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The thalassemias are hereditary hemolytic anemias characterized by a reduced or absent synthesis of one or more of the globin chains of hemoglobin leading to globin chain imbalance *(Weatherall and Clegg, 1981).* In patients with β-thalassemia major, iron overload due to increase intestinal iron absorption and to repeated blood transfusions results in structural and functional changes in various organs, especially the heart, liver and endocrine glands *(DeSanctis et al., 1988).* While several studies have documented an involvement of the endocrine pancreas in this disease, little is known about alterations of the exocrine pancreas.

Post mortem studies in thalassemic patients have shown that the pancreas is among the organs most severely affected by iron accumulation and fibrosis *(Sonakul et al., 1984),* however, the frequency and the clinical relevance of these findings are little known. In this work we try to demonstrate some of the exocrine and endocrine pancreatic functions performed by serum pancreatic enzyme, glucose tolerance, and some other parameters in patients with β - thalassemia major. The main purpose of this study was to assess the prevalence of characteristics of thalassemic patients subjected to chronic transfusional therapy.