

# Immune thrombocytopenia (ITP)



## Information for patients

This leaflet explains what immune thrombocytopenia is, how it is diagnosed and the principles of treatment. If you have any questions, please contact our team – see page three for details.

### Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

**If we don't ask these questions, then please ask us to check.**

Ensuring your safety is our primary concern.

## What is ITP?

ITP is an autoimmune condition that causes a low platelet count. Platelets are a type of blood cell needed to form a blood clot after a cut or injury to prevent bleeding and bruising. In ITP, your body's immune system mistakenly targets platelets and starts to break them down. Fewer platelets are also made by the body. This results in lower numbers of circulating platelets.

- When you develop this condition suddenly, it is classified as **acute ITP**
- If the platelet count remains low for three months or more, it is termed **persistent ITP**
- If the platelet count remains low after 12 months or more, it is referred to as **chronic ITP**

## Why do I have ITP?

ITP may develop after a viral infection, vaccination or after taking certain medications. However, often the cause is unknown. ITP can also develop in people with other autoimmune conditions such as rheumatoid arthritis or systemic lupus erythematosus.

## How common is ITP?

ITP affects people of all ages and it is more common in females than males. About six in every 100,000 adults in the UK have the condition.

## What are the symptoms of ITP?

Some patients with ITP have no symptoms at all and their low platelet count is picked up on a routine blood test. Even patients who have very low platelet counts will often have very few symptoms.

A low platelet count can cause certain types of bleeding symptoms, including bruising, a pinprick rash of blood spots (petechiae), nosebleeds, gum bleeds, mouth blood blisters (which look dark purple or black), blood in your urine or stools, fatigue and heavy periods.



Rarely, if your platelet count is very low (less than  $10 \times 10^9/l$ ), you are at risk of bleeding in the brain (intracranial haemorrhage).

## How is ITP diagnosed?

There is no specific test to diagnose ITP, but is considered when a blood test shows a low platelet count. There are various causes for a low platelet count, therefore additional blood tests are usually needed to exclude other conditions before a diagnosis of ITP is made. Sometimes, additional tests such as an abdominal ultrasound or bone marrow biopsy may be required.

## What is the treatment for ITP?

Not every patient who is diagnosed with ITP needs treatment. A platelet count below  $150 \times 10^9/l$  is considered low, but it is rare to have symptoms such as bleeding or bruising unless the platelet count is less than  $30 \times 10^9/l$ . The aim of treatment is to achieve a safe platelet count and to control symptoms. If this approach is needed, initial treatment is commonly with short-term oral steroids. If ineffective or not suitable, there are several options for treatment, which can be explored with your clinical team.

## Frequently asked questions

### When should I seek urgent medical help?

If you have any of the symptoms below, call 111 or attend your nearest Emergency Department (ED/A&E).

- Severe headache with drowsiness, vomiting or loss of vision.
- A nose bleed lasting more than 30 minutes.
- Black stools or blood in your stools.
- Blood in your urine.
- Other excessive bleeding or bruising.

## **When should I contact the ITP team?**

If you develop a pinprick rash (petechiae) and/or blood-blisters in your mouth (but without the symptoms listed above), please contact the ITP team so we can arrange for you to have a blood test.

If you are experiencing side effects from the treatment or have other concerns you would like to discuss, please contact us – see below for our details.

## **Can I still take over-the-counter medication?**

There are several drugs such as aspirin and ibuprofen that you must not take because they may increase your risk of bleeding. Before starting any new medications, always let the pharmacist know you have ITP and ask for their advice.

## **Do I need to eat a special diet?**

There is no evidence that any particular food will increase your platelet count. You may be given specific advice about what to eat depending on the medication you are taking. Otherwise, we recommend you eat a normal varied and healthy diet.

## **Can I still work?**

Most people with ITP are able to work and it should not affect your employment opportunities. Depending on what type of job you do, your employer may have to do a risk assessment if there is a significant risk of injury.

## **Can I play sports and exercise?**

Yes, but it is advisable to avoid contact sports and wear protective equipment such as helmets when cycling.



## How do I explain my condition to other people?

If you wish to tell people, you can explain that you have a condition that means you can be at increased risk of bleeding due to lower numbers of platelets. ITP is not contagious and not inherited.

## How do I contact the ITP team?

You can contact us 9am – 4pm, Monday to Friday (not bank holidays). If you have an urgent query outside of these hours, call 111 or go to your local Emergency Department (ED/A&E).

ITP team @ King's College Hospital, Denmark Hill  
Tel: **020 3299 5553** Email: **kch-tr.itp@nhs.net**

ITP team @ Princess Royal University Hospital  
Tel: **01689 864263** Email: **kch-tr.itppruh@nhs.net**

## More information

### UK ITP Forum

[ukitpforum.org](http://ukitpforum.org)

### ITP Support Association

[itpsupport.org.uk](http://itpsupport.org.uk)

## Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.



## Care provided by students

King's is a teaching hospital where our students gain practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

## PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. It can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: **020 3299 3601**

Email: **[kch-tr.palsdh@nhs.net](mailto:kch-tr.palsdh@nhs.net)**

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND

Tel: **01689 863252**

Email: **[kch-tr.palspruh@nhs.net](mailto:kch-tr.palspruh@nhs.net)**

**If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email [kch-tr.accessibility@nhs.net](mailto:kch-tr.accessibility@nhs.net)**