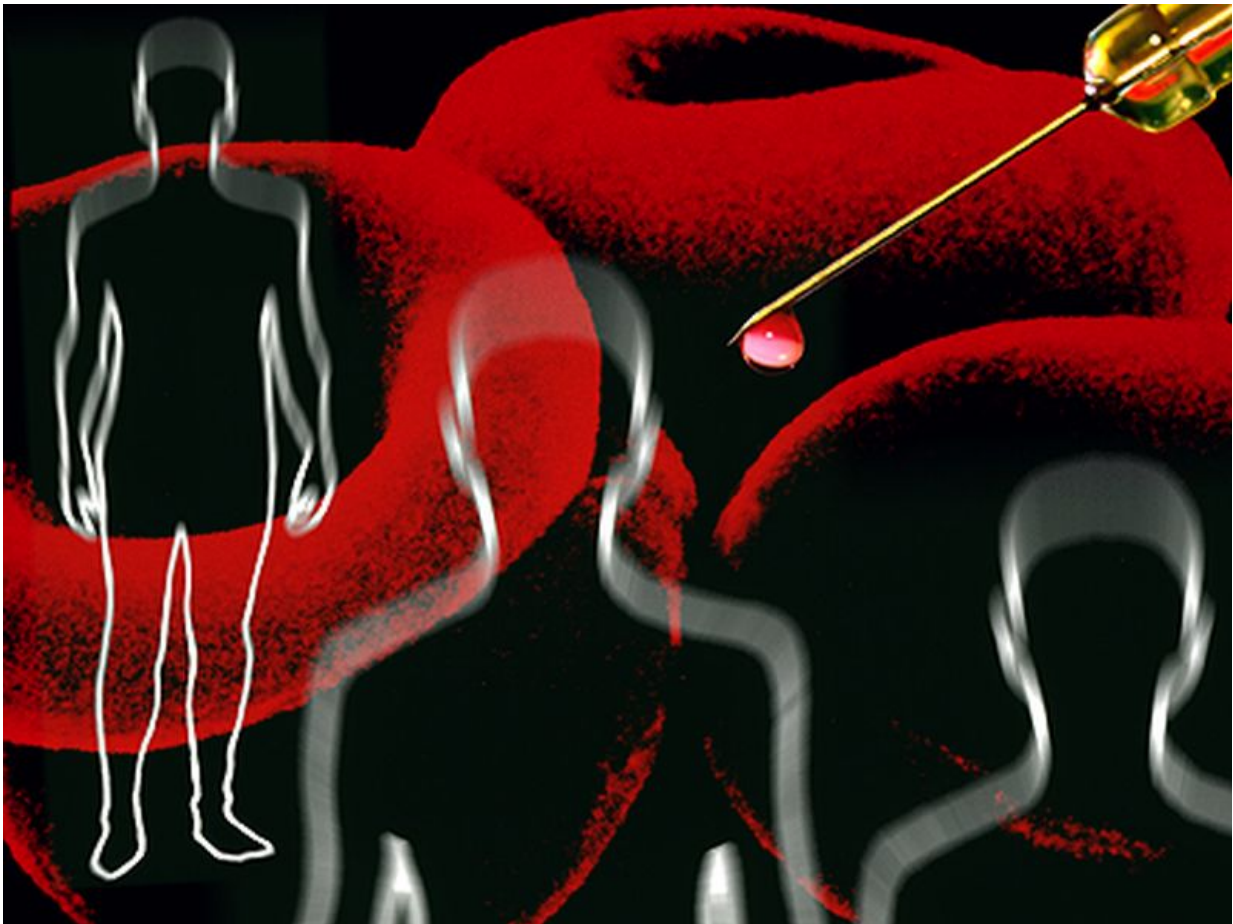


Infection risk up before chronic immune thrombocytopenia

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(HealthDay)—The incidence of primary chronic immune

thrombocytopenia (cITP) is 2.30/100,000 person-years, and incidence is associated with increased risk of infections within the five years before cITP diagnosis, according to a study published online Jan. 21 in the *Journal of Thrombosis and Haemostasis*.

Charlotta Ekstrand, from the Karolinska Institutet in Stockholm, and colleagues examined the correlation of cITP with [infection](#) before [diagnosis](#). Data were included for 1,087 adults with primary cITP identified from the Swedish Patient Register between 2006 and 2012. Using rates from the general population, the authors estimated the standardized incidence ratios (SIRs) as a measure of relative risk.

The researchers found that cITP incidence was 2.30 per 100,000 person-years. There was a correlation for cITP with elevated risk of serious infections requiring inpatient or outpatient care within five years prior to cITP diagnosis (SIR, 8.74). Candidiasis, viral infection of unspecified site, and acute upper respiratory infections had higher magnitude SIRs. The SIR for anti-infective drugs was 1.37; the highest SIRs were seen for amoxicillin, macrolides, nitrofurantoin, and antivirals.

"The findings indicate that infection is not only related to the immunomodulation treatment but also to the disease itself," the authors write.

The Centre for Pharmacology and Epidemiology unit at the Karolinska Institutet collaborates with another university that receives funding from Amgen in the form of research grants.

More information: [Abstract](#)
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