

### QUESTION

A 65-year-old male patient with a long history of hypertension and a recent diagnosis of type 2 diabetes mellitus is being treated with lisinopril and metformin. He has been experiencing increasing fatigue and weakness over the past few weeks. His blood pressure is well-controlled, and his blood glucose levels are stable. He has no other significant medical history and is on no other medications. Physical examination is unremarkable. Laboratory tests show a hemoglobin of 10 g/dL, hematocrit of 30%, and a reticulocyte count of 1%. The patient's renal function is normal. What is the most likely cause of his symptoms?

- A. Iron deficiency anemia
- B. Vitamin B12 deficiency
- C. Folate deficiency
- D. Hemolytic anemia
- E. Acute kidney injury

ANSWER: A

EXPLANATION: The patient's symptoms of fatigue and weakness, along with the laboratory findings of a microcytic anemia (low hemoglobin and hematocrit) and a low reticulocyte count, are most consistent with iron deficiency anemia. This condition is common in older adults and can be caused by chronic blood loss, such as from a gastrointestinal source. The patient's stable blood pressure and blood glucose levels, as well as his normal renal function, make other causes of anemia less likely.

### QUESTION

A 45-year-old male patient with a long history of hypertension and a recent diagnosis of type 2 diabetes mellitus is being treated with lisinopril and metformin. He has been experiencing increasing fatigue and weakness over the past few weeks. His blood pressure is well-controlled, and his blood glucose levels are stable. He has no other significant medical history and is on no other medications. Physical examination is unremarkable. Laboratory tests show a hemoglobin of 10 g/dL, hematocrit of 30%, and a reticulocyte count of 1%. The patient's renal function is normal. What is the most likely cause of his symptoms?

- A. Iron deficiency anemia
- B. Vitamin B12 deficiency
- C. Folate deficiency
- D. Hemolytic anemia
- E. Acute kidney injury

ANSWER: A

EXPLANATION: The patient's symptoms of fatigue and weakness, along with the laboratory findings of a microcytic anemia (low hemoglobin and hematocrit) and a low reticulocyte count, are most consistent with iron deficiency anemia. This condition is common in older adults and can be caused by chronic blood loss, such as from a gastrointestinal source. The patient's stable blood pressure and blood glucose levels, as well as his normal renal function, make other causes of anemia less likely.