Abstract :

Evans syndrome(ES) is an autoimmune disorder characterized by the simultaneous or sequential development of autoimmune haemolytic anaemia (AIHA) and immune thrombocytopenia (ITP) and /or immune neutropenia in the absence of any underlying cause. This was first described in 1951 and is a rare condition because it is diagnosed in only 0.8% to 3.7% of all patients with either ITP or AIHA. It was considered as an idiopathic condition and thus mainly considered as a diagnosis of exclusion . But ES may be associated with or show other diseases or conditions such as SLE, lymphoproliferative disorders or primary immunodeficiencies.

We report a 70 year old male patient who, initially had fever with low platelet and managed as for viral fever. After few weeks he presented with symptomatic anaemia and found to have mixed AIHA with persistent low platelets and splenomegaly. The patient was referred to consultant haematologist and possible secondary causes for low platelets and AIHA were excluded. Prednisolone was started with excellent response and the patient was diagnosed to have Evans Syndrome .