Comparison of Low-Dose versus Conventional-Dose Prednisolone in the Treatment of Idiopathic Thrombocytopenic Purpura (ITP)

Khalid Abdulla Sharif, MB, MD, MRCP (UK)* Naeema Ahmed Mahmood, MB, MD* Ahmed Jaradat, MB, PhD**

Objective: To assess the efficacy of low-dose prednisolone in patients with ITP.

Design: A Prospective Randomized Controlled Trial.

Setting: Salmaniya Medical Complex, Kingdom of Bahrain.

Method: A randomized controlled trial was conducted comparing the conventional-dose to a low-dose of prednisolone (0.25 mg/kg/day).

Forty-one patients with ITP were enrolled in the study; 21 patients were randomized to low-dose prednisolone (group I) and 20 patients received the conventional-dose (group II).

Result: The overall remission rate (OR) for both groups was 78.05%. There was no statistically significant difference between both groups in terms of group overall remission 17 (81%) versus 15 (75%), group complete remission 11 (52.4%) versus 10 (50%) or partial remission rate 6 (28.6%) versus 6 (25%). In addition, failure rate, relapse rate, and splenectomy rate were similar and not statistically significant. Two (10%) patients developed complications related to steroids therapy, both were in group II, but were not statistically significant.

Conclusion: Although the study had a small number of patients, it revealed that low-dose of prednisolone (0.25 mg/kg/day) is as effective as the conventional-dose (1 mg/kg/day) and probably, safer.

Accordingly, we recommend the use of low-dose prednisolone as initial therapy for ITP rather than the high-dose.

Bahrain Med Bull 2015; 37(4): 230 - 233