

## Thalidomide cuts recurrent bleeding in small-intestinal angiodysplasia, finds study

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For patients with recurrent bleeding due to small-intestinal angiodysplasia (SIA), thalidomide treatment results in a reduction in



bleeding, according to a study published in the Nov. 2 issue of the *New England Journal of Medicine*.

Huimin Chen, M.D., from the Shanghai Jiao-Tong University School of Medicine, and colleagues examined the efficacy and safety of thalidomide for the treatment of recurrent bleeding due to SIA in a randomized, placebo-controlled trial. A total of 150 patients with recurrent bleeding due to SIA were randomly assigned to thalidomide at an oral daily dose of 100 mg (51 patients) or 50 mg (49 patients) or placebo (50 patients) for four months.

The researchers found that the percentages of patients with an effective response, defined as at least a 50 percent reduction in the number of bleeding episodes during the year after the end of treatment, were 68.6, 51.0, and 16.0 percent, respectively, in the 100-mg thalidomide group, 50-mg thalidomide group, and placebo group, respectively. The secondary end point results supported those of the primary end point.

Overall, the thalidomide groups more often had adverse events, including specific events of constipation, somnolence, limb numbness, peripheral edema, dizziness, and elevated liver-enzyme levels.

"The incidence and volume of blood transfusion, the percentage of <u>patients</u> who were hospitalized for bleeding, the number of hospitalizations for bleeding, and the duration of hospital stays all appeared to be lower in the thalidomide groups than in the <u>placebo group</u>," the authors write.

**More information:** Huimin Chen et al, Thalidomide for Recurrent Bleeding Due to Small-Intestinal Angiodysplasia, *New England Journal of Medicine* (2023). DOI: 10.1056/NEJMoa2303706

Loren Laine, Management of Bleeding Due to Small-Intestinal



## Angiodysplasias, *New England Journal of Medicine* (2023). DOI: 10.1056/NEJMe2310338

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