

A Disease That Mimicked Hemolytic Uremic Syndrome

Farah Saleem MD, Niki Mohammadi DO, Sridivya Kosuri MD, Ahmed Fora MD, Jimmy Chua MD

Introduction

Hemolytic uremic syndrome is a known complication of H7:O157 Escherichia.Coli infection. We describe a case of a patient who mimicked hemolytic uremic syndrome after she developed Escherichia.Coli gastrointestinal infection and bacteremia.

Work Up and Clinical Course

- Blood culture: Escherichia Coli, non-toxigenic
- Peripheral smear: no schistocytes, no evidence for microangiopathic hemolytic anemia
- ADAMTS13: negative, thus ruling out thrombotic thrombocytopenia purpura
- Coombs test: positive, autoimmune hemolytic anemia as the cause of low RBCs
- Paroxysmal nocturnal hemoglobinuria tests were negative
- SLE, Lymphoproliferative malignancy blood work and bone marrow biopsy negative
- Evans syndrome diagnosis by exclusion
- Treated with oral steroids and IV ceftriaxone
- Discharged on oral sulfamethoxazole and 2 weeks course of oral prednisone
- Patient recovered fully, no "second hit" of Evans syndrome.

Discussion

- Evans syndrome:** defined as an autoimmune disorder with hemolytic anemia, immune mediated thrombocytopenia and/or neutropenia in the absence of any identifiable cause
- It is a rare condition and is diagnosed in less than 5% of all patients with idiopathic thrombocytopenia purpura and autoimmune hemolytic anemia at onset
 - It is life threatening condition
 - Mean age for diagnosis is 52, more prevalent in females.
 - Its course can be relapsing and can present with bleeding or thrombosis.
 - Mainstay of treatment is corticosteroids and intravenous immunoglobulins

Patient Presentation

A 57 year old female developed a 2-week history of nausea, vomiting, diarrhea and fatigue after she and her husband had carnitas at a restaurant in Mexico. Both of them developed gastrointestinal symptoms. Husband's symptoms resolved after a week but patient's symptoms persisted. She was eventually admitted in our hospital in the United States, where she was found to have **anemia, thrombocytopenia, and acute renal failure.**

Diagnosis

	Hemolytic uremic syndrome	Evans syndrome
Anemia	Present	Present
Coombs test	Negative	Positive
Thrombocytopenia	Present	Present
Schistocytes on peripheral smear	Present	Absent
Acute kidney injury	Present	Present

References

- Otaibi, Zachary, Rohit Rao, & Santhosh K. Sadashiv. "A Case of Evans Syndrome: A Clinical Condition With Under-Recognized Thrombotic Risk." *Journal of Hematology* [Online], 4.3 (2015): 205-209. Web. 20 Oct. 2020
- Karapetians, Anthony et al. "A Rare Case of Multiple Myeloma Presenting as Evan's Syndrome." *Journal of investigative medicine high impact case reports* vol. 7 (2019): 2324709619852760. doi:10.1177/2324709619852760
- Ramineni, Hari, Chandini M, Sri Vidya M, Narendra Babu K, & Vidyadhara S. "Evan's syndrome a strange cause of hemolysis: a case report." *International Journal of Advances in Medicine* [Online], 2.2 (2015): 183-184. Web. 20 Oct. 2020