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Immune Thrombocytopenic Purpura (ITP)

Patient information leaflet

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式,请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أُخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

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What is Immune Thrombocytopenic Purpura (ITP)?

ITP is a blood disorder. With this disease, you have a lower amount of platelets than normal in your blood. Platelets are blood cell fragments that help with blood clotting. Having fewer platelets can cause easy bruising, bleeding gums, and internal bleeding.

ITP is a rare autoimmune blood disorder that both children and adults can develop. ITP is caused by an immune reaction against your own platelets. This means that your body's immune system attacks your platelets by mistake.

This immune system mistake may happen due to any of the following:

- Medicines (including over the counter medications) which can cause an allergy that cross-reacts with platelets.
- Infections that set off the immune reaction that leads to ITP.
 These are often viral infections, including the viruses that cause chickenpox.
- Sometimes the cause is not known.

Signs and symptoms:

- ITP presents itself with bruising and very small purple spots.
 These spots can be found in the mouth, gums and lips and bruising may appear on the arms and legs. It is caused by the bleeding of tiny blood vessels just under the skin.
- Sometimes your child's urine looks pink as it may contain a small amount of blood.

Our usual form of treatment is:

Whilst your child is in hospital, various tests will be carried out to help find the cause, but often no cause is found. Some tests include blood samples and urine tests. In some cases treatment is required.

This can be given in one of two ways:

- Oral steroids these can reduce the bleeding from the tiny blood vessels.
- Intravenous immunoglobulins these prevent the destruction of platelets.

The child's temperature, heart rate and blood pressure will be monitored by nursing staff at regular intervals and their urine will be tested to identify blood content. Your child will need to rest, whilst in hospital and at home, and be protected from any injuries. Most children usually recover within a few weeks or months whether or not treatment has been given.

The benefits of treatment/management:

Doctors at the hospital will advise you how long your child should rest for and when they can resume school/activities. You may be given an appointment to return to the hospital for your child to have a repeat blood test. This is to check if the number of platelets are increasing back to a normal range. Always continue to give your child the prescribed medication and only stop when instructed to do so by your doctor/nurse.

There are no alternative treatments and no risks linked with the treatment.

Page 1 Page 2