

Autoimmune Hemolytic Anemias Discussion Questions:

1. What is an autoimmune hemolytic anemia?
2. What are the frequencies of warm autoantibodies vs. cold autoantibodies?
3. What lab results would you expect to see for a patient with autoantibodies?
4. Does a positive DAT always result in hemolytic anemia?
5. Describe the difference between a compensated and uncompensated anemia.
6. List reasons why some individuals may be affected by autoantibodies and others are not.
7. What is the most common cold autoantibody specificity?
8. What is the biggest problem with benign cold autoantibodies?
9. In what individuals will an anti-IH most commonly be found?

10. What are the common presentations of Cold Hemagglutinin Disease (CHD)?
11. What are the common lab findings for Cold Hemagglutinin Disease?
12. What is secondary cold autoimmune hemolytic anemia?
13. What is the presentation of Paroxysmal Cold Hemoglobinuria (PCH)?
14. Describe the steps and results of the Donath Landsteiner Test.
15. Compare and contrast CHD to PCH.
16. What are diseases that are associated with warm autoimmune hemolytic anemia (WAIHA)?
17. What are symptoms of WAIHA?
18. What are the lab findings of WAIHA?
19. What is the strength of the DAT reactions correlated with?

20. How are corticosteroids used to treat WAIHA?

21. How will a splenectomy treat WAIHA?

22. How will immunosuppressive drugs treat WAIHA?

23. What is the first treatment considered for patients with symptomatic WAIHA?

24. What blood bank testing can autoantibodies interfere with?

25. How can cold autoantibodies interfere with a blood type and how can this be resolved?

26. How can autoantibodies interfere with antibody screens and what methods are used to resolve this?

27. Describe the process of an autoadsorption.

28. Describe the process of an alloadsorption and how this might differ from autoadsorptions.

- 29. How might cold autoantibodies interfere with compatibility testing (crossmatches) and how can this be resolved?**
- 30. How can warm autoantibodies interfere with compatibility testing (crossmatches) and how can this be resolved?**
- 31. How does the drug adsorption (hapten) mechanism for drug-induced immune hemolytic anemia work?**
- 32. How does the drug-dependent or immune complex mechanism work?**
- 33. How does the membrane modification mechanism work?**
- 34. How does the autoantibody formation mechanism for drug-induced immune hemolytic anemia work?**
- 35. Give examples of drugs that may cause each type of drug-induced hemolytic anemia mechanism.**
- 36. Which drug-induced mechanisms are caused by IgG antibodies?**
- 37. Which drug-induced mechanisms are caused by plasma proteins?**

38. Which drug-induced mechanisms are caused by mainly IgM antibodies?

39. Describe how the DAT and eluate results will differ between each type of drug-induced hemolytic anemia mechanism.