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Cefixime induced immune hemolytic anemia in a toddler: A case report

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Introduction: Drug-induced immune hemolytic anemia is characterized by a sudden decrease in hemoglobin after treatment with the putative drug. To date, about 100 drugs have been implicated: most commonly penicillin and its derivatives, cephalosporins (cefotetan, ceftriaxone etc.), methyl dopa, β -lactamase inhibitors and quinidine. We are reporting a case of severe hemolysis associated with oral cefixime (3rd generation cephalosporin) which has not been described earlier.

Case Report: A 22-month-old Indian girl presented with fever and cough for 5 days. She had been receiving oral cefixime for 5 days. Past and family history is non-contributory. Examination revealed severe pallor and mild icterus; no tachypnea, dyspnea, hepatosplenomegaly, lymphadenopathy, bleeding tendency, rash or limb pain.

Investigations

- CBC: Hb: 4.3 g/dl, Hct:14.7, RBC: 1.9 M/ul, MCV: 71fl, MCH: 22.5 pg, MCHC: 31.4 g/dl, RDW: 15.4%
- Peripheral blood film showed a few target cells.
- Reticulocyte count: 10% (N 0.5-2.5).
- S.Bilirubin (Total/Direct): 2.7/0.65 mg/dl.
- Urinalysis: urobilinogen trace, blood+, hemoglobin+
- Direct Antiglobulin Test (DAT): +ve
- S.LDH-868 U/l (high)
- Haptoglobin: not detectable,
- Electrophoresis: Hb A1: 96.5%, A2: 2.3%, F: 1.2%,
- G6PD was normal

Treatment: She was treated by discontinuing cefixime, transfused with packed RBCs and given Folic acid and IV Methylprednisolone for 2 days. Post-transfusion Hb was 5.4. She was discharged on day 4 on oral prednisolone and folic acid. Hb increased gradually to 11.0 on day 24 and remained stable.

Discussion: Autoimmune hemolysis in this case probably occurred as a reaction to cefixime, which may loosely bind RBCs, thus becoming the immunogenic and stimulating production of antibodies. The immune complexes formed bind non-specifically to other RBCs and lead to activation of the complement system which generates a severe intravascular reaction, with a positive DAT.

Conclusion: Acute hemolysis is a rare complication of Cefixime. A high index of suspicion is advised to avoid complications.

Biography

Karan Soni has done medical graduation from Christian Medical College, Ludhiana, India in 2017. He is undergoing Medical Observership at Ahalia Hospital Musaffah, Abu Dhabi, UAE He has acquired the ECFMG certificate in 2018. DOB May 10, 1993. He is applying for Residency in the USA for 2019.

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