

Can my child do normal activity?

Your child should avoid vigorous activity which may lead to an injury whilst their platelet count is very low (less than 10). This includes sports, climbing frames, and rough play.

As the platelet count rises, more activity will be allowed, but contact sports, cycling and other rough physical activity should be avoided until your child's doctor advises.

When will my child return to normal?

In most children the condition will settle down quite quickly. Their platelet count is often up to safe levels within a week or two, but it may take longer to fully return to normal.

In a very small number of children, their platelet count does not return to normal even after 6 to 12 months, and further treatment may be needed. Viral infections may occasionally cause a relapse.

Always come back to the Children's emergency Department or seek urgent medical attention if your child has any serious bleeding. e.g. a nose bleed that won't stop, or symptoms such as vomiting, drowsiness and severe headache, particularly after a head injury.

Useful numbers

Practice Plus (Brighton walk-in centre / GP service) 0333 321 0946
Open every day from 8am to 8pm, including bank holidays.
www.practiceplusbrightonstation.nhs.uk

For out of hours GP service or advice ring **NHS 111**

Royal Alexandra Children's Hospital
01273 696955 Ext. 2593
Children's Emergency Department

Please be aware that CED staff will not be able to give you medical advice over the telephone.

Always dial 999 for an ambulance in an emergency



Produced by the Department of Paediatric Surgery & Urology and the Children's Emergency Department.

Authors: Dr K Patel, Dr L Wright, Dr M Lazner, Dr C Wynne
Ref number: 1018

Publication date: November 2019. Review date: November 2021



© Brighton and Sussex University Hospitals NHS Trust
Disclaimer: The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

the alex

Idiopathic Thrombocytopenic Purpura (ITP)

Children's Emergency Department

What is Idiopathic thrombocytopenic purpura (ITP)?

ITP is a blood disorder affecting the platelets. It happens when there are not enough platelets in the blood.

Platelets are the blood cells that help clot the blood. If your child doesn't have enough of them then they will bruise easily and may have other bleeding problems. The normal platelet count is between 150 and 400 x 10⁹/L. In ITP the platelet count can fall to below 20 x 10⁹/L.

What causes ITP?

The disorder is caused when lymph tissues produce antibodies against platelets. The antibodies destroy the platelets in the spleen. We do not fully understand why the body produces this reaction. In children, the disorder sometimes comes after a viral infection (for example, a cold) which can act as a trigger.

ITP is more common in children than adults. However it only occurs in 4 or 5 out of every 100,000 children, so it is quite rare.

What are the symptoms of ITP?

- Bruising
- Nosebleeds or mouth bleeding
- A rash of pinpoint red spots (also called a petechial rash).

What tests are used to diagnose ITP?

- **Blood tests:** These include a blood count (FBC) with platelet count, a clotting screen to see how well your child's blood clots, and a test to see which blood group your child has.
- **Bone marrow aspiration:** This is very rarely needed. A tiny sample is taken of the liquid part of the soft tissue inside your child's bones.

What are the treatments for ITP?

Your doctor will discuss the best treatment option for your child. The possible options are:

- **No treatment:** The condition may get better on its own. This is the most common method.

- **Treatment with steroids:** Steroids can raise the platelet count more quickly than having no treatment. Prednisolone (taken as a tablet or liquid for 4-14 days), or methylprednisolone (taken as an injection for 3 days) are the two steroids that are used in ITP.
- **Intravenous gamma globulin:** this is a blood product, which is given through a vein. It is sometimes used, but may have side effects.
- **Intravenous anti-Rhesus D immunoglobulin:** a blood product, used occasionally in certain blood types. It is also given through a vein.

You may need to bring your child for blood tests every few weeks to see if the ITP is getting better. It is important that you attend these follow up appointments.

Children with ITP should not take aspirin or ibuprofen because this may make them bleed. Paracetamol is safe.