

RESPUESTA A ELTROMBOPAG EN PACIENTES PEDIÁTRICOS CON TROMBOCITOPENIA INMUNE PRIMARIA CRÓNICA EN DOS INSTITUCIONES DE BARRANQUILLA EN EL PERIODO 2021-2022

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RESUMEN

Resumen: Los pacientes con trombocitopenia inmune primaria (PTI) se caracterizan por presentar disminución del recuento de plaquetas y dependiendo el número de las mismas pueden presentarse un número variable de manifestaciones clínicas. Esta enfermedad es considerada benigna y autolimitada que suele resolver en el 60% de los pacientes en los primeros 6 meses; sin embargo existe un grupo de paciente en el cual se cronifica, en estos se aplican tratamientos como los corticoides e infusiones de inmunoglobulina G, sin embargo ante la persistencia de la trombocitopenia se han ampliado las opciones de tratamiento con el uso de medicamentos agonistas del receptor de la trombopoyetina (r-TPO) (Eltrombopag)

Objetivo: Evaluar la respuesta al Eltrombopag en pacientes pediátricos diagnosticados con trombocitopenia inmunológica primaria (PTI) crónica a través del recuento de plaquetas en dos centros de consulta externa de Barranquilla durante el periodo 2021-2022.

Metodología : Estudio observacional de cohorte retrospectivo en dos centros, con la obtención de historias ciencias que confieran al diagnostico de trombocitopenia inmune primaria dados por el CIE10 y cumplan con los criterios de inclusión establecidos para la investigación

Resultados: Se analizó una cohorte de 37 pacientes de los cuales, los escolares (6-11) años tuvo la mayor cantidad de pacientes que usaron Eltrombopag, la edad promedio fue de 8,12 años ($\pm 1,69$) y la edad de diagnóstico fue de 8,25 años ($\pm 1,65$). Además, el 75,8% de los pacientes fueron niñas. La dosis mas utilizada fue de 50mg con recuentos plaquetarios entre 30.000 – 100.000/uL en los que se consideran seguros según la Academia Americana de Hematología y la Sociedad Española de Hematología y Oncología Pediátrica, con respecto al numero de residuas posterior al uso del EPAG se encontró que 94,6% que utilizaron Eltrombopag habían presentado entre 1-5 recaídas y el 5,3% más de 5 recaídas; de los pacientes que utilizaron el medicamento no requirieron terapias adicionales el 59,448% de los pacientes, entre los tratamientos coadyuvante a la terapia con el EPAG se destaca 59,8% corticoides, 8,11% Inmunoglobulina G y 8,11% esplenectomía.

Conclusiones: La respuesta al Eltrombopag en pacientes con PTI crónica se obtuvo mayormente con dosis de 50mg con obtención de recuentos de plaquetas entre 30.000 y >100.000 /uL, así como la disminución de las recaídas (1-5 recaídas) con esta dosis, el aumento de plaquetas fue evidenciado en la población y sin requerir terapias adicionales en el 59,8%

Palabras clave: Agonista del receptor de la Trombopoyetina, Eltrombopag, trombocitopenia inmunológica primaria crónica, anticuerpos, corticoides, inmunoglobulina

ABSTRACT

Abstract: Patients with primary immune thrombocytopenia (ITP) are characterized by a decrease in platelet count and depending on the number of platelets, a variable number of clinical manifestations may occur. This disease is considered benign and self-limited and usually resolves in 60% of patients in the first 6 months; however there is a group of patients in which it becomes chronic, in these patients treatments such as corticosteroids and immunoglobulin G infusions are applied; however, in view of the persistence of thrombocytopenia, the treatment options have been expanded with the use of thrombopoietin receptor agonist drugs (r-TPO) (Eltrombopag).

Objective : To evaluate the response to Eltrombopag in pediatric patients diagnosed with chronic primary immune thrombocytopenia (ITP) through platelet counts in two outpatient centers in Barranquilla during the period 2021-2022.

Methodology: Observational study of retrospective cohort in two centers, with the collection of clinical histories that confer the diagnosis of primary immune thrombocytopenia given by the ICD10 and meet the inclusion criteria established for the research.

Results: A cohort of 37 patients was analyzed, of which, school children (6-11 years old) had the highest number of patients who used Eltrombopag, the average age was 8.12 years (± 1.69) and the age of diagnosis was 8.25 years (± 1.65). Furthermore, 75.8% of the patients were girls. The most commonly used dose was 50mg with platelet counts between 30,000 - 100.000/uL, which are considered safe according to the American Academy of Hematology and the Spanish Society of Pediatric Hematology and Oncology. In regards to the number of relapses following EPAG, it was found that 94.6% who used Eltrombopag had presented between 1-5 relapses and 5.3% had more than 5 relapses; 59.8% of the patients who used the drug, they did not require additional therapies. Among the adjuvant treatments to EPAG therapy, 59.8% required corticosteroids, 8.11% Immunoglobulin G and 8.11% splenectomy.

Conclusions: The response to Eltrombopag in patients with chronic ITP was obtained mostly with doses of 50mg with platelet counts between 30,000 and >100,000 /uL, as well as the decrease of relapses (1-5 relapses) with this dose, the increase of platelets was evidenced in the population and without requiring additional therapies in 59.8%.

Key words: Thrombopoietin receptor agonist, Eltrombopag, chronic primary immune thrombocytopenia, antibodies, corticosteroids, immunoglobulin.

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