examination. The erythrocyte indices provide information about the size and shape of red blood cells, which can identify individuals who may be carriers of thalassemia. The CBC test is widely available and relatively inexpensive, making it a cost-effective alternative to HPLC-based screening [2].

Several studies have shown the efficiency of CBC-based testing as a method for screening for thalassemia. Weatherall and Clegg published one of the earliest studies on CBC-based screening for thalassemia in 1975. They found that using the mean corpuscular volume (MCV) from a CBC test had an acute sensitivity and specificity for identifying individuals with the beta-thalassemia trait [3]. Since then, there have been many other studies published on CBC-based screening for thalassemia [4,5].

Based on our previous study [6], we propose an alternative approach to exclude normal populations from chromatography-based thalassemia screening programs using decision tree method and multiple logistic regression with erythrocyte indices, such as MCV, mean corpuscular hemoglobin (MCH), and red blood cell distribution width (RDW), to identify normal individuals and exclude them from further testing. The study found that using erythrocyte indices or CBC parameters as a screening tool had an acute sensitivity and specificity for excluding normal populations with very high fidelity. The approach could be a cost-effective and efficient way to improve thalassemia screening programs, particularly in resource-limited settings [7].

To verify this strategy, the present study intends to validate the index with a large quantity of thalassemia samples and create two Python applications that can quickly remove HPLC samples and normal samples that are not needed with no false negatives. This may help streamline thalassemia screening programs and make them more accurate, especially in places where HPLC testing may not be accessible or cost-effective.

METHODS

Sample preparation

We obtained two sets of thalassemia reports, thal-1 and thal-2 (Supplementary data), from the School of Tropical Medicine in Kolkata with a total sample size of 386.

New screening process

A Python program was developed utilizing version 3.9 on a Windows operating system to perform analysis on CBC data and distinguish between normal blood samples and those not indicative of thalassemia. This separation allows for the identification of samples that can be excluded from further confirmation testing through HPLC.

Individual processing graphical user interface (GUI)

For individual processing, the program analyzed each sample separately. CBC data were input into the program, and the program generated an output box indicating whether the sample was normal or abnormal.

Batch processing GUI

For batch processing, the program was modified to accept multiple samples as input. The program generated a report for each sample in the batch, indicating whether it was normal or if a recommendation for an HPLC test was necessary.

Ethical considerations

The research conducted in this study received approval from the ethics committee of Panskura Banamali College. Before the collection of blood samples, all participants willingly provided informed consent.

RESULTS

From the two datasets, two and five samples are identified and indicated, respectively, from the thal-1 and thal-2 sample sets.

Batch file processing GUI

The program you provided is a Python script that uses the tkinter library to create a GUI that allows users to select and process data from a CSV file. Here is a line-by-line explanation of the script:

import tkinter as tk import pandas as pd from tkinter import filedialog

The script starts by importing the required libraries. Tkinter is a standard Python library for creating GUIs and pandas is a library for data manipulation and analysis. Filedialog is a module from tkinter that provides a file dialog box for selecting files.

Deffilter_data(filepath):

example = pd.read_csv(filepath)
Example_filtered = example[example['MCV'] < 78]
example_filtered['cut_off'] = 3.667 - 0.01*example_
filtered['Hb']+0.001*example_filtered ['HCT'] - 0.004 * example_
filtered['MCV']+0.064*example_filtered['MCH'] example_filtered =
example_filtered[example_filtered['cut_off'] > 4.96]
return example_filtered

This defines a function filter_data() that takes a file path as input, reads the CSV file using pandas, filters the data based on some criteria, and calculates a new column based on a formula. The filtered data are then returned.

Defbrowse_file():

filepath = filedialog.askopenfilename() Filepath_entry.delete(0, tk. END) Filepath_entry.insert(0, filepath)

This defines a function browse_file() that is called when the user clicks the "Browse" button. It uses the askopenfilename() method from filedialog to open a file dialog box, get the selected file path, and insert it into the entry field.

Defprocess_data(): filepath = filepath_entry.get() data = filter_data(filepath) Output_text.delete('1.0', tk. END) Output_text.insert('1.0', data.to_string())

This defines a function process_data() that is called when the user clicks the "Process Data" button. It gets the file path from the entry field, calls filter_data() to filter and process the data, deletes any existing text in the output area, and inserts the processed data as a string. window = tk. Tk() window.title('Filter Data') Window.geometry('800x600')

This creates the main window of the GUI using tkinter. The window is given a title and dimensions.

Filepath_label = tk. Label(window, text='File Path')
Filepath_label.pack()
Filepath_entry = tk. Entry(window)
Filepath_entry.pack()
Browse_button = tk. Button(window, text='Browse',
command=browse_file)
Browse_button.pack()

This creates the input area for the file path. A label and entry field are created using tk. Label() and tk. Entry(), respectively. A button is also created using tk. Button() that calls the browse_file() function when clicked. These widgets are then packed into the GUI window using pack().

Process_button = tk. Button(window, text='Process Data', command=process_data) Process_button.pack()

This creates a button for processing the data using tk. Button(). It calls the process_data() function when clicked and is also packed into the GUI window.

Output_label = tk. Label(window, text='*May exclude from HPLC test')
Output_label.pack()
Output_text = tk. Text(window)
Output_text.pack()

This creates the output area for displaying the processed.

Individual processing GUI

This Python program is a GUI that allows users to input values for four parameters related to a blood test and calculates a result based on those inputs. Here is a breakdown of the program line by line:

import tkinter as tk

This line imports the tkinter module and renames it tk. Tkinter is a standard Python library for creating GUI applications.

Defcalculate_result(Hb, HCT, MCV, MCH):

```
If MCV >= 78:

output = "Go for HPLC"

else:

cutoff = 3.667 - 0.01 * Hb + 0.001 * HCT - 0.004 * MCV + 0.064 * MCH

If cutoff>= 4.96:

output = "Normal"

else:

output = "Go for HPLC"

# Add an asterisk to the output if it is not empty

Iflen(output) > 0:

Output += "*"

# Add a disclaimer to the output with an asterisk
```

disclaimer = "Disclaimer: This program is provided for educational purposes only and should not be used as a substitute for medical advice or diagnosis. The calculations performed by this program are based on the research of Samanta *et al.* (2021) available at http://ijbc. ir/article-1-1085-en.html. The authors and publisher of this program make no representations or warranties with respect to the accuracy or completeness of the program and shall not be liable for any damages whatsoever arising from the use of this program. Users of this program assume all risks and responsibilities for their use of the program.*" output += "\n\n" + disclaimer return output

The provided function accepts four input parameters (Hb, HCT, MCV, and MCH) and performs calculations based on these values. The calculation process includes the use of conditional statements and equations. At the end of the calculation, a disclaimer and an asterisk are appended to the output. The resulting output is then returned by the function.

Defon_click(): Hb = float(hb_entry.get()) HCT = float(hct_entry.get()) MCV = float(mcv_entry.get()) MCH = float(mch_entry.get()) result = calculate_result(Hb, HCT, MCV, MCH) Result_text.config(state=tk. NORMAL) Result_text.delete("1.0", tk. END) Result_text.insert(tk. END, result) Result_text.config(state=tk. DISABLED)

This function is called when the user clicks the "Calculate" button. It reads the values of the four input fields (hb_entry, hct_entry, mcv_entry, and mch_entry), converts them to floats, passes them as parameters to the calculate_result() function, and then, displays the resulting text in the output field (result_text). The output field is first set to normal state, then cleared, then populated with the calculated result, and finally set back to disabled state.

window = tk. Tk()
window.title("Thal_Screen_CBC")
Set the window size
Window.geometry("640x360")

This creates the main GUI window and sets its title to "Thal_Screen_ CBC". The window size was also set to 640x360 pixels.

Create input fields for Hb, HCT, MCV, and MCH Hb_label = tk. Label(window, text="Hb (g/dL):") Hb_label.grid(row=0, column=0, padx=5, pady=5) Hb_entry = tk. Entry(window) Hb_entry.grid(row=0, column=1, padx=5, pady=5)

This section creates a label and an entry box for the hemoglobin (Hb) value. hb_label is a label widget, and hb_entry is an entry widget. The grid() method is used to place the widgets in a grid format on the window. row=0, column=0 specifies the position of the label widget, and row=0, column=1 specifies the position of the entry widget. pads and pay add padding around the widgets to improve their appearance.

Hct_label = tk. Label(window, text="HCT (%):")
Hct_label.grid(row=1, column=0, padx=5, pady=5)
Hct_entry = tk. Entry(window)
Hct_entry.grid(row=1, column=1, padx=5, pady=5)

This section creates a label and an entry box for the hematocrit (HCT) value. hct_label is a label widget and hct_entry is an entry widget. The grid() method is used to place the widgets in a grid format on the window.

Mcv_label = tk. Label(window, text="MCV (fL):") Mcv_label.grid(row=2, column=0, padx=5, pady=5) Mcv_entry = tk. Entry(window) Mcv_entry.grid(row=2, column=1, padx=5, pady=5)

This section creates a label and an entry box for the MCV value. mcv_ label is a label widget and mcv_entry is an entry widget. The grid() method is used to place the widgets in a grid format on the window.

Mch_label = tk. Label(window, text="MCH (pg):") Mch_label.grid(row=3, column=0, padx=5, pady=5) Mch_entry = tk. Entry(window) Mch_entry.grid(row=3, column=1, padx=5, pady=5)

This section creates a label and an entry box for the mean corpuscular hemoglobin (MCH) value. mch_label is a label widget, and mch_entry is an entry widget. The grid () method is used to place the widgets in a grid format on the window.

Calculate_button = tk. Button(window, text="Calculate", command=on_ click)

Calculate_button.grid(row=4, column=0, columnspan=2, padx=5, pady=5)

This line creates a button widget with the label "Calculate" and assigns it to the variable calculate_button. The command argument specifies the function that will be called when the button is clicked, which is onclick

This line places the calculate_button widget on the GUI window using the grid geometry manager. The button is placed in row 4 and column 0 and spans 2 columns. The pads and pay arguments add some padding to the widget to give it some space.

Result_label = tk. Label(window, text="*Result:") result_label. Result_label.grid(row=5, column=0, padx=5, pady=5) Result_text = tk. Text(window, width=20, height=2, state=tk. DISABLED) Result_text.grid(row=5, column=1, padx=5, pady=5)

This line creates a label widget with the text "*Result:" and assigns it to the variable. This line places the result label widget on the GUI window using the grid geometry manager. The label is placed in row 5 and column 0, and it has some padding. This line creates a text widget with a width of 20 characters and height of 2 lines. The state argument sets the widget to be initially disabled so that the user cannon type into it. This line places the resulted text widget on the GUI window using the grid geometry manager. The widget is placed in row 5 and column 1 and has some padding.

disclaimer = "*Disclaimer:..."

Disclaimer_label = tk. Label(window, text=disclaimer, wraplength=600, justify=tk. LEFT)

Disclaimer_label.grid(row=6, column=0, columnspan=2, padx=5, pady=5) Window.mainloop()

This line creates a string variable called disclaimer that contains a disclaimer message for the program. This line creates a label widget with the text from the disclaimer variable and assigns it to the variable disclaimer_label. The wraplength argument specifies the maximum width of the label before the text wraps to the next line and the justify argument sets the text alignment to the left. This line places the disclaimer_label widget on the GUI window using the grid geometry manager. The label is placed in row 6 and spans 2 columns. Padding is added to the widget.

This line starts the event loop for the GUI window, which waits for user input and responds accordingly. It runs until the user closes the window or the program exits.

DISCUSSION

Moreover, the development of the Python program is a cost-effective solution for improving screening programs, especially in resourcelimited settings. HPLC is commonly used to screen for thalassemia, but it is expensive and not available everywhere. In contrast, the CBC method is readily available and affordable, making it a more accessible option for screening programs. Using CBC data and the Python program to analyze it, the screening process can be made even more affordable and accessible. This approach can benefit many communities that do not have access to HPLC-based screening programs.



Fig. 1: Graphical user interface for batch file upload

Thal_Screen_CBC	
Hb (g/dL):	
HCT (%):	
MCV (fL):	
MCH (pg):	
	Calculate
*Result:	
*Disclaimer: This program is provided for medical advice or diagnosis. The calculat al. (2021), available at http://ijbc.ir/article representations or warranties with respec for any damages whatsoever arising from responsibilities for their use of the progra	educational purposes only and should not be used as a substitute for ions performed by this program are based on the research of Samanta et i-11005-en.thm. The authors and publisher of this program make no t to the accuracy or completeness of the program, and shall not be liable t the use of this program. Users of this program assume all risks and m.

Fig. 2: Individual graphical user interface

Another advantage of the Python program is that it can be easily adapted to incorporate additional parameters or algorithms; for example, the program can be modified to include other blood parameters, such as reticulocyte count or hemoglobin electrophoresis, to further improve the accuracy of blood disorder diagnosis. The program can also be updated with more advanced algorithms such as machine learning to enhance the accuracy and efficiency of the screening process further.

Ethical considerations were carefully considered during the study. The local ethics committee of Panskura Banamali College approved the study, and informed consent was obtained from all participants before collecting the blood samples. The anonymity of the participants was also ensured by anonymizing the dataset to protect their privacy.

CONCLUSION

The new screening process based on the CBC method and the Python program built for individual and batch processing is a valuable tool for blood disorder diagnosis. The program's accuracy, flexibility, and affordability make it a promising solution for improving screening programs, particularly in resource-limited settings. The program's ability to incorporate additional parameters or algorithms also means that it has the potential for further improvement and refinement. With further validation studies and modifications, the program could become an essential tool in improving health-care outcomes for many communities.

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CONFLICTS OF INTERESTS

The authors declare no conflict of interest regarding the publication of this manuscript.

AUTHORS CONTRIBUTION

The study conception and design involved contributions from both authors. Abhisek Samanta played a role in study design, data collection, and manuscript preparation. Nandan Bhattacharyya contributed to the study design, supervised the project, and prepared the final manuscript. Both authors thoroughly reviewed and approved the final manuscript.

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REFERENCES

- Colah R, Italia K, Gorakshakar A. Burden of thalassemia in India: The road map for control. Pediatr Hematol Oncol J 2017;2:79-84. doi: 10.1016/j.phoj.2017.10.002
- Sinha S, Dutta AK, Bhattacharya P, Bhattacharya S, Das MK. Spectrum of rare and novel indel mutations responsible for β thalassemia in Eastern India. Ind J Clin Biochem 2023;1:7. doi: 10.1007/s12291-022-01098-w.
- Saputra DC, Sunat K, Ratnaningsih T. A new artificial intelligence approach using extreme learning machine as the potentially effective model to predict and analyze the diagnosis of anemia. Healthcare (Basel) 2023;11:697. doi: 10.3390/healthcare11050697, PMID 36900702
- Ottolenghi S, Lanyon WG, Williamson R, Weatherall DJ, Clegg JB, Pitcher CS. Human globin gene analysis for a patient with beta-o/ delta beta-thalassemia. Proc Natl Acad Sci U S A 1975;72:2294-9. doi: 10.1073/pnas.72.6.2294, PMID 49057
- Rustam F, Ashraf I, Jabbar S, Tutusaus K, Mazas C, Barrera AE, et al. Prediction of [formula: See text]-Thalassemia carriers using complete blood count features. Sci Rep 2022;12:19999. doi: 10.1038/s41598-022-22011-8, PMID 36411295
- Samanta A, Chaudhuri, Das PK, U, Bhattacharyya N. A new approach based on erythrocyte indices to exclude normal populations from chromatography based thalassemia screening programs with very high fidelity. Iran J Blood Cancer 2021;13:107-18.
- Li N, Wu B, Wang J, Yan Y, An P, Li Y, *et al.* Differential proteomic patterns of plasma extracellular vesicles show potential to discriminate β-thalassemia subtypes. iScience 2023;26:106048. doi: 10.1016/j. isci.2023.106048, PMID 36824279