



VITAMIN B12 (COBALAMIN) DEFICIENCY ANEMIA

Definition:

Anemia caused by vitamin B12 deficiency, leading to impaired DNA synthesis and megaloblastic changes. Unlike folate deficiency, it often causes neurologic symptoms.



Causes / Risk Factors

1. Dietary deficiency

- Rare; mainly in strict vegans who avoid milk and eggs

2. Impaired absorption (most common)

- Pernicious anemia: autoimmune attack on parietal cells → ↓ intrinsic factor (IF) → ↓ B12 absorption
- Gastrectomy: loss of IF-producing cells

- Ileal resection / ileal disorders: loss of IF-B12 complex absorption (e.g., Crohn disease, environmental enteropathy, Whipple disease)
 - Achlorhydria / gastric atrophy: ↓ acid & pepsin → B12 not freed from food proteins
-



Absorption Pathway

1. Stomach: pepsin frees B12 → binds haptocorrin
 2. Duodenum: pancreatic proteases release B12 → binds intrinsic factor (IF)
 3. Ileum: IF-B12 complex recognized by cubilin receptor → endocytosis
 4. Plasma: B12 binds transcobalamin II → delivered to liver, bone marrow, and other cells
 5. Storage: liver stores sufficient B12 for 5-20 years, so deficiency develops slowly
-

Pathogenesis

- B12 deficiency → impaired thymidine (dTMP) synthesis
→ defective DNA replication → megaloblastic anemia
 - Most common cause: pernicious anemia
 - Chronic autoimmune gastritis → parietal cell loss → ↓ IF
 - Autoantibodies: block B12 binding to IF or block IF-B12 uptake
 - T-cell mediated gastric injury initiates the process
 - Other malabsorption causes: gastrectomy, ileal disease, ileal resection, achlorhydria
-

Clinical Features

- Insidious onset → weakness, fatigue, pallor
- Gastrointestinal: glossitis, anorexia, diarrhea
- Neurologic:

- Peripheral neuropathy (paresthesia, numbness, loss of vibration & position sense)
 - Subacute combined degeneration of the spinal cord (demyelination of dorsal columns & corticospinal tracts)
 - Hematologic: macrocytic anemia, hypersegmented neutrophils, pancytopenia
-



Diagnosis

1. Peripheral blood smear / bone marrow:
megaloblastic changes
2. Serum B12 level: low
3. Additional tests:
 - Anti-intrinsic factor antibodies (pernicious anemia)
 - Methylmalonic acid ↑ and homocysteine ↑
(both sensitive for B12 deficiency)
4. Distinguishing from folate deficiency:

- Folate deficiency → no neurologic symptoms
 - B12 deficiency → neurologic symptoms present
-



Mnemonic for Vitamin B12 Deficiency Causes:

“GASTRIC B12”

- Gastritis (autoimmune, pernicious)
 - Achalasia / atrophy of stomach
 - Surgical removal (gastrectomy)
 - Terminal ileum disease (Crohn, resection, Whipple)
 - Restricted diet (vegan)
 - Intrinsic factor deficiency
 - Complementary malabsorption
-

-> The End <-