Use and effectiveness of eltrombopag in a tertiary hospital


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INTRODUCTION

Eltrombopag is authorized by the EMA for adult chronic immune thrombocytopenic purpura (ITP) splenectomised patients who are refractory to other treatments and as second-line treatment for non-splenectomised patients for whom surgery is contraindicated. Eltrombopag was effective in 59% of patients in a randomized controlled trial.1

OBJECTIVES

1) To determine whether eltrombopag is prescribed according to the approved indications.
2) To observe the effect on platelet levels.

METHODS

Observational study. We included patients treated with eltrombopag from 01/01/2011 to 31/08/2011. Variables: demographics, diagnosis, previous treatments, duration, rescue medication, changes in platelet levels, and reason for suspension (where applicable).

RESULTS

N= 7

Previous treatments
- First line treatment: all have received corticosteroids and immunoglobulins
- Second line treatment: all were refractory to at least 2 of the follow treatments:
  - Immunosuppressants (3 patients)
  - Rituximab (3)
  - Vinca alkaloids (2)
  - Tranhexamic acid (3)
  - Romiplostim (2)

Demographics
- Sex: 4 males; 3 females.
- Median age: 65 years old.

Diagnosis
- ITP: 6
- Multifactorial essential thrombocytopenia: 1

Splenectomy (patients with ITP)
- One patient splenectomised
- 5 not splenectomised:
  - Old age (3 patients)
  - Multiple comorbidities (1)
  - Refusal (1)

Duration and effectiveness

Continued treatment: 3 patients (median interval from onset, 46 days)
3 of 3 increased platelet levels from baseline and maintained levels >50 x 10^3/µL

Stopped treatment: 4 patients (median duration, 87 days)
3 did not increased platelet levels
1 had uncontrolled bleeding events

Connor with immunoglobulins

CONCLUSIONS

Eltrombopag was prescribed according to the approved indication in 6 out of 7 patients and was effective in half of the patients with ITP. Despite our small study population, the percentage of responders was similar to that found by Bussel et al.

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