

Thrombotic Complications Assessment in Polycythemia

Assaad Ata Abdul Aziz Al Dafter, FICMs, MRCP (UK)*

Objective: To study thrombotic complications in polycythemia patients.

Setting: Hematology clinic, Baghdad Teaching Hospital, Iraq.

Design: Prospective study.

Method: The study was performed from October 2001 till January 2005. Full history, physical examination and appropriate investigations were done to patients diagnosed with polycythemia.

Result: Seventy-seven patients enrolled in this study, 52 patients with Polycythemia Vera, 21 with secondary polycythemia and 4 with spurious polycythemia. Thrombotic complications occurred in 17 (32.69%) patients of the Polycythemia Vera group, out of which acute coronary syndrome was seen in 6 (24%), cerebrovascular accidents in 6 (24%), deep vein thrombosis in 5 (20%), mesenteric artery thrombosis in 5 (20%), portal vein thrombosis in one (4%), hepatic vein thrombosis in one (4%) and erythromelalgia in one (4%). In secondary polycythemia only 3 out of 21, (17.64%) had thrombotic complications.

Patients, with secondary polycythemia and PCV higher than 60, had history of thrombosis in one patient (4.76%) only. Finally, no thrombotic complications in spurious polycythemia were seen.

Conclusion: Thrombotic complications in Polycythemia Vera were common and more frequent in patients with higher PCV, raised platelets count and raised white blood cell count. Hypertension was statistically significant predictor of thrombosis in Polycythemia Vera.

Further research using bigger sample size is suggested. Multicentre study would be advised for this purpose.