Clarification regarding the clinical scenario mentioned in the end of lecture number 6, this was based on a question from last year final exam: here is the exact wording of the question as it appeared last year

1- **A 71-year-old female presented with shortness of breath and tachycardia for several months, her hemoglobin was 7.7 gm/dL (reference range 11.5-15.5 gm/dL), Coombs test was positive for IgG antibodies on her RBCs, her LDH and bilirubin were above reference range, and haptoglobin was below reference range, which one of the following is true regarding her anemia?**
   A. In the vast majority of cases, hemolysis is caused by drugs
   B. The most common antibody is IgA
   C. It's fatal in the vast majority of cases
   D. Hemolysis occurs preferentially at cold temperatures.
   E. It can be caused by B cell neoplasms.

This is a clinical scenario case and the first step is to arrive at a diagnosis:
-The patient has anemia based on her presentation and low hemoglobin.
-This anemia is clearly hemolytic based on the fact that she has high LDH, high bilirubin and low haptoglobin.
-Additionally it is autoimmune hemolytic anemia because Coombs test is positive, and to be more specific it is a warm autoimmune hemolytic anemia because Coombs test identified IgG and not IgM.
So the final diagnosis is "autoimmune warm hemolytic anemia", now for the question choices:
   A. is incorrect because the majority of cases are idiopathic
   B. is incorrect as the most common antibody is IgG
   C. is incorrect as it is usually asymtopamtic and slef-limiting
   D. is incorrect as hemolysis occurs in the spleen
   E. is the correct answer, Warm autoimmne hemolytic anemia can be associated with some B cell neoplasms, specifically CLL
I hope this helps.