



wAIHA Warriors

LEARN MORE ABOUT wAIHA

What is warm Autoimmune Hemolytic Anemia?

Warm autoimmune hemolytic anemia (wAIHA) is an autoimmune disorder characterized by the destruction of healthy red blood cells (hemolysis). In wAIHA and other types of autoimmune hemolytic anemia, the red blood cells are identified by antibodies and then destroyed by other immune cells. wAIHA is the most common type of autoimmune hemolytic anemia (AIHA), yet it is still a rare disease affecting only approximately 1 to 3 per 100,000 people every year.

What are the symptoms of warm Autoimmune Hemolytic Anemia?

The symptoms of wAIHA can be similar to other more common conditions, including:

Fatigue	Headache
Shortness of breath	Fever
Dark urine	Excessive sweating
Jaundice	Ringing in the ears
High heart rate	Paleness
Light-headedness	

How is wAIHA Diagnosed?

Your Hematologist will assess your symptoms and confirm your diagnosis of wAIHA with a Coomb's test. A Coomb's test is used to detect the antibodies that are destroying your red blood cells. Your wAIHA will be considered Primary or idiopathic until further testing is performed to attempt to identify a cause of secondary wAIHA. Secondary wAIHA may be caused by chronic lymphocytic leukemia (CLL), myeloma, or lymphomas.

What treatment is available for wAIHA?

Currently, there is no FDA-approved treatment for wAIHA and only a few treatment options. Glucocorticoids (prednisone) may be your first treatment option. Typically, the second-line treatment is rituximab. Recently, some Hematologists have utilized a combination approach, prescribing low doses of both prednisone and rituximab. As well as occasionally, a Hematologist will use a wait-and-watch approach to assess your improvement at a slower pace. Both treatments will require regular blood tests. If you aren't improving, there are other treatments that your Hematologist may suggest. If you still aren't improving, your Hematologist may discuss the third line of treatment, a splenectomy. A splenectomy will prevent your spleen from releasing the antibodies that destroy your red cells. Even so, there is a chance your wAIHA will return after a splenectomy. A splenectomy is a serious operation and should be discussed at length with your Hematologist.

Will Medicare, Medicaid, or health benefits from my employer cover rituximab if it is not FDA-approved?

Rituximab is expensive. You should check with your benefits administrator to determine if your plan will cover rituximab. Because rituximab is not FDA-approved for wAIHA, you may need to seek special pre-authorization from your plan. Your Hematologist's office may be able to help you obtain the pre-authorization.

Treatment Questions for your Hematologist

What are the side effects of the treatment you're prescribing?

How long will I need to take the treatment?

What happens if the treatment fails?

How can your office help me get coverage if my health plan does not cover the treatment?

Your Emotional Well-being is Important

A chronic illness diagnosis is not just about your physical health, but also your emotional well-being. Stress, anxiety, and confusion are often experienced by wAIHA patients. You might always experience the symptoms of wAIHA, or they may come and go. Now is the time to seek support from friends and family. You may also want to ask your Hematologist or General Practitioner for a referral to a mental health professional in your area. The National Association of Mental Illness (nami.org), a nationwide nonprofit organization, can also assist you.

