### Priority Topic: ANEMIA

#### Key Features:

1. **Assess the risk of decompensation** of anemic patients (e.g., volume status, the presence of congestive heart failure [CHF], angina, or other disease states) to decide if *prompt transfusion or volume replacement* is necessary.

**What you should study:**

- Transfusion AAFP 2011
- EM Cases Episode 36: Transfusions, Anticoagulants and Bleeding

2. **In a patient with anemia**, classify the anemia as microcytic, normocytic, or macrocytic by using the MCV (mean corpuscular value) or **smear test result**, to direct further assessment and treatment.

**What you should study:**

- L'anémie persistente chez la personne âgée MduQ 2014
- Anemia in Older Persons AAFP 2010

3. **In all patients with anemia**, determine the iron status before initiating treatment.

**What you should study:**

- L'anémie Ferriprive - comment fer pour bien le traiter MduQ 2011
4. In a patient with iron deficiency, investigate further to find the cause.

**What you should study:**

✓ Iron Deficiency Anemia AAFP 2013
✓ Iron deficiency anemia in children CPSP 2011
✓ Iron deficiency and other anemias in children AAFP 2016
✓ Evaluation of Anemia in Children AAFP 2010
✓ Evaluation of Microcytosis AAFP 2010

5. Consider and look for anemia in appropriate patients (e.g., those at risk for blood loss [those receiving anticoagulation, elderly patients taking a nonsteroidal anti-inflammatory drug] or in patients with hemolysis [mechanical valves]), whether they are symptomatic or not, and in those with new or worsening symptoms of angina or CHF.

**What you should study:**

✓ Just do it! Keep anemia in your DDx. I couldn’t find a good article on this.

6. In patients with macrocytic anemia:
   a) Consider the possibility of vitamin B₁₂ deficiency.
   b) Look for other manifestations of the deficiency (e.g., neurologic symptoms) in order to make the diagnosis of pernicious anemia when it is present.

**What you should study:**

✓ La carence en vitamin B12
✓ Vitamin B12 Deficiency AAFP 2017
✓ Evaluation of Macrocytosis AAFP 2009
✓ Anémie persistente chez la personne âgée MduQ 2014
7. As part of well-baby care, consider anemia in high-risk populations (e.g., those living in poverty) or in high-risk patients (e.g., those who are pale or have a low-iron diet or poor weight gain).

**What you should study:**

✓ Iron deficiency and other anemias in children AAFP 2016

8. When a patient is discovered to have a slightly low hemoglobin level, look carefully for a cause (e.g., hemoglobinopathies, menorrhagia, occult bleeding, previously undiagnosed chronic disease), as one cannot assume that this is normal for them.

**What you should study:**

✓ Evaluation of Occult GI Bleed AAFP 2013
✓ Alpha and Beta Thalassemia AAFP 2009
✓ Multiple Myeloma AAFP 2017
✓ Severe anemia from HMB AJOG 2015

9. In anemic patients with menorrhagia, determine the need to look for other causes of the anemia.

**What you should study:**

✓ Just do it!