

A RARE CAUSE OF THROMBOCYTOPENIA

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CASE HISTORY

- ◉ 4 1/2 year old, girl, first order child of non consanguineous parents
- ◉ Red colored spots over both extremities for 4 days
- ◉ No H/O bleeding gums
- ◉ No H/O hematemesis or melena
- ◉ No H/O drug intake
- ◉ No H/O joint pain/ difficulty in breathing
- ◉ H/O short febrile illness 1 week ago

CASE HISTORY

- ◉ No significant medical illness in past
- ◉ Post natal period- uneventful
- ◉ Developmental history normal
- ◉ Family H/O maternal aunt died of hematological malignancy

EXAMINATION

- Well child
- Multiple petechiae and ecchymotic patches over both upper and lower limbs and neck
- No gum bleeds
- No generalised lymphadenopathy
- No organomegaly

INVESTIGATIONS

- ⦿ Hb- 9.8 gm/dl
- ⦿ TC-7,900
- ⦿ DC-N25L73M2
- ⦿ **Platelet- 15,000/cu. mm**
- ⦿ PT- 14/14
- ⦿ PTT-30/30

PROVISIONAL DIAGNOSIS

ACUTE IMMUNE THROMBOCYTOPENIA

TREATMENT

- Bone marrow aspiration was done
- Started on IV I g

○ Bone marrow smear

NO MEGAKARYOCYTES

WHAT ARE WE DEALING WITH?
NOT ITP
AS THERE IS NO MEGAKARYOCYtic
RESPONSE

**AMEGAKARYOCYTIC
THROMBOCYTOPENIA
(PROBABLY ACQUIRED)**

AMEGAKARYOCYTIC THROMBOCYTOPERNIA

- ⊙ Part of bone marrow failure syndromes
- ⊙ Thrombocytopenia with absent megakaryocytes in bone marrow
- ⊙ Associated physical anomalies- absent radius, radio ulnar synostosis
 - Congenital
 - acquired

CONGENITAL AMEGAKARYOCYTIC THROMBOCYTOPENIA

- Presents in the 1st week of life
- Mutation of gene C-MPL - receptor for thrombopoietin
- Serum thrombopoietin levels are high

ACQUIRED AMEGAKARYOCYTIC THROMBOCYTOPENIA

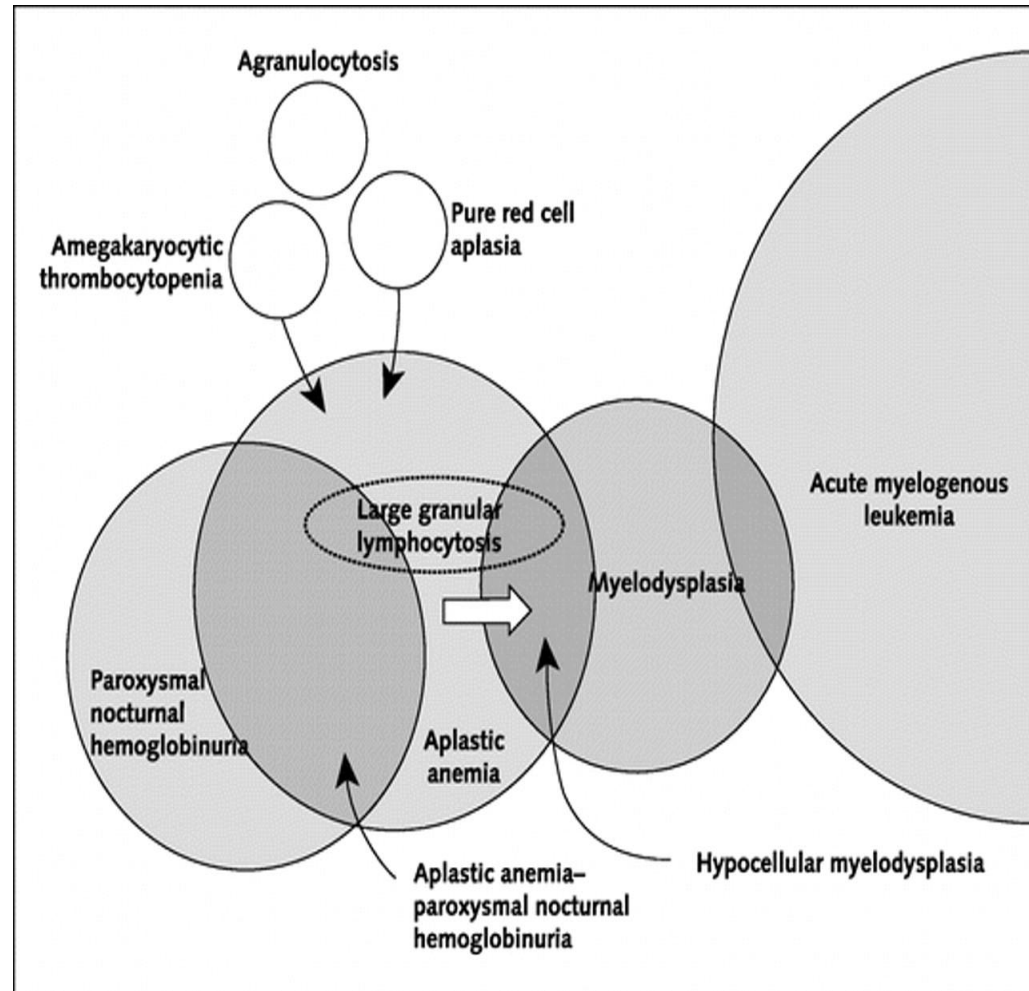
- ◉ Viral illness, drugs toxicity, myelophisthic infiltrates of bone marrow
- ◉ Antibody and cell mediated immunity-suppression of thrombopoeisis
- ◉ Serum thrombopoeitin levels are high
- ◉ Usually presents with muco cutaneous bleeds

TREATMENT

- Platelet transfusion
- Regular followup
- Hematopoeitic stem cell transplant

NATURAL HISTORY

- Aplastic pancytopenia
- Myelodysplastic syndrome
- Myeloid leukemia



OUR CHILD

- ◉ Repeat platelet count after IVIG 20,000/cu mm
- ◉ Started on oral steroids
- ◉ Parents counseled about the nature of the disease
- ◉ Repeat counts after 2 weeks - pancytopenia
Aplastic marrow
- ◉ Adviced HSCT

MESSAGE

- Importance of bone marrow smear study in a child with initial presentation like ITP

THANK YOU