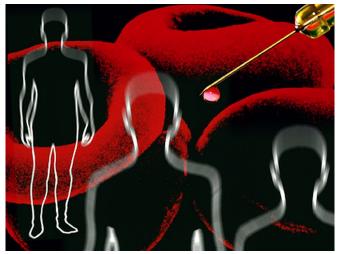


## Low platelet count linked to thrombosis in aPL carriers

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Patients with low platelet count developed thrombosis more frequently than those without among patients with low aPL-S, (hazard ratio, 3.44); regardless of platelet count, patients with high aPL-S developed thrombosis frequently.

"aPL carriers with low platelet count are at high risk of developing thrombosis," the authors write. "In particular, 'low aPL-S carriers' may be stratified by platelet <u>count</u> in terms of predicting future thrombotic events."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: <u>Abstract</u>
<u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—For antiphospholipid antibody (aPL) carriers, low platelet count is associated with increased risk of developing thrombosis, according to a study published online June 29 in the *Journal of Thrombosis and Haemostasis*.

Ryo Hisada, from Hokkaido University in Sapporo, Japan, and colleagues examined the impact of platelet count in terms of predicting thrombotic events in aPL carriers in a retrospective study comprising 953 consecutive patients suspected to have autoimmune disease. Thrombotic risk was stratified by combining platelet count and antiphospholipid score (aPL-S).

The researchers observed a negative correlation between aPL-S and platelet count (r = ?0.2477). Among patients who were aPL-positive, thrombosis developed more frequently in those with low platelet count versus those without (hazard ratio, 2.95). For aPL-negative patients, regardless of platelet count, there was no difference in the predictive value of thrombosis.



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