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THROMBOPOIETIN RECEPTOR AGONISTS IN THE TREATMENT OF PRIMARY IMMUNE THROMBOCYTOPENIA: OUR EXPERIENCE

Ivana Golubović[1,2], Miodrag Vučić[1,3], Irena Ćojbašić[1,3], Ivan Tijanić[1,3], Vesna Nikolić[1], Andrijana Mladenović[1,2], Nemanja Jovanović[2,4]

The primary immuna thrombocytopenia (ITP) is an acquired autoimmune disease characterized by isolated thrombocytopenia PLT < 100 x 10^9/L, and the absence of all conditions and diseases that can result in thrombocytopenia. The first-line therapy in ITP involves the use of corticosteroids, intravenous immunoglobulin or an immunoglobulin anti-D. The second-line treatment includes splenectomy, immunosuppressive drugs and agonists of thrombopoietin receptor (TPO-RA). To describe the treatment results with TPO-RA (eltrombopagin patients with ITP in the Clinic of Hematology UCC NIš. Between March 2018 and December 2023, at the Clinic of Hematology UCC Niš, 6 patients with ITP in which the previous treatment lines did not respond to the therapy or gave side effects were treated with TRO-RA. The indication for the TRO-RA therapy was chronic ITP. The period from the diagnosis to the initiation of the treatment with TRO-RA was on average 71,5 months. The analysis of the average number of platelets after TPO-RA therapy showed an upward trend. The TPO-RA does not show immunosuppression, they lead to an increase in platelet count, stopping bleeding and improving the quality of life. Therefore, TPO-RA are essential medicines for the treatment of ITP after the failure of the first and second - line therapy.

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Key words: *immune thrombocytopenia, treatment of immune thrombocytopenia, thrombopoietin receptor agonists*