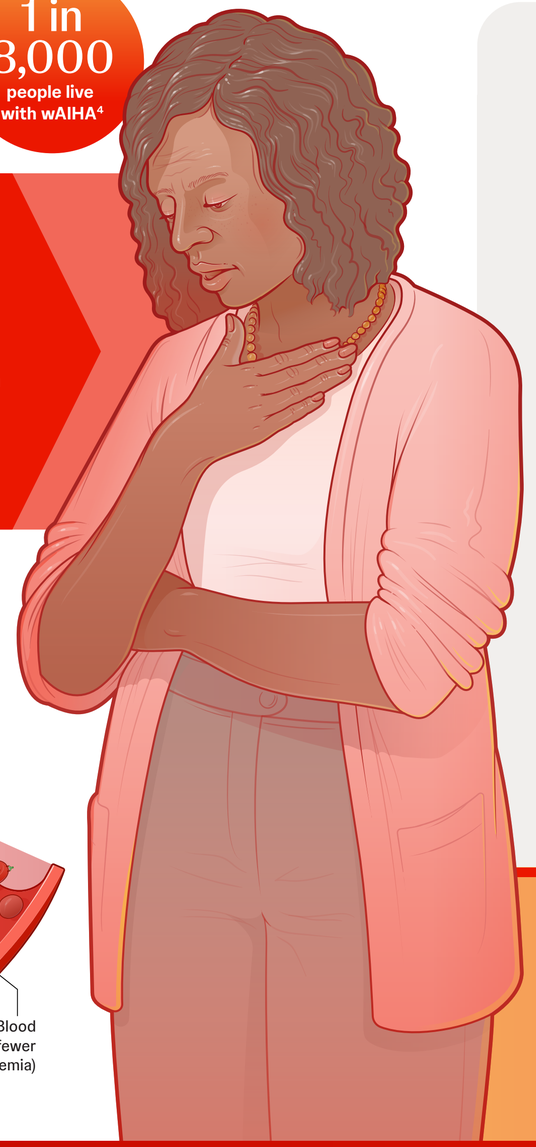
Warm Autoimmune Hemolytic Anemia (wAIHA)

wAIHA is a rare, life-threatening condition where the immune system prematurely destroys red blood cells[1-3]

Meet Wanda*

She has been experiencing wAIHA symptoms that impact her ability to perform daily activities, her personal life, and her emotional health.

1 in 8,000 people live with wAIHA[4]



Symptoms[1,4]

Fatigue

Dyspnea
(shortness of breath)

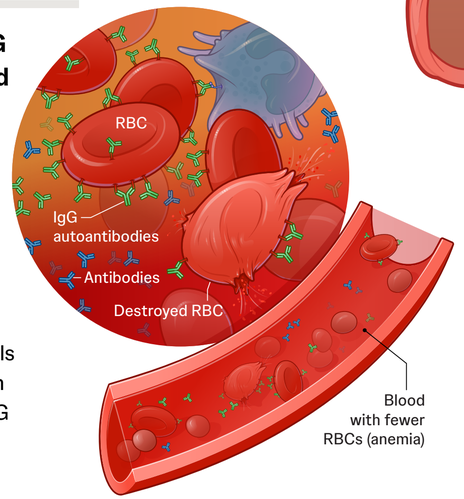
Pallor
(pale skin)

Other:

- **Jaundice** (yellowing of skin and whites of the eyes)
- **Other symptoms of anemia** (when the body doesn't have enough red blood cells): chest pain, lethargy, confusion, fainting, unstable blood pressure

What happens in wAIHA?

wAIHA is an autoimmune disease where IgG autoantibodies (pathogenic antibodies) bind to a patient's own healthy red blood cells (RBCs) and mark them for destruction, leading to anemia.[1-3]



Antibodies are proteins produced by B cells that normally mark foreign substances like bacteria and viruses for elimination by the immune system, making them crucial for maintaining the body's health.[5]

FcRn is one of the key regulators of IgG antibody levels in circulation, helping them remain in the blood stream for longer.[6,7] In wAIHA, FcRn also keeps pathogenic IgG autoantibodies in circulation for longer.[6]

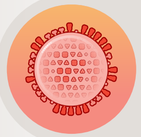
Wanda's Journey

Many factors of living with wAIHA cause anxiety and depression due to fear of relapse and immunosuppression or treatment uncertainty

Possibility of relapse (when wAIHA symptoms come back) or worsening health[8,9]

Fear of triggering wAIHA symptoms or further worsening a patient's health can prevent them from doing physical activities and maintaining personal relationships.

Activities that may cause shortness of breath, increased heart rate, etc.



Contracting infectious diseases (i.e., flu, common cold) because they may trigger relapse

Considerations of treatment effects and response duration[6,10,11]

Treatments currently used for wAIHA are not FDA or EMA approved and can vary in how patients respond, how effective they are, their potential side effects, and their impact on a patient's life.

Immunosuppressive Drugs
- Corticosteroids
- B cell-depleting drugs

Invasive Medical Procedures
- Surgical removal of spleen
- Repeat blood transfusions

There is an unmet need for treatments that target specific disease mechanisms of wAIHA.

There are currently no FDA- or EMA-approved therapies for wAIHA. There is a need for targeted therapies approved for wAIHA that have proven safety profiles and can maintain immune function, potentially limiting the need for surgical removal of the spleen or repeat blood transfusions in patients like Wanda.

*Not a real patient.
EMA, European Medicines Agency;
FcRn, neonatal Fc receptor;
FDA, Food and Drug Administration.

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