III. Πρώτη συστηματική ανάλυση των δεδομένων του αρχείου: Abstract Book EHA22

ANALYSIS OF THE DEMOGRAPHIC, CLINICAL, LABORATORY AND TREATMENT-RELATED DATA OF ITP PATIENTS IN GREECE BASED ON THE NATIONAL ITP REGISTRY OF THE HELLENIC SOCIETY OF HAEMATOLOGY

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Background: Immune thrombocytopenia (ITP) consists of various acquired disorders caused by autoantibodies against platelets resulting in increased platelet destruction and impaired thrombopoiesis. ITP is characterized as primary when an underling etiology cannot be identified and secondary when a certain etiology exists. Data concerning ITP characteristics at a national level are limited.

Aims: The purpose of the study was to access systematically the demographic, clinical, laboratory and treatment-related data of ITP in Greece based on the national database (ITP registry) operated and supported by the Hellenic Society of Haematology.

Methods: Patient data were collected over 2013-2016. The data source is a unique database initiated and managed by the Haematology Department of the University of Crete (UoC) and supported by the Center of Information and Communications Technologies of the UoC. The registry has been configured for national and regional base usage considering hospitals as the core unit. A certified researcher/administrator has access to a platform where he/she can record and study patients' data. The entire project has been developed using the robust open source tools of operating systems and Relational Data Base Management System (RDBMS) packages.

Results: We analyzed data from 696 adult ITP patients registered from 14 different hospitals from all parts of Greece. The median age at diagnosis was 53 years (range 15-97 years). Two peaks were observed at the age of 19-30 and 71-80 years. There was a female (60.89%) versus male (39.1%) predominance with higher frequency of females in younger (19-30 years) and of males in older (71-80 years) ages. Females appeared with more severe thrombocytopenia. The median platelet count at diagnosis was $15x10^3$/ml. The majority of patients presented with hemorrhagic symptoms (70.9%). The main manifestations were cutaneous bleeding (64%), oral cavity bleeding (20.9%), epistaxis (8.9%), menorrhagia (7.8%) and gastrointestinal bleeding (5.5%). 430 patients (61.78%) had primary ITP and 266 (38.22%) secondary ITP. Among these secondary ITP cases, 44.22% were related to infectious agents, 25.74% to drugs, 17.17% to collagen vascular diseases and 12.87% to cancer. Patients with positive ANA antibodies with no evidence of any underlying diseases were included in the primary ITP group. The main patient comorbidities were hypertension (22.64%), thyroid disease (12.32%) and cardiovascular disease (10.17%). Treatment was given in 620 patients at diagnosis. Specifically, 577 (93%) patients were treated with cortocosteroids, 322 (51.9%) with intravenous IgG, 265 (42.7%) with both, and 112 (18%) received other treatments including rituximab (4.8%), anti-D immunoglobulin (4%) and thrombopoietin receptor agonists (4%). The majority of the patients (85%) responded to the initial treatment. Follow-up data for more than one year are currently available in 259 patients (133 with persistent ITP and 126 with chronic ITP). Splenectomy has been performed in 59/696 patients (8.47%).

Summary/Conclusion: Primary ITP is more frequent than secondary ITP in Greece, the disease displays two peaks at the ages of 19-30 and 71-80 years, presents a female predominance and high frequency of hemorrhagic symptoms. Treatment is mainly based on corticosteroids and/or intravenous IgG. Registration and follow-up of larger number of patients and evaluation of response to various treatments are anticipated to extend our knowledge on the pathophysiology and natural history of ITP and may also reveal peculiarities at local level.

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