

## **Therapeutic approach of ITP in Lebanon. Results of a self-reported practice survey.**

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**Introduction** Several treatment options exist for Immune Thrombocytopenic Purpura (ITP). The challenge for physicians has been to choose the right therapy at the right time and to know when to switch therapy. We conducted a survey among practicing pediatric hematology/oncology experts in Lebanon to uncover attitudes regarding the approach towards management of ITP.

**Methods** A survey was distributed to fellows and practicing pediatric hematologists/oncologists. The 14 item questionnaire was preceded by a case scenario of a 5 year-old patient presenting with ITP. Questions addressed primary therapy choice, secondary treatment options and additional management aspects.

**Results** Of the 17 pediatric hematologists/oncologists, 65% responded. 41% would treat with drug therapy, the majorly choosing IVIG's (91%) with most using a dose of 1gm/kg per day for 2 days (82%). About one third (31%) would prescribe prednisone at a dose of 1mg/kg/d with the remaining using doses of 2 and 4 mg/kg/d (23% for each). Treatment with anti-D is not popular with only 9% using it. The majority are in favor of hospitalization of patients with ITP (36% always, 45% usually and 18% sometimes). 36% would always perform a bone marrow (BM) aspirate if prednisone is prescribed. If the patient was 18 months old, 91% would use IVIG as first line and 9% prednisone. If the platelet count was 3,000 per mm<sup>3</sup> all respondents would provide IVIG's. For persistence of low platelet count (12,000 per mm<sup>3</sup>) 55% would repeat/continue drug therapy, 18% stop, and 27% switch therapies with general agreement (64%) against the use of rituximab.

**Conclusion** Experts in Lebanon have shown that they favor an interventionist approach in the treatment of ITP. Current treatments are not curative and this raises the question whether platelet counts should be the main factor guiding treatment decisions. There was no consensus among this group on second-line treatment and a desire for novel therapies that target immunomodulation.