中文題目：診斷 Evans syndrome 在 55 歲女性感染肺炎黴漿菌之後，以自體免疫性溶血性貧血及血小板低下為表現

英文題目：Diagnosis of Evans syndrome on a 55-year-old woman who presented with autoimmune hemolytic anemia and thrombocytopenia after Mycoplasma pneumonia infection

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Background: Evans syndrome is an autoimmune disorder which presented with simultaneous or sequential direct Coombs positive autoimmune hemolytic anemia in conjunction with immune mediated thrombocytopenia or neutropenia. Evans syndrome is a rare condition which was diagnosed in only 0.8% to 3.7% of all patients with either ITP or AIHA at onset. It was most reported at childhood, but adult case was also reported.

Case presentation: This was a 55-year-old woman with underlying systemic disease was presented with fever for one week. General weakness, fatigue, headache, and sore throat were also reported. Mycoplasma pneumonia infection was diagnosed due to positive Mycoplasma IgM. Anemia and thrombocytopenia were noted at presentation, with evidence of hemolysis, such as indirect hyperbilirubinemia, elevated LDH, and undetectable haptoglobin, and blood smear showed spherocytosis. After a serial hemolysis survey, autoimmune hemolytic anemia was diagnosed according to positive direct coombs test. Due to accompany with immune thrombocytopenia, Evans syndromes was diagnosed. Patient responded to prednisolone treatment. She presented a recurrent thrombocytopenia after influenza A infection 5 months later, and also responded to prednisolone treatment.

Conclusion: Evans syndrome is a rare condition which presented with simultaneous or sequential autoimmune hemolytic anemia and thrombocytopenia. Diagnosis should exclude other cause of immune cytopenia.