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A Survey of 121 patients with Idiopathic Thrombocytopenic Purpura

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Abstract:

Introduction: Idiopathic Thrombocytopenic Purpura is one of the most common causes of thrombocytopenia with various clinical courses and different responses to its treatment modalities. Therefore, we decided to evaluate the clinical course of this disease in our patients.

Methods: In this case series study, from March 1998 to March 2004, we evaluated 121 patients. As a first line of treatment, all of those patients received prednisolone (1mg/kg/day) for 6 weeks. Those who didn't respond or were refractory to prednisolone were candidates for splenectomy, and those who refused these modalities or didn't respond to them were treated with Azathioprine. **Results:** 99 patients (81.8%) were female and 22 (18.2%) were male, aged 11-73 years (mean: 28.6). Two patients had immune hemolytic anemia in addition to thrombocytopenia, 4 had systemic lupus erythematosus, and one was HIV positive. %44.6 of patients fully responded to prednisolone, 42 patients (% 34.7) underwent splenectomy and %83.3 of them responded to it. 31 splenectomies were performed in the first three months after diagnosis and 27 (87.1%) of them showed complete response, but 8 (72.7%) of the patients splenectomized after 3 months, had complete response. 14 patients were treated with Azathioprine, 2 of which (14.3%) platelet count normalized.

Conclusion: ITP is more common in females than males. Prednisolone is preferred as a non-invasive treatment with suitable response in comparison to other modalities responses to splenectomy, indicating that this modality of treatment is useful and effective, especially when performed in the first 3 months of the diseases.

Keywords:

[Idiopathic thrombocytopenic purpura\(ITP\)](#) , [Prednisolone](#) , [Azathioprine](#)

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