

Hereditary (primary) haemochromatosis

HFE-related haemochromatosis

type 1 Hereditary haemochromatosis

Non-HFE-related haemochromatosis

type 2 Juvenile haemochromatosis

type 3 Transferrin-receptor-associated HC

type 4 Ferroportin-associated HC

Aceruloplasminaemia

Atransferrinaemia

Neonatal haemochromatosis

Acquired (secondary) haemochromatosis

(iron content of the liver > 0.5 g/100 g liver WW)

- extreme iron intake due to dietary habits
e.g. Bantu disease or African iron overload (together with genetic basis), dietary iron overload
- extreme iron intake due to therapy
e.g. frequent blood transfusions, chronic haemodialysis
- haemolytically induced
e.g. thalassaemia
- metabolically induced
e.g. tyrosinaemia, porphyria cutanea tarda, Zellweger's syndrome, glycogenoses, lipidoses, paraneoplastic ferritin production (such as in bronchiolar carcinoma)

Haemosiderosis

- liver siderosis
(iron content of the liver < 0.5 g/100 g liver WW)
e.g. chronic alcohol damage, portocaval anastomoses, hepatitis C, cirrhosis
- pulmonary haemosiderosis
- renal siderosis
e.g. paroxysmal haemoglobinuria
- cerebral siderosis
e.g. Alzheimer's disease, Pick's atrophy, Huntington's chorea