

Immune Thrombocytopenia



Immune thrombocytopenia, or ITP, is a bleeding disorder. In ITP, the blood doesn't clot as it should. This is due to a low number of blood cell fragments called platelets or thrombocytes.

Overview

Without enough platelets, bleeding can occur inside the body (internal bleeding) or underneath or from the skin (external bleeding).

People who have ITP often have purple bruises called purpura. These bruises appear on the skin or mucous membranes (for example, in the mouth). Bleeding from small blood vessels under the skin causes purpura.

People who have ITP also may have bleeding that causes tiny red or purple dots on the skin. These pinpoint-sized dots are called petechiae. Petechiae may look like a rash.

Petechiae and Purpura

People who have ITP also may have nosebleeds, bleeding from the gums during dental work, or other bleeding that's hard to stop. Women who have ITP may have menstrual bleeding that's heavier than normal.

A lot of bleeding can cause hematomas. A hematoma is a collection of clotted or partially clotted blood under the skin. It looks or feels like a lump.

Bleeding in the brain as a result of ITP is very rare, but can be life threatening if it occurs.

In most cases, an autoimmune response is thought to cause ITP. Normally, your immune system helps your body fight off infections and diseases. But if you have ITP, your immune system attacks and destroys its own platelets. The reason why this happens isn't known.

ITP can't be passed from one person to another.

Types of Immune Thrombocytopenia

The two types of ITP are acute (temporary or short-term) and chronic (long-lasting).

Acute ITP generally lasts less than 6 months. It mainly occurs in children—both boys and girls—and is the most common type of ITP. Acute ITP often occurs after a viral infection.

Chronic ITP lasts 6 months or longer and mostly affects adults. However, some teenagers and children do get this type of ITP. Chronic ITP affects women two

to three times more often than men.

Treatment depends on the severity of bleeding and the platelet count. In mild cases, treatment may not be needed.

Outlook

For most children and adults, ITP isn't a serious or life-threatening condition. Acute ITP in children often goes away on its own within a few weeks or months and doesn't return. In 80 percent of children who have ITP, the platelet count returns to normal within 6 to 12 months. Treatment may not be needed.

For a small number of children, ITP may require further medical or surgical treatment.

Chronic ITP varies from person to person and can last for many years. Even people who have severe forms of chronic ITP can live for decades. Most people who have chronic ITP can stop treatment at some point and maintain a safe platelet count.

What are the Causes of Immune Thrombocytopenia?

Immune thrombocytopenia (ITP) is a fairly common blood disorder. Both



Both children and adults can develop ITP. Children usually have the acute type of ITP. Acute ITP often develops after a viral infection.

Adults tend to have the chronic type of ITP. Women are two to three times more likely than men to develop chronic ITP.

The number of cases of ITP is rising because routine blood tests that can detect a low platelet count are being done more often.

ITP can't be passed from one person to another.

What Are the Signs and Symptoms of Immune Thrombocytopenia?

Immune thrombocytopenia (ITP) may not cause any signs or symptoms. However, ITP can cause bleeding inside the body or underneath or from the skin. Signs of bleeding may include:

Bruising or purplish areas on the skin or mucous membranes (such as in the mouth). These bruises are called purpura. They're caused by bleeding under the skin, and they may occur for no known reason.

Pinpoint red spots on the skin called petechiae. These spots often are found in

groups and may look like a rash. Bleeding under the skin causes petechiae.

A collection of clotted or partially clotted blood under the skin that looks or feels like a lump. This is called a hematoma.

Nosebleeds or bleeding from the gums (for example, during dental work). Blood in the urine or stool.

Any kind of bleeding that's hard to stop could be a sign of ITP. This includes menstrual bleeding that's heavier than normal. Bleeding in the brain is rare, and its symptoms may vary.

A low platelet count doesn't directly cause pain, problems concentrating, or other symptoms. However, a low platelet count might be associated with fatigue.

How Is Immune Thrombocytopenia Treated?

Treatment for immune thrombocytopenia (ITP) is based on how much and how often you're bleeding and your platelet count.

Adults who have mild ITP may not need any treatment, other than watching their symptoms and platelet counts. Adults who have ITP with very low

platelet counts or bleeding problems often are treated.

The acute type of ITP that occurs in children often goes away within a few weeks or months. Children who have bleeding symptoms, other than merely bruising (purpura), usually are treated.

Children who have mild ITP may not need treatment other than monitoring and follow-up to make sure their platelet counts return to normal.

Corticosteroids, such as prednisone, are commonly used to treat ITP. Other medicines also are used to raise the platelet count. These medicines include rituximab, immune globulin, and anti-Rh (D) immunoglobulin.

Medicines also may be used with a splenectomy.

If medicines or splenectomy don't help, two newer medicines—eltrombopag and romiplostim—can be used to treat ITP.

Other treatment for ITP may include surgical removal of the spleen (splenectomy), and platelet transfusions for people who have ITP with severe bleeding.

Source: National Cancer Institute. ■

RELATED FACT SHEETS

You may be interested in the following fact sheets from *Oncology Nurse Advisor*

- **Polycythemia Vera** <http://bit.ly/ONA-Fact-Polycythemia>
- **Chronic Lymphocytic Leukemia** <http://bit.ly/ONA-Facts-CLL>
- **Tumor Grade** <http://bit.ly/ONA-Facts-TumorGrade>