

Heparin Induced Thrombocytopenia

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1. INTRODUCTION

The incidence of heparin induced thrombocytopenia is around 5.6% in Indian population (4).The incidence around the world is about 0.5% to 5% (3,2). whenever a patient has been started on heparin therapy and count falls below 50000 after 4 days of treatment heparin induced thrombocytopenia is suspected. Here we are reporting a case of infertility patient who had undergone oocyte implantation and was on heparin therapy for increasing endometrial thickness had developed a left lateral sinus thrombosis after 3 days of treatment.

2. CASE REPORT

His female patient aged 30 years had come for infertility treatment. She had embryo implantation done and was being on low molecular weight heparin. The patient was given 5000 IU of subcutaneous heparin per day. She was also on oestrogen therapy. She had a seizure and was investigated which revealed left transverse and sigmoid sinus thrombosis with left Pareto occipital bleed. She also had a platelet count of 60000 and Hb of 7.4%. She had 2 units blood transfused and also 2 units of platelets transfused. She showed no improvement. Her platelets were persistently low. She was suspected of heparin induced thrombocytopenia type 2. She was switched over to tab acitrom. She showed no improvement. In view of low GCS and poor platelet count she was not considered for surgery and was put on elective ventilation. She had deterioration in spite of medications and expired after 1 day of ventilation.

3. DISCUSSION

HIT needs to be diagnosed based on symptoms and appropriate investigations to be done at right time. The main pathology is formation of antibodies against platelet factor 4. Rapid immunoassay technique is the preferred investigation used to diagnose and is routinely used when compared to other methods [6]. Once diagnosed heparin is stopped and alternate drugs like fondaparinux, argatroban, lepirudin are used. Of these three fondaparinux is more commonly used and is effective with lesser incidence of complications.

4. CONCLUSION

In the above mentioned patient the starting of acitrom could have been started once the platelet count is above 150000 which is a minimum platelet count to be considered to start warfarin. Moreover, the non-availability of the above drug served as a hitch to the management. So any patient on heparin therapy should be checked for platelet count after 4 days of starting therapy and once if found any clinical or biochemical abnormality appropriate action to be considered. Below are the pictures of the patient who had been reported.



Figure 1: MR Venogram Showing Nonvisualization Of Left Transverse And Sigmoid Sinus

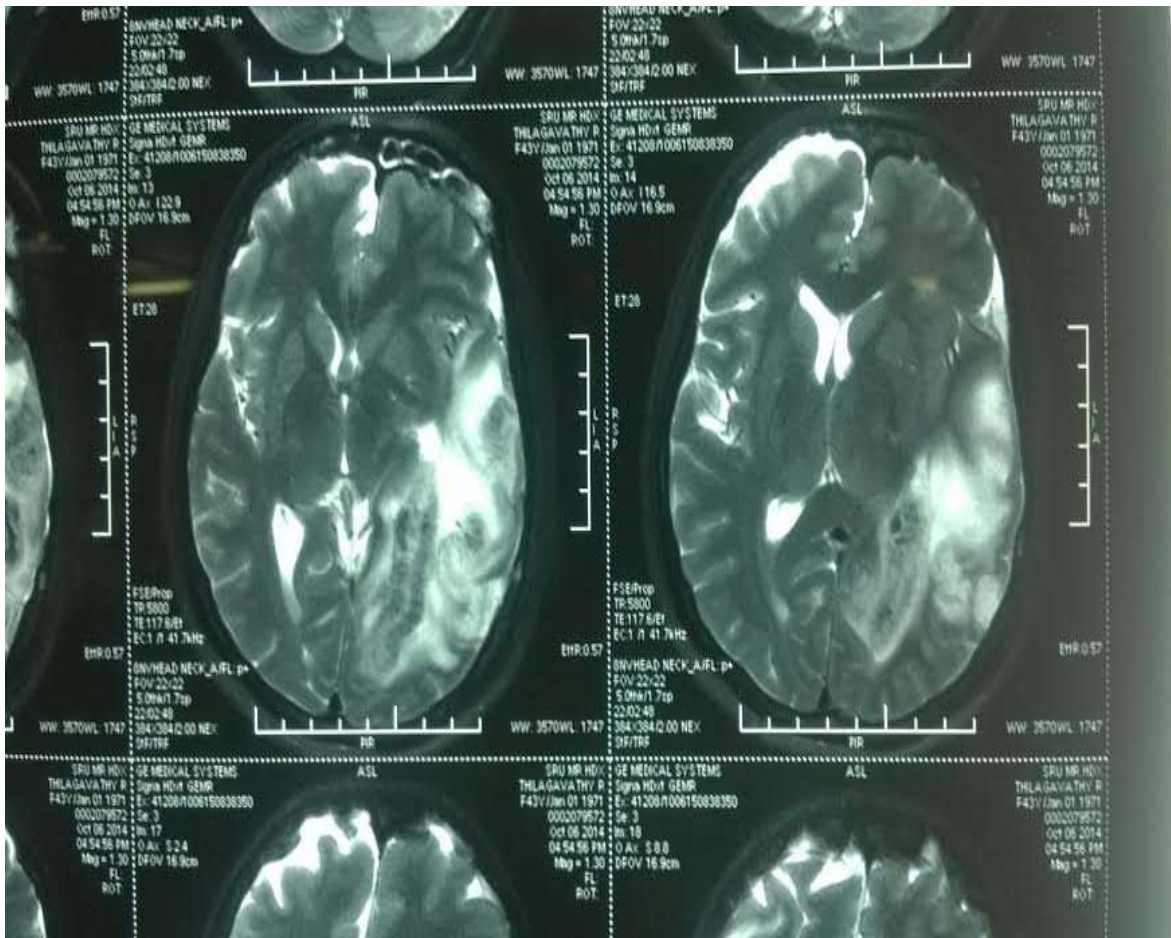


Figure 2: MRI Image Of Left Parieto Occipital Infarct

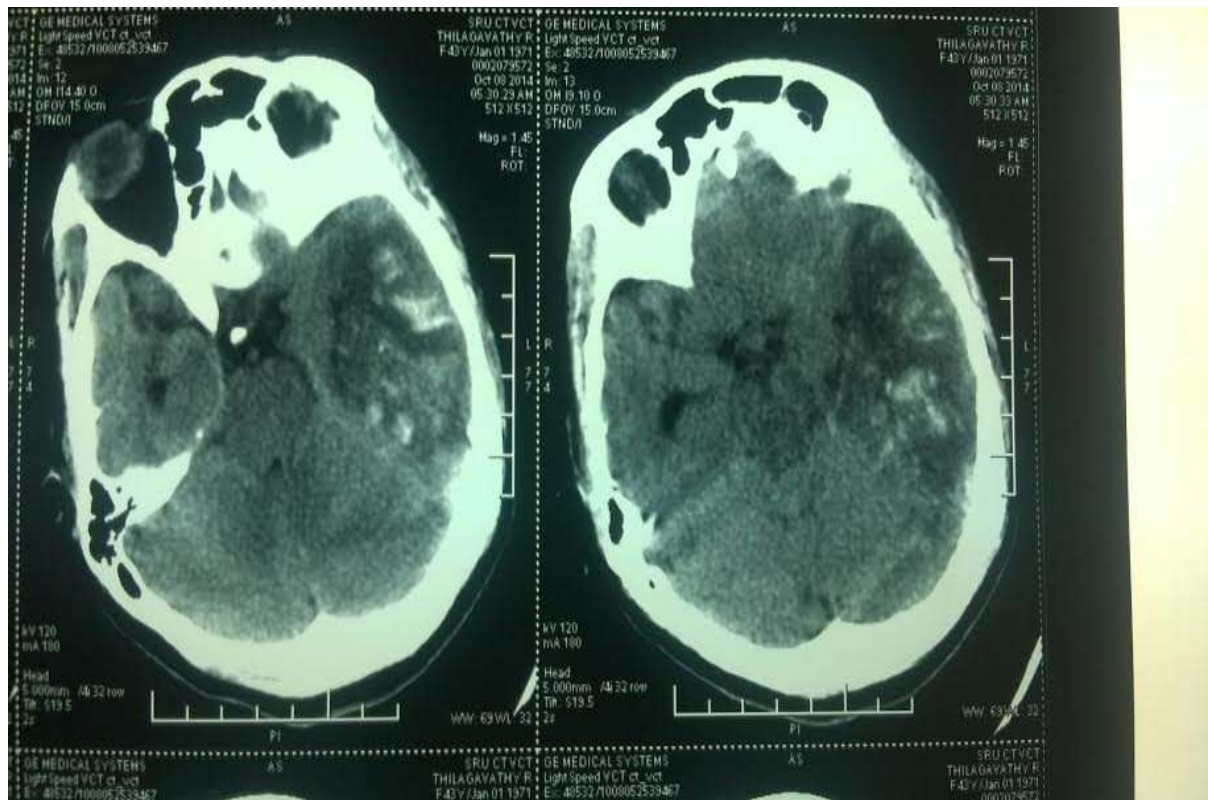


Figure 3: Follow Up CT Scan Showing Haemorrhagic Transformation Of Infarct

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